



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

AFZB-JA-C

5 July 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of (b)(6), 6-IT6-056

1. **Identifying Data** (b)(6), Samarra, Iraq

2. **Date and place the incident occurred giving rise to the claim:** The claim occurred on 29 March 2006, in Samarra, Iraq.

3. **Amount of claim and date it was filed:** Claimant filed a claim for \$2500.00 on 27 June 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 CF shot his wife while they were approaching the Samarra General Hospital in their car. The claimant provided death certificates and witness statements to substantiate the claim.

6. **Opinion:** Under AR 27-20, paragraph 10-3, liability under the FCA may be based on acts or omissions of U.S. soldiers or civilian employees of a U.S. military department only if they are considered negligent or wrongful. A search of the SIGACTS and INTSUM for 29 March 2006 reveals no such activity occurring on said date. There is not enough evidence to prove the claim. This claim is non-compensable under the FCA.

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

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

CPT, JA
FCC

CENTCOM 005464

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26118

6-176-056
11 Jul 06



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: Claimant 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 supporting your claim. If the appeal is sent after 30 days have passed, or does not provide additional evidence, then the appeal will be denied.

4. POC is the 101st Airborne Division (Air Assault) Claims Office at DSN (b)(2)High

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

CPT, JA
FCC

CENTCOM 005465

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6-176-056
11 Jul 06



DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
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AFZB-JA-C

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

CPT, JA
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Page 4 redacted for the following reason:

(b)(5)



TF Band of Brothers Claims Intake Form



To: United States Army Foreign Claims Commission.

From: Name: _____ (b)(6) _____

POA/AT _____ (b)(6) _____

Power of Attorney provided and interpreter approved: _____

Decedents: _____

Hometown: Samarra Iraqi Resident: Affirmative

My claim arose at: _____ Samarra (near by Samarra Hospital)
(Town) (City) (Country)

My claim arose on: March 29th 2006
Month Day Year

Proof of Ownership: _____

VIN Match: _____

Interpreter Approved: _____

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): _____ (b)(6) Shot fire to the head and chest - 40 years old, 1500 PM

Interpreter Approved: appeared

Medical Report/Legal Expert Opinion: \$2500

Interpreter Approved: _____

Witness Statement (Consistent?): _____

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.)

In 9/3/2006 the claimant was driving his sedan car, attended the Samarra central hospital because his wife was with him inside ~~the~~ car. She was with (b)(6). The claimant was hurried to get her left to the hospital as soon as he comes. It was the road leads to the hospital blockage recently blockage by CF. When the claimant turned his car into that road that he ~~was~~ deemed it is open and nothing wrong with it. He just turned his car. Some of American Army snipers opened fire to ward them and their car, due to that shot ~~of~~ fire from the snipers the claimant's wife was died according to my statement and my witnesses' statements.

Evidence: _____

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.)

<u>Item</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total: ~~\$~~ 2500 _____

I claim as damages: (Indicate amount in U.S. dollars and local currency)

\$ 2500 _____ local _____

(Signature) (b)(6)

Subscribed before me this 27 day of June, 2006

(Print Name)

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

More research
29 Mar 06

TF Band of Brothers
Foreign Claims Cover Sheet

File #: 6-IT6-056

Name: _____ (b)(6)

POA/ATT: _____ (b)(6)

Date Received: 27th June 2006 **Date of Incident:** 29 March 2006

Claim Amount: \$2500 **Location:** Samarra

Next Apt: 11 July 2006 **Contact Info:** _____

Translation: _____ (b)(3),(b)(6)

Further Investigation:

