1-1R8-552 to pisol 9 CENTCOM 005277 ____ ٦ 25972

(b)(6) Reason ... C/S... GWP. Appointment with CMOC ... الموعد مع..... التوقيع..... Signature. (b)(6) CENTCOM 005278 25973



DEPARTMENT OF THE ARMY HEADQUARTERS, 3rd BRIGADE COMBAT TEAM OPERATION IRAQI FREEDOM, COB SPEICHER TIKRIT, IRAQ APO AE 09393

AFZP-VA-HQ

I May 2006

CP3AASL0940401-17 MEMORANDUM FOR RECORD

SUBJECT:	Commander's Emergency Response Program payment to	(b)(6)	(Claim
Number 06	-IR8-552)		

1. On 11 August 2005, (b)(6) was shot at by Coalition Forces as she and her husband approached a hasty checkpoint. She was shot in the left side of her head and is now blind in one eye and had to have reconstructive surgery on that side of her face.

2. I certify that CERP funds are available to pay (b)(6) in the amount of \$2,500.00. This is a condolence payment.

3. The request to pay (b)(6) in the amount of \$2,500.00 from CERP has been legally reviewed. There is no legal objection to this payment and it is accordingly approved.

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

CPT, EN Project Purchasing Officer



DEPARTMENT OF THE ARMY HEADQUARTERS, 101st AIRBORNE DIVISION (AIR ASSAULT) TASK FORCE BAND OF BROTHERS COB SPEICHER, IRAQ APO AE 09393

AFZB-JA-C

16 April 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of (b)(6) 6-IR8-552

1. Identifying Data: (b)(6) Samarra, Iraq, by attorney (b)(6)

2. Date and place the incident occurred giving rise to the claim: The claim occurred on 11 August 2005, in Samarra, Iraq.

3. Amount of claim and date it was filed: Claimant filed a claim for \$3,000.00 on 8 April 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 filed in a timely manner.

5. Facts: Claimant alleges that CF were dismounted (standing outside their vehicles on the roadside). As the car that he was in began to pass them, the claimant alleges that the CF started shooting at the car and that claimant's wife was fatally shot in the head. The small arms fire allegedly also resulted in a lost finger and a scarred abdomen of another passenger in the car. (See companion Claim # 6-IR8-551.) The claimant provided a death certificate and a witness statement to support his claim. A SIGACTS investigation of the relevant time and place revealed that the car's driver failed to stop at a CF checkpoint, thus resulting in an escalation of force.

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 driver's failure to stop at the checkpoint necessitated an escalation of force, a combat activity, and thus precludes compensation.

7. Recommendation: The claim is denied.

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

CPT, JA FCC

TF Band of Brothers Claims Intake Form

T

To: United States Ar From: Name:		Commission			
POA/ATT:	(b)(6)	_			
	ttorney provided and	d interpreter appro	oved: kept	GPV 1	
Decedents:_	(b)(6)			aint	
		<u> </u>)	
Hometown:		🛛 Iraqi I	Resident:		
My claim arose at:	Same	wa			-
	(1000)	(City)		(Country)	
My claim arose on:	Aug		O Year	<u>b</u>	-
		Day	rear		
Proof of Ownership:_ VIN Match:					
Interpreter Approved					
merpreter Approved	···				
Death Certificates (N	lame, Cause of Death	n, Age, and Time	of Death Consi	istent with Claim	ant
allegations):					_
_ Cosistan	+ n/stokent Sam	alla Haspill	tal .	<u> </u>	^{(b)(6)}
Interpreter Approv	ed: yes				
Medical Report/Lega	• •				
Witness Statement (C	Consistent?): <u>5</u> ed: 25	ame as 6	-118-551	(add fathe	<u>s - same</u> story
Give a brief statemer personal injury is ba				lamages to prope	erty or for
See F	acts from	<u> </u>	F-J5/		
shot in	rs shot @ ched stomach. wife	gent down	r (mele) (05 rant for the	t finger t p	<u></u>
<u> </u>				······································	
				·	
Evidence:	h cert wit	n255/			·
	/	/			

CENTCOM 005281

List in detail the amount of property damage and itemized expenses resulting from the property damage or personal injury: (Attach bills and receipts, if applicable.) Amount Amount ltem

and Tota

I claim as damages: (Indicate amount in U.S. dollars and l \$ ______ local_____

(b)(6)

(Signature of Claimant)

Subscribed before me this day of <u>April</u>, 2006

(Print

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

(Sign:



.....

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

MEMORANDUM FOR RECORD

SUBJECT: Waiver of Notification

1. I, the Claimant, hereby agree that if I fail to provide any requested evidence to the CMOC Claims Office within sixty (60) days of the date below or to request a written extension of the sixty (60) day period, such inaction shall constitute an affirmative act of abandonment of my claim, and my claim shall be administratively closed in accordance with the provisions of DA PAM 27-162, paragraph 13-3(f).

2. I further agree that if I wait longer than sixty (60) days from the date below to return to the CMOC to receive notification of the final disposition of my claim or to request a written extension of the sixty (60) days period, this failure will result in denial of the claim. The claim will be administratively closed in accordance with the guidance above.

1. أنا المشتكي هذا او فق على قني إذا فشلت في اثبات طلبي بالالمة المكفية الى دائرة الشكاوي (السيماك) خلال مدة (60) ستون يوما من تاريخ اليوم أو طلب التمديد (الأستناف) خلال فترة ستون (60) يوما ,هذا سوف يسبب عدم تكوين تكيد لقضيتي , ويسبب نلك قضيتي سوف تترك و تغلق اداريا طبقا للقلون (د, ب, ام 2-16, من الفقرة 13-3(ف).

2 وقا كذلك اوافق على انى اذا انتظرت لكثر من (60)ستون يوما من الكاريخ المحلد من دائرة (السيماك) لأستلام النتيجة للقرار النهاتي لقضيتي او لطلب التمديد خلال الفترة المحددة وهي (60) ستون يوما .هذا سوهُ يتسبب برفض قضيتي . و القضية سوف تغلق اداريا وفقا للقانون.

(b)(6)

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

Claimant Signature:___

_ day of Apr _ 200_6.

Sworn before _

Pages 8 through 10 redacted for the following reasons: foreign language



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Foreign Language Text

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Foreign Language Text

CENTCOM 005287

Pages 12 through 15 redacted for the following reasons: foreign language