

[REDACTED]

2005 [REDACTED] 21

05-IJ8-T168 [REDACTED]
083M

[REDACTED]
Muhmudiyah

[REDACTED]

20-27 [REDACTED] 162-27 [REDACTED]

[REDACTED]

Lack of Evidence- No US Involvement. Need More Info to Include Death Certificates.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]
Captain, U.S. Army
Foreign Claims Commission

000893

Claims Form

Name: [REDACTED] الاسم:

Address: MUMUNDIYA العنوان:

A national citizen of: IRAQ اهل جنسية:

Employed by: Shop-keeper اعمل لدي:

U.S. Military unit or Government Agency involved:

UNK

The damaged property is owned by:

Claimant's mother & son

Location of Incident: MAHMUDIYAH

(Town)

(City)

(Country)

قدم في:

Date of Incident: May 03 2005

Month

Day

Year

Description of Accident/ Incident:

MOTHER & SON Killed in their home by US gunfire

000894

List in detail the expenses resulting from the property damage or personal injury:

Item	Amount
_____	_____
_____	_____
_____	_____

Claimant was insured to the following extent:

Amount Claimed:

\$

I.D.

I (have/ have not) previously filed a claim relating to the incident described above.

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

(Signature of Claimant)

Date: _____ 2005
Month Day Year

000895