Contact S-2 **Check Sigacts** No SIGACTS Nothing in INTSUM for 29 MAR

Approved **Denied** (b)(3),(b)(6) Insur. Ev. D

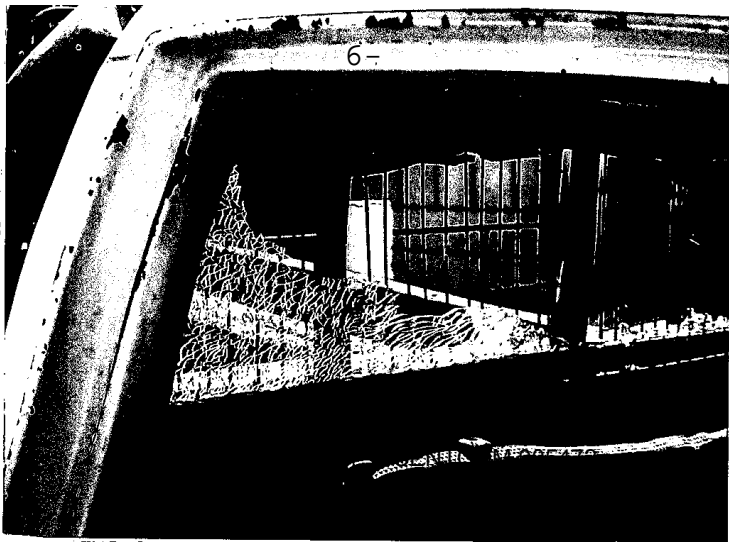
Goodwill Payment recommended: _____
 Approved: _____ **Denied:** _____

MVA **RAID** **LOST** **NEG FIRE** **REAL**
 OTHER: _____

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26125



26126

6-

26127

Nam	(9)(q)	الاسم
Date	11/11/04 11/11/04	التاريخ
Claim No.	6-176-056	رقم المعاملة
Reason	... ع/س	السبب
Appointment with	CMOC	الموعد مع
Signature	(9)(q)(e)(q)	التوقيع
CENTCOM 005474		

467	IED - Detonated	3 BCT- 101	At 090911MAR2006, an IED Detonated against a Ministry of Interior (MOI) 1st Special Police Commando Brigade (CDO) combat patrol in the Salah Ad Din province of Iraq, in Samarra vicinity grid (b)(2)High The MOI CDO patrol was struck by an IED in the traffic circle intersection of 40th STREET and (b)(2)High The IED Detonation resulted in 4x CDO WIA; all four were ground evaced to Patrol Base (PB) RAZOR for medical treatment. UPDATE: An Aero-MEDEVAC was requested and resourced for 2x CDO WIA; 1x open headwound and 1x possible right arm fracture; the WIA were taken to LSAA; 2x CDO WIA are to be released shortly from PB RAZOR and are expected to be Returned To Duty (RTD). MTF. UPDATE: Explosives Ordnance Disposal (EOD) and Weapons Intelligence Team (WIT) are deployed to exploit a dual-laid IED. Post-blast analysis will only be conducted if tactically feasible. CLOSED: 091155MAR2006.	090911MAR2006 Other	(b)(2)High	No
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CENTCOM 005475

Death Certificate 6-

Foreign Language Text, (b)(6)

↳ shot of fire to the head and chest. Age: (b)(6) years old.

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CEI

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26131

W1:

(b)(6)

DOB:

(b)(6)

Job:

Foreign Language Text

Foreign Language Text, (b)(6)

W2:

DOB:

(b)(6)

Job:

Eye-witness.

Foreign Language Text, (b)(6)

CENTCOM 005479

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26133

Page 17 redacted for the following reason:

Foreign Language Text, (b)(6)

Foreign Language Text

Legal Expert Report

Foreign Language Text, (b)(6)

