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### TF Band of Brothers Claims Chronology Sheet

Claimant's Name: File Number: \_\_\_\_\_

Date	Action Taken (Checked Sig Acts/ Phoned/Visited/etc.)	Initials
Vo	SIGACTS investigation (overland)	
	- IA BIN received SAF AIT	
	luas was closed in winder	
	516ACTS investigation (precled):  -IA Btn received SAF, ATT  hiding in roeds near count.  2 AIF KIR	_
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10-178-133 24 Janos



#### DEPARTMENT OF THE ARMY

HEADQUARTERS, 101<sup>ST</sup> AIRBORNE DIVISION (AIR ASSAULT)
TASK FORCE BAND OF BROTHERS
FORWARD OPERATING BASE SPEICHER
APO AE 09393

AFZB-JA-C

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:
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- 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 101<sup>st</sup> Airborne Division (Air Assault) Claims Office at DSN (b)(2)High

(b)(3), (b)(6)

CPT, FCC Foreign Claims Commissioner



#### DEPARTMENT OF THE ARMY

OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

20 January 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of

(b)(6)

, 06-IR8-133

1. Identifying Data:

(b)(6)

- 2. Date and place the incident occurred giving rise to the claim: The claim occurred on 27 August, 2005 in Ad Duloyia, Iraq.
- 3. Amount of claim and date it was filed: Claimant filed a claim for \$10,000 on 17 Jan. 2006.
- 4. **Jurisdiction:** This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was properly filed in a timely manner.
- 5. Facts: Claimant alleges that her husband and son were killed by CF when they were herding water buffalo. The two decedants were allegedy migrant workers setting up temporary housing along the river bank. A SIGACTS investigation revealed that an IA battatlion received small arms fire from AIF hiding in the reeds along the canal. TF 1-15 responded to the attack and killed 2 AIF.
- 6. **Opinion:** "Under AR 27-20, paragraph 10-3, Claims arising "directly or indirectly" from combat activities of the U.S. Armed Forces are not payable. AR 27-20 defines combat activities as, "Activities resulting directly or indirectly from action by the enemy, or by the U.S. Armed Forces engaged in armed conflict, or in immediate preparation for impending armed conflict." Here, the CF activity in question constitutes combat activity which precludes compensation. Additionally, it is againt public policy to pay for claims for the deaths of AIF.
- 7. Recommendation: The claim is denied

(b)(3)(b)(6)

(b)(3), (b)(6)

(b)(3),(b)(6)

CPT, JA Claims Judge Advocate

### الموضوع /انكار قضية

ب- ان الشكوى التي قدمتها قد تم رفضها للاسباب التالية :

. ٨ - لم توجد ادلة كافية لتثبت صحة القضية .

. B. الادلة تبين ان قوات التحالف لم تتسبب بالحادث.

الادلة تبين ان الاضرار قد حصلت اثناء مصادمات .

D- الادلة تبين ان الحادث قد حصل نتيجة اهمالك او الخطيء الذي تسببت فيه .

E- الادلة بينت ان الشكوى التي قدمتها هي محاولة احتيال .

ج- اذا كان هذا هو الوقت الاول بان قضيتك ينظر بها في هذا المكتب بستطيع ان تقدم استئناف وهذا المكتب يجب ان ياخذه خلال (30)

يوما من استلام هذه المذكر للاستئناف كذلك يجب ان يجلب المشتكي المزيد من المستمسكات لاثبات صحة القضية اذا ارسلت الاستئناف فيما بعد او لم تظيف مستمسكات اخرى سوف ترفض القضية للمرة الثانية.

Foreign Language Text

د المزيد من المعلومات الكبتن جوزيف بيركان 5533362 .

