

T: (b)(6)

07157T026

PA: A0027-20bDAJA

Filed: 13 Jan 06

(b)(6)

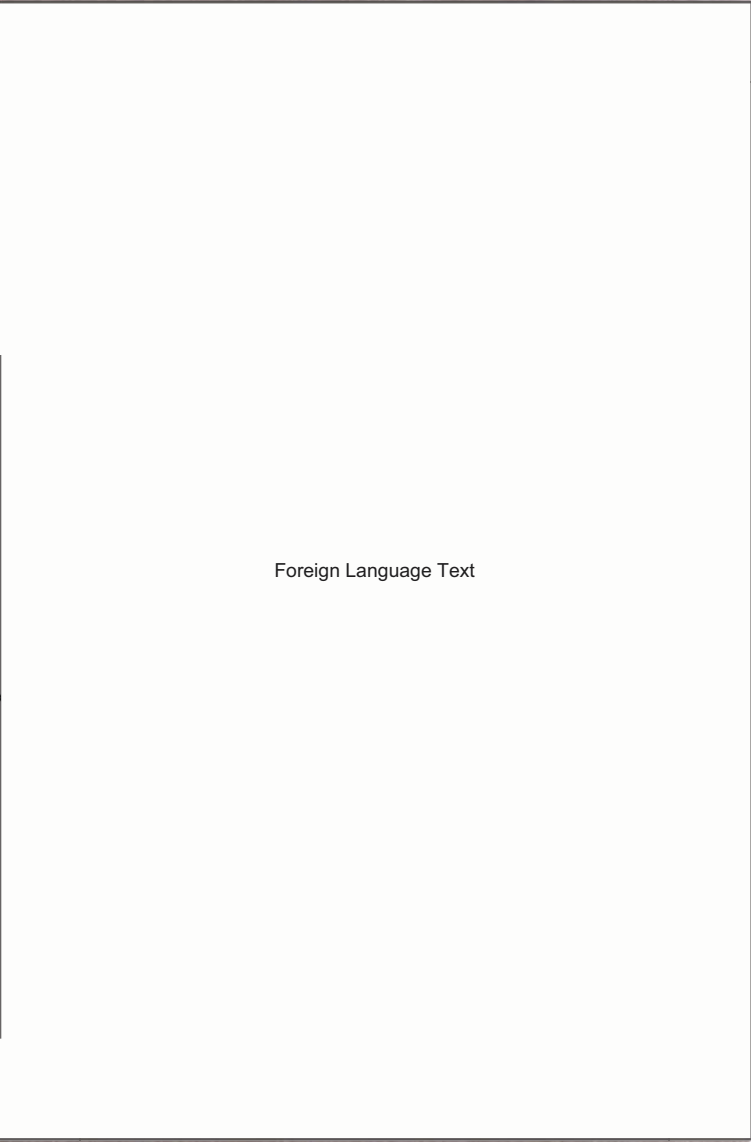
(b)(6)

5000

P.O.C.



Foreign Language Text



Foreign Language Text

CLAIMS CHRONOLOGY SHEET

CLAIMANT'S NAME: (b)(6)

FILE NUMBER: 07157T026 AMOUNT CLAIMED: \$5,000.00

DATE OF INCIDENT: 17 Jan 06 A (b)(6) DATE CLAIM FILED: 13 Jan 07

DATE	STATUS OF CASE	INITIALS
1/14/07	Loggin in; To CPT (b)(3)(b)(6) for review	(b)(3)(b)(6)
23 JAN 07	check SIPR	
9 FEB 07	UPDATE: F.O. Atty., DAMAGE CODES, BASIS CODES	
2/9/07	basic code unknown updated	
28 APR 07	Pay \$5,000.00 lies w/ parents	
30 MAY 07	close	



Tort and Special Claims 1.0.2

Home | Search | Administrator | Reports | Log Out | Request Assistance
SSG (b)(3)(b)(6) COIC of Client Services Wednesday, 30 May 2007

Closed Claims - Claim Data - 07157T026 (b)(6)

Fiscal Year: 01-Oct-2006 - 30-Sep-2007

Current Month: 01-May-2007 - 31-May-2007

Selected Office: 157 - 157 (Iraq)

