

**U.S. GOVERNMENT
PURCHASE ORDER - INVOICE-VOUCHER**

DATE OF ORDER: 22 MAR 05 ORDER NO.: 256 BCT-061
 PRINT NAME AND ADDRESS OF SELLER (Number, Street, and State)* (Phone)

PAYEE: [REDACTED] Baghdad, [REDACTED]
 Yousifiyah [REDACTED]
 [REDACTED]
 [REDACTED]
 PAID AT: Al-Mahumudyah GIC [REDACTED]

Furnish Supplies or Services to (Name and address)

SUPPLIES AND SERVICES	QTY	UNIT PRICE	AMOUNT
Death of Father	1	\$2,500	\$2,500

AGENCY NAME AND BILLING ADDRESS*
 P 15TH FIN BN
 A NORTH VICTORY
 Y
 O
 R

TOTAL \$ 2,500
 DISCOUNT TERMS
 DATE INVOICE RECEIVED

ORDERED BY (Signature and title) [REDACTED]
 SFC [REDACTED] PPO
 PURPOSE AND ACCOUNTING DATA
 21422200000 762084 P136 19800 26EB 83 G3CV G3CV 83 S09078
 APF 3ID 50810052 \$50,000.00

PURCHASER - To sign below for over-the-counter delivery of items

RECEIVED BY: N/A
 TITLE: N/A DATE: N/A

SELLER

PAYMENT REQUESTED PAYMENT REQUESTED
 \$ 2,500
NO FURTHER INVOICE NEED BE SUBMITTED

SELLER: [REDACTED] DATE: 23 MAR 05

Signature: [REDACTED]
 I certify that this account is correct and proper for payment in the amount of \$ 2,500

DIFFERENCES: NONE
 ACCOUNT VERIFIED CORRECT FOR BY: [REDACTED] MSG

Authorized certifying officer
 PAID BY: CASH DATE PAID: VOUCHER NO.:
 OR (Check No.):

*PLEASE INCLUDE ZIP CODE STANDARD FORM 44A (Rev. 10-83) PRESCRIBED BY GSA FAR (48 CFR) 53.213(c)

001655



DEPARTMENT OF THE ARMY
HEADQUARTERS, 256th BRIGADE COMBAT TEAM
CAMP AL-THAREER, IRAQ
APO AE 09344

ATZQ-256BCT-SJA

18 March 2005

MEMORANDUM THRU Comptroller, 3d Infantry Division

FOR Chief of Staff, 3d Infantry Division

SUBJECT: Type of Condolence Payment (Death) 256-BCT-055 061

1. NAME OF RECIPIENT: [REDACTED]
2. DATE OF INCIDENT OR DAMAGE: 08JAN05
3. LOCATION OF INCIDENT OR DAMAGE: Yousifiyah area, Baghdad
4. DESCRIPTION: While traveling in the Yousifiyah area of Baghdad, a U.S. convoy received fire from Anti-Iraqi Forces. When they returned fire, the claimant's father was near the area and was shot. The victim was taken to the 86th Combat Support Hospital, where he was pronounced dead at 081825JAN05.
5. JUSTIFICATION: By making this condolence payment, MNF ensures the family and community recognize the MNFs' sympathy for the unfortunate loss. Support will positively influence both the community and local Iraqi leaders.
6. AMOUNT OF PAYMENT: \$2,500 Death of Father
7. POINT OF CONTACT: MAJ [REDACTED], Claims Judge Advocate. VOIP 242-4924, NIPR: [REDACTED]@us.army.mil. Reference foreign claim # 13-3, filed at Al-Mahumudayh.

[REDACTED]
[REDACTED]
[REDACTED]
BG, U.S. ARMY
Commanding

I concur with the payment.

[REDACTED]
[REDACTED]
[REDACTED]
LTC, JA
Staff Judge Advocate

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