

71260

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

Foreign Language Text

MS

479-N.8

OTHER

(b)(6)

- Approve \$12,000 -

Foreign Language Text

479-N.8

CENTCOM 016696

08-1K5-T1260-00001

NUMBER AND DATE OF ORDER		DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE COST PER		AMOUNT
			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 27-20, Chapter 10, upon the claim of the above named claimant for property damaged, lost, destroyed, captured, or abandoned in service.				\$12,000.00
TOTAL							\$12,000.00
<input type="checkbox"/> PROVISIONAL <input checked="" type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		APPROVED FOR	EXCHANGE RATE	DIFFERENCES			
		(b)(6), (b)(3)	= \$1.00				
		TITLE: SFC, US Pay Agent	(b)(3), (b)(6)				12,000.00
Pursuant to authority vested in me, I certify that:		(b)(3), (b)(6)		Foreign Claims Commission IK5			
3 SEP 08 <i>(Date)</i>							
ACCOUNTING CLASSIFICATION							
(b)(2)High				\$12,000.00			
PAID BY	CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY		CHECK NUMBER	ON (Name of bank)		
	CASH	DATE		(b)(6)			
	\$12,000.00	3 SEP 08					
<small>When stated in foreign currency, insert name of currency. * If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title. * When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.</small>							TITLE

Previous edition usable NSN 7540-00-900-2234

PRIVACY ACT STATEMENT

The information requested on this form as required under the provisions of 31 U.S.C. 82b and 82c, for the purpose of disbursing Federal money. The information requested is to identify the particular creditor and the amounts to be paid. Failure to furnish the information will hinder discharge of the payment obligation.

CENTCOM 016697

29197

08-IK5-T1260-00002



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY

Headquarters, 3d Brigade Combat Team
101st Airborne Division (Air Assault)
Camp Striker, Iraq, APO AE 09322

AFZB-KC-JA

26-Aug-08

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)
08-IK5-T1260 / 479n-8

1. Facts.

The claimant alleges that her husband died after a CF convoy accident.

Claimant has requested \$12,000.00

2. Opinion. In order to form a basis for a claim under the FCA, it must be shown that the incident occurred outside the United States, and that it was caused by noncombatant activities of the United States Armed Forces or by the negligent or wrongful acts of military members or civilian employees of the Armed Forces. The claim packet contained credible evidence of damage caused by US forces not involved in combat operations.

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

4. Action. Settle this claim in the amount of \$12,000.00

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

CPT, JA
Claim Attorney IK5

CENTCOM 016698

29198

08-IK5-T1260-00003

Serial Number Accountability Record

The purpose of this form is to record the serial numbers on USD \$100 notes thereby providing a tracing mechanism to the recipient. Pay agents should turn this form in to their respective finance offices as part of the reconciliation process. Finance offices should retain this original attached to the original packets submitted by all paying agents upon clearing.

DATE OF TRANSFER: 3 SEP 08

PAY AGENT NAME: SFC (b)(3),(b)(6)

NAME OF IRAQI FIRM BEING PAID:

NAME OF PERSON ACCEPTING PAYMENT ON BEHALF OF FIRM:

(b)(6)

Print given name, father's name, grandfather's name, tribal name

Serial Number:

(b)(6) _____ through (b)(6) _____ and,
_____ through _____ and,
_____ through _____ and,
_____ through _____ and,
_____ through _____ and,
_____ through _____.

* Use additional forms if needed.



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, 3D BRIGADE COMBAT TEAM
101ST AIRBORNE DIVISION (AIR ASSAULT)
CAMP STRIKER, IRAQ
APO AE 09322



AFZB-KC-JA

26 August 2008

Foreign Claims Commission: IK5

RE: (b)(6) 08-IK5-T1260 / 479n-8

Dear Claimant:

You have submitted a claim seeking compensation for the alleged damage caused by U.S. Forces. I have thoroughly reviewed your claim pursuant to the Foreign Claims Act (FCA) Title 10, USC §2734, Army Regulation 27-20, and Department of the Army Pamphlet 27-162 Claims Procedures.