- Quick Search
- Advanced Search
- Updated Users' Guide
- New Manual Claim
- New Claim
- New Claim-Quick Entry
- New PCE
- My Assigned Claims
- PCEs
- Open Claims
- Closed Claims
- Claim Data
- Claim Summary
- Claimant Info
- Claimant Attorney
- Companion Claims
- Claim Transaction
- Mirror File
- POCs
- Medical Records
- Witness List
- CCRB
- Expert List
- Claim Chronology
- Investigative Plan
- E-mail
- Documents
- AAO Info
- Reverse Mirror File
- Pending Retirements
- Retired Claims
- Transfers
- User Activity
- Mirror Files
- My Tasks and Reminders

Printer Friendly Copy (MS Word) Printer Friendly (Adobe Acrobat) Printer Friendly-Expanded (Adobe Acrobat) Create File Labels (Avery 5162/5262 Compatible)

Claimant's Assertion

Claimant's husband was killed by US Forces.

Claimant Information

Claimant: (b)(6)
 Insured, or Name of Deceased in Estate: (b)(6)
 SSN: (b)(6)
 DOB: (b)(2)High
 Home Phone: (b)(6)
 Address: (b)(6)
 Claimant Attorney: (b)(6)
 Amount: \$5,000.00

Claim Information

Claim ID: 07157T026
 Companion Claim(s):
 Incident: AL RAMADI
 Incident Date: 17-Jan-06
 Date Filed: 14-Jan-07
 Filed in This: (b)(2)High
 Current Owning: (b)(2)High
 Chapters: CHAPTER 10 - FOREIGN
 Damage Codes: DEATH, OTHER - MULTIPLE
 Basis Codes: UNKNOWN
 Incident: OTHER

The Army Team

Field Office Investigator: SSG (b)(3)(b)(6)
 at (b)(2)High, (b)(3)(b)(6)
 Title: (b)(3)(b)(6)
 Field Office Attorney: Cpt (b)(3)(b)(6)
 (b)(2)High, (b)(3)(b)(6)
 Area Action Officer: None Chosen.
 HQ: None Chosen. See POCs
 HQ: None Chosen. See POCs

Final Disposition

Action	Date	Who	Amount
Final Payment Claim	30-May-07	157 (Iraq)	\$5,000.00
Final Payment Claim	30-May-07	157 (Iraq)	\$5,000.00
Final Payment Claim	30-May-07	157 (Iraq)	\$5,000.00

Uploaded Documents
Document Upload Date Who

Claim Retirement Information
Shipment Box Date

(b)(2)High

UNITED STATES ARMED FORCES CLAIMS FORM

I. TO: United States Army Foreign Claims Commission Today's Date 20.12.2006

II. FROM: Name (English) (b)(6)
Name (Arabic) (b)(6)

(a) Circle one: Claimant Attorney Authorized representative Parent Brother Sister Son Daughter
→ [Attorney or representative MUST attach proof of authorization.] Other: victim's wife

(b) IRAQI IDENTIFICATION NUMBER: (b)(6)

(c) DETAINEE IDENTIFICATION NUMBER: _____

III. ADDRESS of person filing claim:
(English): Baghdad (b)(6)
(Arabic): Foreign Language Text Foreign Language Text, (b)(6)

IV. HOME OR CELL PHONE NUMBER (b)(6)

(a) I, the above named claimant/attorney/representative, certify that I (or the person on whose behalf I am making this claim) am a resident of victim's wife

(b) I hereby make a claim against the UNITED STATES GOVERNMENT for damages or injuries caused by the following military unit: _____

(c) The property damaged is owned by: _____

(d) The incident happened on 17.1.2006 at (b)(6) province.
(Date) (city/town/neighborhood/highway name & number)

V. The facts of the incident are as follows: claimant states that he - her husband (b)(6) with his friend were traveling on the highway from Jordan to Baghdad. There are an American tank parked on the right road in area called five kilometers region, this area faraway five kilometers from Al-Ramadi city, the American soldier jump to the roof of the tank and fired one bullet led to the injury of her husband and his death immediately, the victim was sitting near his friend who was driving his car type kia color black. His friend carried the victim body to Al-Ramadi hospital.