New

Evidence En Appeal

# An Issue of mayor and witnesses

My name is ( (b)(6) . A was living with my family in a countryside cottage. (b)(6)

This place contains thick reed. At the time my husband and his son were leading the buffaloes inside the reed searching their food, they had faced fire shots from a gun. They all had been killed, the two men and the buffaloes. I had not received any compensation for the loss of my husband and my son. I also catched by material and spiritual catch for the loss of them. I am from a poor family and there is no one who can help me. 2 ask you your help in paying a compensation for me to all these damages. I hope your sympathy that could help me. I agree that one of your soldier presented his sympathy and apology at the minute of this event. The translater who was with your soldiers told me their apology. They also told me that I must come to your camp and ask for the compensation. They also told me that was not their aim. They also repeated their apology and said that they had not intended to make these damages to me. And after two days three hammers came to the place of the event. One of the soldier faced me and repeated his apology again. He also told me that we did not know that you are bringing up buffoloes in this place. He also added that no one of us knows that you are in this cottage since

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file not legible, Nonresponsive

did not take care in our housing. For all this first of all I thank very much all those men who had presented me their apology and sorry for the event which was not intended. Secondly I ask you to help me in Compensation my loss.

(b)(6)

The mayor

the witness

The witness

(b)(6)

(b)(6)

(b)(6)

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Nonresponsive

My name is (b)(6)

My birth date

is (b)(6)

A live in the executor (b)(6)

(b)(6)

on 27/8/2005, I heard a sound of fire shots.

I tried to arrive the house of 1 (b)(6)

because the sound of these shots were near him. The soldiers there prevented my arrival to the place of the event. I remained standing there until all the hammers withdrew the place. After that the sound of shouting and crying was going on. Then I with all my family went to the place of event to see what had happened. When we arrived there we saw two men were killed and two buffaloes also killed we know that the Coalition troops shot the fire arbitrary towards the drawinge canal. This canal was full in the thick reed. As a result the shots catched these two men with their buffaloes

(b)(6)

(b)(6) For this reason it was impossible for anyone to see nor the men neither the buffeloes. I here eigree and say that the Coalition troops could not see nor the men neither the buffaloes when they shot. They may only saw a motion inside the reed. This is my witness

The witness

Page 12 redacted for the following reason:
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event.

My name is ( . My birth date I live in the area of (b)(6)on 27/8/2005, I heard a thick sound of fire shots . After a short near the house of ( (b)(6) moment I saw the hammers of the coalition troops stood near the house of ( ). There were also Some soldiers standing near that house. After they withdrew the place with their cars and left the orrea I went with my mother there. There were a loud shouting and crying was going on. when we arrived there we found that the two men and theirtwo buffaloes were killed. Ablanket was put on each one of the men. The distance between the two men and their buffaloes was no more than fifty meters. Then I with my mother accompanied to our house because skeis the woman from Basrah. Then we told her relatives in the event and also we told the police-station in the details of the

The witness

(b)(6)

**CENTCOM 002766** 

This is my witness

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#### DEPARTMENT OF THE ARMY

OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

20 January 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of:

(b)(6)

06-IR8-133

1. Identifying Data

(b)(6)

- 2. Date and place the incident occurred giving rise to the claim: The claim occurred on 27 August, 2005 in Ad Duloyia, Iraq.
- 3. Amount of claim and date it was filed: Claimant filed a claim for \$10,000 on 17 Jan. 2006.
- 4. **Jurisdiction:** This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was properly filed in a timely manner.
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- 6. **Opinion:** "Under AR 27-20, paragraph 10-3, Claims arising "directly or indirectly" from combat activities of the U.S. Armed Forces are not payable. AR 27-20 defines combat activities as, "Activities resulting directly or indirectly from action by the enemy, or by the U.S. Armed Forces engaged in armed conflict, or in immediate preparation for impending armed conflict." Here, the CF activity in question constitutes combat activity which precludes compensation. Additionally, it is againt public policy to pay for claims for the deaths of AIF.

7. **Recommendation:** The claim is denied

(b)(3)(b)(6)

(b)(3), (b)(6)