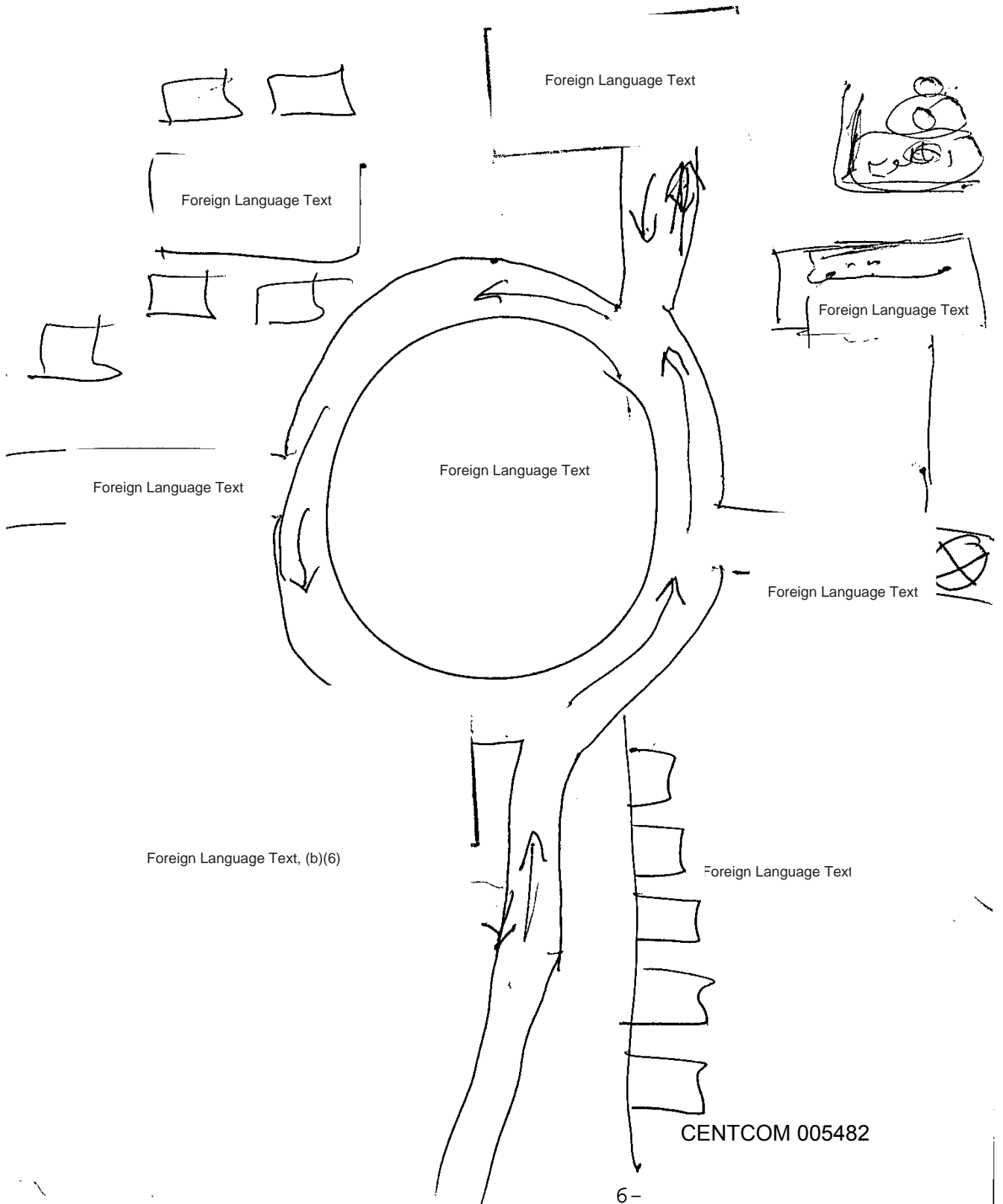
CENTCOM 005481

6-

26135

Diagram of the accident and statement

Foreign Language Text



CENTCOM 005483

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26137

Clasman's Statement
in Police Station 1

Foreign Language Text

Foreign Language Text, (b)(6)

CENTCOM 005484

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CENTCOM 005485

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DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
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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. انا المشتكى هنا اوافق على اني اذا فشلت في اثبات طلبي بالادلة الكافية الى دائرة الشكاوي (السيماك) خلال مدة (60) ستون يوما من تاريخ اليوم او طلب التمديد (الاستئناف) خلال فترة ستون (60) يوما , هذا سوف يسبب عدم تكوين تأكيد لقضيتي , ويسبب ذلك قضيتي سوف تترك و تغلق اداريا طبقا للقانون (د,ا,ب,ايم 162-27, من الفقرة 13-3(ف)).

2. وانا كذلك اوافق على اني اذا انتظرت اكثر من (60) ستون يوما من التاريخ المحدد من دائرة (السيماك) لاستلام النتيجة للقرار النهائي لقضيتي او لطلب التمديد خلال الفترة المحددة وهي (60) ستون يوما , هذا سوف يتسبب برفض قضيتي . و القضية سوف تغلق اداريا وفقا للقانون.

(b)(6)

Claimant Signature _____

Sworn before _____, on ____ day of _____ 200 ____.

CENTCOM 005486

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