Your damages are of great concern to the United States. In accordance with the cited references and the facts our investigation into your claim, I find your claim is **compensable**. **The United States will compensate you for your losses in the amount of \$12,000.00.**

If you are dissatisfied with this decision and wish to present additional evidence, you have thirty (30) days submit and appeal in accordance with AR 27-20.

عزيزي مقدم الطلب

لقد قدمت مطالبة للحصول على التعويضات عن الاضرار المزعومة والتي لحقت بالممتلكات الشخصية الخاصة بك, تنظيم الجيش 20-27 و ادارة شؤون US وقد قمت بمراجعة طبعك وبدقة وفقا لقانون المطالبات الخارجية المعنون 10, 2734, الجيش 27-162 من اجراءات المطالبة.

ان الاضرار الخاصة بك تعتبر محط اهتمام لشعب الولايات المتحدة, وفقا للوقائع المذكورة في طلبك ومن خلال التحقيق اجد ان طلبك قابل للتعويض, 12,000.00,

اذا كنت غير راض عن هذا القرار و ترغب في تقديم ادلة اضافية, لديك ثلاثين يوما (30) و يقدم الطعن وفقا للمادة (27-20) من قانون الجيش. AR.

Sincerely,

(b)(6)

Claimant

Date

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

(b)(6)

23 Sept 08
Date

Supriya S. ...
Claims Attorney, IK5

CENTCOM 016700

08-IK5-T1260-00005

29200

CLAIMS LOG

AMOUNT CLAIMED: \$ 12,000

CLAIMANTS NAME: _____ (b)(6)

DATE CLAIM SUBMITTED: 20 Jul 08

DATE OF INCIDENT: 02 Jul 07

ID (b)(6)

PARALEGAL RECOMMENDATION: _____

FCC ACTION: DENY APPROVE OTHER

COMMENTS / REMARKS:

The claimant alleges her husband was driving his vehicle when a CF Convoy hit his vehicle killing him.

-Translate Docs





AL_Mahmodia Claim Department



"THE CLAIM'S CONTAINS"

The Claimant name:-

(b)(6)

• ... one picture for destroying car

• A copy for IRRAQ Nationality FOX..... (b)(6)

• A copy for IRRAQ Nationality..... (b)(6)

• A copy of IRRAQ ration card.....

• A copy of ministry of interior.....

• A copy from "Car license driving".....

• A copy of death certificate.....

• A copy of A contract for buying and selling the car.....

(b)(6)

AL Mahmodiah Claim Department

Date:- 20 July 08.....



Claims Form

To: United States
 From: Name: _____ (b)(6)
 Address: IRRAQ - BAGHDAD
 I.D. number: _____ (b)(6)
 I am
 a. A citizen and national of: IRRAQ - BAGHDAD
 b. A permanent resident of: _____ (b)(6)
 c. Employed by: _____
 d. Check one () An insurer (X) Not an insurer
 e. Check one () A subrogee (X) Not a subrogee

I hereby make a claim against the United States Government for damages or injuries caused by: (Name, Organization, Military Department, Address, Telephone Number)

MNF

The property damaged is owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence of authority and fill in the form below for party sustaining the damage or injuries.)

My claim arose at: MND BAGHDAD _____
 (Town) (City) (Country)
 My claim arose on: JUNE 12 2008
 (Month) (Day) (Year)

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.)

on 2 July 2007, while my husband driving his car a blue suvax crown in Al Fashed neighborhood the north entrance, plate license car is BAGHDAD while the American driving very fast chasing the terrorist. they hit the car of my husband and killed him. we ask him 10 million Dinar for destroyed the car and 3 million Dinar for the condolence.

Describe nature and extent of property damage or personal injury sustained as result as a result of the above incident.

The American Forces killed my husband's car she is Ashly Acandene

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>
1- <i>3 million dinars for Acandene</i>	<i>3 million dinars</i>
2- <i>10 million dinars for my husband death</i>	<i>10 million dinars</i>
3-	
4-	
5-	
6-	

Total: *13 million dinars*

I was insured to the following extent against the damager or injuries I have sustained:

The name and address of my insurer (if any) is:

(Name)

(Address)

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

\$ *12 000* local *13 million dinars*

(Signature of Claimant)

Subscribed before me this *12* day of *June*, 200*8*.

