

[REDACTED]

[REDACTED]

[REDACTED]

05-IJ8-T533 [REDACTED]
273M

[REDACTED]
Mahmudiyah

[REDACTED]

[REDACTED]
20-27 [REDACTED] 2734 [REDACTED] 1 قانو [REDACTED] 162-27 [REDACTED]

[REDACTED]

Claim already submitted.

[REDACTED]

[REDACTED] 20-27 [REDACTED]

[REDACTED]

Captain, U.S. Army
Foreign Claims Commission

MAHMUDIYAH CLAIMS FORM

CLAIMANT INFORMATION

NAME: _____
ADDRESS: _____ ID#: _____
OCCUPATION: _____ CITIZENSHIP: _____

INCIDENT INFORMATION

TYPE OF CLAIM: () Vehicle Accident SAF () Raid () Detainee Property
() Occupied Land () Other

LOCATION OF INCIDENT: _____ DATE OF INCIDENT: 9 July 2005

DESCRIPTION OF INCIDENT: DRIVING SAW US CONVOY: STOPPED.
SHOOTING KILLED BROTHER. INJURED OTHER OCCUPANTS.
US EVAC'ED KIA BY HELICOPTER TRUCK STOLEN.
RELEASED BODY TRUCK 1981

UNIT INVOLVED: B/148th

CLAIM INFORMATION

OWNER OF PROPERTY: _____ BREAKDOWN OF CLAIM: ⁷⁵
TRUCK 7500

TOTAL AMOUNT CLAIMED: _____

INSURED?: Y/N AMOUNT: _____

CLAIMANT ATTESTATION

HAS CLAIM BEEN FILED BEFORE?: Y/N LOCATION AND OUTCOME: _____

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.

(DATE)

(Signature of Claimant)

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