Claims Judge Advocate

# **TF Band of Brothers Claims Intake Form** To: United States Army Foreign Claims Commission. From: Name: (b)(6)M Power of Attorney provided and interpreter approved:\_ Decedents: Hometown: ☐ Iraqı Kesident: \_ My claim arose at: (Country) (Town) My claim arose on: Month<sup>5</sup> Day Proof of Ownership: ☐ VIN Match:\_ Interpreter Approved: ☐ Interpreter Approved: Bullets it liver - the Medical Report/Legal Expert Opinion: T/Kas Interpreter Approved:\_\_\_\_ ☐ 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.) Wrong tul Death (b)(6)Evidence: Death Cortificates / Oragian

	of property damage and itemized expenses recy: (Attach bills and receipts, if applicable.)	suiting from the property
<u>Item</u>	<u>Amount</u>	
2-	Wrongful drutts	
	Total: 40,00	)
I was insured to the follo	owing extent against the damage or injuries I h	ave sustained:
	NA	
The name and address of (Name)	f my insurer (if any) is:  (Address)	
/ // // /	icate amount in U.S. dollars and local currency	
₽"		
	(b)(6)	
Subscribed before me the	(b)(6) is 12 day of January, 200 6	

# Claims Form

	orce Foreign Claims Comn (b)(6)	nission.
From: Name: Address:-	(b)(6)	• Vento to var.
Address		
I am		
a. Acitizen and	national of: Trag	
b.A permanent	restional of:	Katawan
c. Employed by	/:	
	)An insurer ( ) Not an insu	
c. Check one (	) Asubrogee ( ) Not a sub	nogee
injuries caused by: (Na	ame, Organization ,Military	Sovernment for damages or y Department, Address,
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parent, or guardian, a	is owned by :( If the claim ttach a power of attorney of form below for party sustants	r other evidence of
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the state of the s	Handay Salal Desi (Town) (City)	
My claim arose on:	4ug27	2005
iviy claim arose on.	Month. Day	Year
Give a brief statement	of the accident or incident	on which the claim for
damages to property o	r for personal injury is base	<b>≘d.</b>
(Use back of this sheet	t if necessary.)  the American for	cel total our house
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	or personal injury:( Attach bills	and receipts, if
applicable)	Amount	
Item	Amount	
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	Total:	05
	2 0 3332	
I was insured to the follow	ring extent against the damage or	injuries I have
sustained.		
	and the control of th	
The name and address of r		
The name and address of r	my insurer ( if any) is:	
The name and address of r ( Name)  I claim as damages: ( I	my insurer ( if any) is:  ( Address)	
The name and address of r  ( Name)  I claim as damages: ( I ndicate amount in U.S. do	ny insurer ( if any) is:  ( Address)  llars and local currency)	
The name and address of r  ( Name)  I claim as damages: ( I ndicate amount in U.S. do	my insurer ( if any) is:  ( Address)	
The name and address of r ( Name)  I claim as damages: ( I ndicate amount in U.S. do	ny insurer ( if any) is:  ( Address)  llars and local currency)	
The name and address of r  ( Name)  I claim as damages: ( I ndicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)	
The name and address of recommendation (Name)  I claim as damages: (Indicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)  Signature of Claimant)	
The name and address of recommendation (Name)  I claim as damages: (Indicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)	
The name and address of recommendation (Name)  I claim as damages: (Indicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)  Signature of Claimant)	
The name and address of recommendation (Name)  I claim as damages: (Indicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)  Signature of Claimant)  23—day of — 4 ,2	
The name and address of re (Name)  I claim as damages: (Indicate amount in U.S. do \$	my insurer ( if any) is:  ( Address)  llars and local currency)  local  (b)(6)  Signature of Claimant)  23 day of 2 2 2 2,2	

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# Al- Dulueayi Investigation Court

## SUB/ Damage report

Claimant:-

(b)(6)

According to the decision taken by the court to evaluate the damage happened to the claimant as a result of field in killing her husband 29/8/2005 during the raid ,This cause big damage to the claimant . After seeing the police report and the statement of wittness and pictures and medic report , I evaluate the damage as showen in the following table.

No	Details	Qua	Price\$
1 2	Killing the husbend. Sychological damage happened to the family.	All All	5000 5000

Total price10,000\$

Legal expert

(b)(6)

73/10/2005

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Police Reporte

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Police Report to the Tuelge

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Foreign Language Text

Name.	(b)(6)	
	(b)(6)	الاسم.
Date	M=-16	
	Mar 06 0 - IEE - 32 11	التاريخ  رقم المعام
Reason	May Ob	
Appointment w	/ith (b)(3),(b)(6	ا <b>لسبب</b> (i
Signatu	(b)(3), (	b)(6)