(Print)

(b)(6)

(Signature)

Pages 10 through 12 redacted for the following reasons:

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

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

Personal iⁿ 1971 NO

Name: -

gender: Male

date of Birth: -

(b)(6)

(b)(6)

(b)(6)

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

Personal ID Card No.:	(b)(6)
Name:	(b)(6)
Gender: Female	(b)(6)
Birth date:	(b)(6)

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

vehicle registration certificate no. (b)(6)

Name: (b)(6)

address: Baghdad

type of the car: Toyota (b)(6)

license plate no. (b)(6)

colour: light blue

date: 03-22-2004

CENTCOM 016711

08-1K5-T1260-00016

29209

Death certificate No

(b)(6)

dob 09.03.07

(b)(6)

(b)(6)

Name of the died Person:

Birth date

death date: at the hour nine of the day
of ~~April~~ 09-02-2007

Cause of death: Car accident, with the
U.S.F. convoy

Foreign Language Text, (b)(6)

contract agreement for selling and
buying cars. date: 02-27-2002

The seller:

(b)(6)

The buyer:

(b)(6)

registration NO: -

(b)(6)

license plate NO: -

(b)(6)

Type: Toyota Supra

(b)(6)

light blue

Page 20 redacted for the following reason:

(b)(6), Foreign Language Text

MULTINATIONAL
DIVISION - BAGHDAD

IRAQI CLAIM CARD

السلام عليكم ورحمة الله وبركاته

الخي المواطن الكريم، بمقابل الاضرار التي لحقت بك، سواء كانت اضراراً جسدية من اصابات ال اعداء، او موت لاسمح الله لاحد من الاقرباء، وكان السبب وراء ذلك القوات الامريكية فقد يكون لك الحق في التعويض. المتقدم ببيان والمخاطبة بحقت الرجاء احضار الاتي، هذه البطاقة وهويتك المدنية مع كل الاوراق الرسمية المتعلقة بهذا الامر والتي تدعم الموضوع مثل (صور الحادث، شهادة الشهود، تقرير الشرطة، ومحادثات بالاستلام او التسليم، وثبات الملكية لنا حفظهم او تضرر ولنا تحاول ان تحصل على تعويض عنه. ورحمة السيفانة ان كنت تعمل رخصة).

الرجاء احضار هذه المستندات الى مركز المساعدة العراقي في معسكر التاجي بولاية كندر، البوابة الهندية في معسكر فالكسون، الخوذة في معسكر هاب معسكر هول معسكر كاسو، معسكر دوك، او احد المراكز الحكومية، السوردة او مدينة الصدر، نيسان الرشيد الرضوية الرضاة الامانة الكرخ الاعظمية الكردية او سبع الدور.

ملاحظة: امتلاك هذا الكرت (المستند) لا يعني الدفع المؤكد.

وشكراً لتعاونكم معنا

MULTINATIONAL
DIVISION - BAGHDAD

IRAQI CLAIM CARD

The Army may pay claims to Iraqi civilians for property damage, injury and death caused by US Forces.

1. Fill out the required information below.
2. Give this card to the Iraqi civilian, or other appropriate person in the case of death.
3. Direct claimant to the nearest Government Information Center or the Iraqi Assistance Center. Do not promise them anything.
4. Upon return to your FOB, complete a SF 91 or DA Form 2823. Describe the incident completely and forward it to your nearest legal office. NOTE: This information is NOT an admission of liability by the soldiers involved and will be used only to substantiate claims against the US Army.

UNIT Aco 1-38 INF

DATE 2 SEP 07

LOCATI (b)(2)High

TYPE OF INCIDENT Vehicle was damaged and the driver was killed by US forces.

CENTCOM 016716

08-IK5-T1260-00021

29214

Page 22 redacted for the following reason:

(b)(6), Foreign Language Text



CENTCOM 016718

29216

08-IK5-T1260-00023