Note the claimant is responsible for a family of three sons, the incident happened at four o'clock p.m. Page 1 of 2

٠٧١٥٦٧٠٢٤٠
قبول بالتوقيع من قبل المدعى (المطالب)

I, the claimant by signing this document and accepting payment, am releasing the United States Military and the United States Government from any further liability resulting from this claim and accepting this payment as final settlement on this claim.

أنا المدعى (المطالب) بالامضاء و بالتوقيع على تلك الاستمارة و الموافقة على العرض (المبلغ) ان يقررا عن حق الكافل و الأبناء الكافل للقوات العسكرية الأمريكية أو حكومتها الولايات المتحدة الأمريكية من أي مسؤولية مقابلة تنتج من المطالب و الموافقة على المبلغ المعروف عن انه عرضي نهائي... و ليس من حق والى الورثة من مدعى وأولياء شخص متضرر أو غير متضرر القيام بأي عمل قانوني أو غير قانوني ضد القوات العسكرية الأمريكية أو الولايات المتحدة الأمريكية من المستقبل

Name of Claimant: [Redacted] (b)(6)
FCC #: IS7 [Redacted] (b)(6)
Amount Received: [Redacted] (b)(6)
Date Received: MAY 29 2007
OSIA POC: (DSN) 318-822-2864

Office copy

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT OF THE ARMY
 15th Finance Battalion
 Camp Liberty, Iraq
 APO AF 09544
 DSSN 4779

DATE VOUCHER PREPARED: **MAY 3 2007**
 CONTRACT NUMBER AND DATE:
 REQUISITION NUMBER AND DATE:

PAYEE'S NAME AND ADDRESS: **071577020**

DATE INVOICE RECEIVED:
 DISCOUNT TERMS:
 PAYEE'S ACCOUNT NUMBER:

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	DESCRIPTION OF SERVICES	QUANTITY	UNIT PRICE	AMOUNT
		Claim Payment Final Payment of PCA Claim			(b)(6)
In full settlement of the amount allowed by the Secretary of the Army, or an officer duly designated for such purposes under authority of 31 U.S.C. 3721 and AR 27-29, Chapter 19, upon the claim of the above named claimant for property damaged, lost, destroyed, captured, or abandoned in service.					
TOTAL					(b)(6)

PAYMENT APPROVED FOR: \$5.00
 EXCHANGE RATE: \$1.00
 DIFFERENCE:

PROVISIONAL BY: (b)(3)(b)(6)
 COMPLETE BY: (b)(3)(b)(6)
 PARTIAL BY: (b)(3)(b)(6)
 FINAL BY: (b)(3)(b)(6)
 PROCURE CL: (b)(3)(b)(6)
 ADVANCE: Pay Agent

DATE: **MAY 3 2007**
 CAPTURED BY: (b)(3)(b)(6)
 TITLE: Captain, Certifying Officer, 157 IAW

ACCOUNTING CLASSIFICATION: (b)(2) High

CHECK NUMBER: (b)(6)
 IN ACCOUNT OF U.S. TREASURY: (b)(6)
 CHECK NUMBER: (b)(6)
 ON BEHALF OF BANK: (b)(6)

DATE: (b)(6)

OFFICER'S SIGNATURE: (b)(6)
 TITLE: (b)(6)

CENTCOM 010441
 07-157-T026-00008

PAYMENT REPORT **071577026**

TO: DFAS, DSSN _____ DATE: MAY 29 2007

A. Payment Data:

- (1) Submitting agency/office: United States Army Claims Service
- (2) Office Code: 157
- (3) Agency/Office mailing address: MNC-I, OSJA, Camp Victory, Iraq APO AE 09342
- (4) Date Filed: _____
- (5) Claim Number: 071577026
- (6) Amount Claimed: 5000
- (7) Fund Cite: (b)(2)High
- (8) Payee: _____
- (9) Address: IRAQ
- (10) SSN: N/A
- (11) Payment Amount: (b)(6)
- (12) Type Payment: PF
- (13) For EFT Payments: ABA Routing Number: _____
- (14) For EFT Payment: Account Name and Number: _____
- (15) For EFT Payment: Name and Address of financial institution: _____
- (16) For EFT Payment: Account is (checking) (savings) Circle appropriate account

B. Acceptance by Claimant: (Note: This form should not be signed by the claimant if another release is signed by the Claimant is attached.)

