

Claims Form

To: United States Army Foreign Claims Commission.

From: Name: _____

POA/ATT: _____

Decedents: _____

Hometown: _____

Iraqi Resident

My claim arose at: _____

(Town) TIKRIT (City) Iraq (Country)

My claim arose on: JAN 17 2005
Month Day Year

Proof of Ownership: ~~None~~ Good - Copy of contract provided
 Interpreter Approved: Will bring original death cert on 28 FEB 05

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): Will bring original copy furnished → COD serial gunshot wounds

Interpreter Approved:

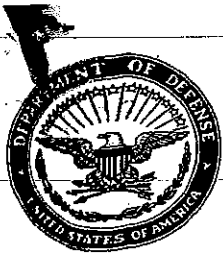
Legal Expert Opinion: Good - had pretranslated - stamps on all Arabic documents
 Interpreter Approved:

Witness Statement(Consistent?): Yes - Issued by JP - Good
 Interpreter Approved:

Give a brief statement of the accident or incident on which the claim for damages to property or for personal injury is based. (Use back of this sheet if necessary.)

- ① US ~~servicemember~~ shot his son from observation tower in Tikrit near the North gate of FOB DANGER
- ② Son was looking for food on the street market due to the fuel crisis - known shop near North gate of FOB DANGER
- ③ Good copy of Death Cert
- ④ Looks good, pending SIGACTS check

7 May 07



DEPARTMENT OF THE ARMY
HEADQUARTERS, 42d INFANTRY DIVISION (Mechanized)
OPERATION IRAQI FREEDOM (FOB LIBERTY)
APO AE 09308

DHFT-JA

MEMORANDUM FOR Claimant

SUBJECT: Claim Denial

1. This is in response to your claim against the United States Government. Your claim has been reviewed under the Foreign Claims Act, 10 U.S.C. 2734, as implemented by Army Regulation 27-20, Chapter 10. I regret to inform you that your claim has been denied.

2. Your claim has been denied for the following reasons:

- (a) There is not enough evidence to prove your claim.
- b. The evidence shows that United States Forces did not cause the damage.
- c. The evidence shows that the damage was caused during combat.
- d. The evidence shows that the damage was caused by your own negligence or wrongdoing.
- e. The evidence shows that your claim was fraudulent.
- f. Other: _____

3. If this is the first time your claim has been viewed by this office, you may submit an appeal. This office must receive the appeal no later than 30 days after receipt of this message. The appeal must also contain additional evidence proving your claim. If the appeal is sent after 30 days has passed, or does not provided additional evidence, then the appeal will be denied.

4. POC is the Tikrit Claims Office at DNVT 553-3362.

[Redacted signature]

CPT, JA
Foreign Claims Commissioner

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