I, the claimant, do hereby accept the within - stated award, compromise, or settlement as final and conclusive on my heirs, executors, administrators or assigns, and agree that said acceptance constitutes a complete release by me, my heirs, executors, administrators or assigns of any and all claims, demands, rights, and causes of action of whatsoever kind in nature, arising now or in the future from, and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries (including wrongful death), damages to property, breaches of contract or law, and any other acts or omissions, and the consequences therefore resulting, and to result, from the same subject matter that gave rise to the claim by reason of the same subject matter. I further agree to reimburse, indemnify and hold harmless the United States, its agents, servants and employees from any and all claims or causes of action, including wrongful deaths, that arise or may arise from any and all claims by reason of the same subject matter.

Date: MAY 29 2007 (b)(6)

C. AGENCY CERTIFYING OFFICER

Pursuant to authority vested in me, I certify that this Payment Report is correct and proper for payment

MAY 29 2007 (b)(3)(b)(6) (b)(3)(b)(6) FCC
(Date) (Signature Authorizing Certifying Officer) (Title)

Date Payment Recorded in Record: _____

A separate payment report must be completed for each claimant

This information is required in accordance with 31 U.S.C. 1304. The data you furnish will be used to certify your claim for payment. Failure to provide the information may result in your claim not being processed for payment.



REPLY TO
ATTENTION OF

HEADQUARTERS
MULTI-NATIONAL CORPS – IRAQ
BAGHDAD, IRAQ
APO AE 09342

UKI-334

Claim of (b)(6) 07-157-T026

ACTION

1. Facts: The claimant alleges that on 17 January 2006, U.S. Soldiers shot her husband in Al Ramadi Province for no reason. During a meeting with the undersigned Claimant explained that her husband was making a business trip. Claimant explained how everyone is scared of U.S. troops and her husband was careful not to do anything to provoke fire. Claimant still has three children at home. The amount requested is \$5,000 for the claim.

2. Opinion: The FCA permits compensation for damages caused by the negligent and wrongful acts of U.S. forces. Here the U.S. Soldiers were clearly negligent by firing upon someone who was not a threat. Upon review of the claim, payment is granted.

3. Authority: The Foreign Claims Act (10 U.S.C. § 2734) as implemented by AR 27-20, Chapter 10.

4. Action: The claim will be paid in the amount of \$5,000.

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

Captain, JA
Foreign Claims Commission I57

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CENTCOM 010443
07-157-T026-00010



REPLY TO
ATTENTION OF

HEADQUARTERS
MULTI-NATIONAL CORPS - IRAQ
BAGHDAD, IRAQ
APO AE 09342

FCC 157

30 April 2007

CLAIM OF: (b)(6)
CLAIM NUMBER: 07-157-T026

Dear Sir or Ma'am:

This notice constitutes final administrative action on your claim against the United States.

Foreign Claims Commission (FCC) 157 has investigated and considered the claim under the Foreign Claims Act (FCA), Title 10, United States Code, Section 2734, as implemented by Army Regulation (AR) 27-20, Chapter 10. The claim is cognizable solely under the FCA as it concerns an inhabitant of Iraq. The Federal Tort Claims Act, Title 28, United States Code, Section 2680(k), is not applicable as it excludes claims arising in foreign countries.

FCC 157 offers you \$5,000 to settle your claim. To accept this settlement offer, please sign and return the enclosed forms and an appointment will be made to meet you and to issue payment.

If you are dissatisfied by this action, AR 27-20 provides that you may request that the decision be reconsidered. Any such request must be forwarded to this office for FCC consideration. There is no prescribed format for such a request. However, it should describe the legal and/or factual basis for relief. Any request for reconsideration must be made, in writing, within 30 days of receipt of this letter.

The FCC's action on reconsideration is final and conclusive by law.

Sincerely,

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

Captain, U.S. Army
Foreign Claims Commission 157

CENTCOM 010444
07-157-T026-00011



HEADQUARTERS
MULTI-NATIONAL CORPS - IRAQ
BAGHDAD, IRAQ
APO AE 09342

REPLY TO
ATTENTION OF:

FICI-JA-C

Claim of (b)(6) 07-157-T026

ACTION

1. Facts: The claimant alleges that on 17 January 2006, U.S. Soldiers shot her husband in Al Ramadi Province for no reason. During a meeting with the undersigned Claimant explained that her husband was making a business trip. Claimant explained how everyone is scared of U.S. troops and her husband was careful not to do anything to provoke fire. Claimant still has three children at home. The amount requested is \$5,000 for the claim.
2. Opinion: The FCA permits compensation for damages caused by the negligent and wrongful acts of US forces. Here the U.S. Soldiers were clearly negligent by firing upon someone who was not a threat. Upon review of the claim, payment is granted.
3. Authority: The Foreign Claims Act (10 U.S.C. § 2734) as implemented by AR 27-20, Chapter 10.
4. Action: The claim will be paid in the amount of \$5,000.

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

Captain, JA
Foreign Claims Commission 157

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CENTCOM 010445
07-157-T026-00012

Foreign Language Text

Housing card.

CENTCOM 010446
07-157-T026-00013

Foreign Language Text, (b)(6)

CENTCOM 010447
07-157-T026-00014

Tort & Special Claims Application Claim: 071577026

Current Owning Office: (b)(6)
Incident Date: 01/17/06
Subrogated Name: N/A
Title: NONE SELECTED
Incident Location: AL RAMADI
Claim Amount Currency: U.S. DOLLARS
Property Damage: (U.S. Dollars) 0
Historical (PCE) Data: None
Date Filed: 01/14/2007
Companion Claims Name: None
First Name: (b)(6)
Last Name: (b)(6)
Date Settled: N/A
Personal Injury: (U.S. Dollars) 0
Wrongful Death: (U.S. Dollars) 2H
TOTAL: (U.S. Dollars) (b)(6)

Chapter Code(s): CHAPTER 10 - FOREIGN CLAIMS ACT
Damage Code(s): UNKNOWN
Basis Code(s): UNKNOWN
Incident Source: OTHER

Claim Synopsis: CLAIMANTS HUSBAND WAS KILLED BY US FORCES.
Memo:

(b)(6), Foreign Language Text

(b)(6)

CLASSIFIED

CENTCOM 010449
07-157-1026-00016

Foreign Language Text

Food ration card

Foreign Language Text

CENTCOM 010450
07-157-T026-00017

Foreign Language Text, (b)(6)

Foreign Language Text

~~The claimant obligated~~
~~that he didn't receive~~
~~any money from U.S. Army.~~

CENTCOM 010451
07-157-T028-00018

(b)(6), Foreign Language Text

RECEIVED

CENTCOM 010452
07-157-T026-00019

Foreign Language Text, (b)(6)

CENTCOM 010453
07-157-T026-00020

(b)(6), Foreign Language Text

Foreign Language Text

CENTCOM 010454
07-157-T028-00021

(b)(6), Foreign Language Text

VICTIM'S daughter I.D

Foreign Language Text

CENTCOM 010455
07-157-T026-00022

Foreign Language Text, (b)(6)

Victim's daughter I.D.

Foreign Language Text

CENTCOM 010456
07-157-T026-00023

Foreign Language Text

The chairman got the authority guardianship
on his family.

Foreign Language Text, (b)(6)

CENTCOM 010457
07-157-T026-00024

Foreign Language Text

The official inheritance paper

Foreign Language Text, (b)(6)

CENTCOM 010458
07-157-T028-00025

Foreign Language Text

The investigation of the Iraqi police

Foreign Language Text

*The claimant attended to complaint against
U.S. Army & she submitted description of
the incident to the investigator*

(b)(6), Foreign Language Text

Foreign Language Text, (b)(6)

(b)(6), Foreign Language Text

Court investigation of Al-Ramadi
Sent the investigation paper to
Al-Ramadi Compensation Section.

CENTCOM 010460
07-157-T028-00027

Foreign Language Text

Foreign Language T

Foreign Language Text, (b)(6)

~~The claimant attended
complaint against U.S. Army~~

Foreign Language Text, (b)(6)

*The decision to open
the investigation.*

Foreign Language Text

Foreign Language Text

Foreign Language Text, (b)(6)

*The claimant record
description of the incident*

Foreign Language Text

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

Certification of victim death.

CENTCOM 010463
07-157-T026-00030

Pages 31 through 32 redacted for the following reasons:

Foreign Language Text
Foreign Language Text, (b)(6)