

SAF (N)/DTM

- Approve \$ 10,000 -

352-5

26-May-08

(b)(6)

CENTCOM 016741

29238

08-1K5-T1392-00001

- Approx \$ 10,000 -

SAF 103/DPM

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

Foreign Language Text, (b)(6)

CENTCOM 016743

08-1K5-T1392-00003

29240

Death certificate No.:-

Name of the died Person:-

Birth date is:-

death date:- 08-14-2007

cause of death:- fire shots by the U.S. army

Dated 08.11.2007

(b)(6)

(b)(6)

(b)(6)

(b)(6)

Page 5 redacted for the following reason:

(b)(6), Foreign Language Text



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

30 August 2008

Foreign Claims Commission: IK5

RE: (b)(6) 08-IK5-T1392 / 352-5

Dear Claimant:

You have submitted a claim seeking compensation for the alleged loss of your husband. 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 \$10,000.00.**

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 بالملكات الشخصية الخاصة بك , تنظيم الجيش 20-27 و ادارة شؤون US وقد قمت بمراجعة طبعك وبدقة وفقا لقانون المطالبات الخارجية المعنون 10, 2734 الجيش 162-27 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 10,000.00.

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)

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

08

Captain, US Army
Claims Attorney, IK5

CENTCOM 016746

08-IK5-T1392-00006

29243

Standard Form 1031 (50)		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER NO.	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION				DATE VOUCHER PREPARED		SCHEMATIC NO.
U.S. DEPARTMENT OF THE ARMY				30-Aug-08		PROG. SY.
24th FMC				CONTRACT NUMBER AND DATE		24th FMC
Camp Liberty, Iraq				REQUISITION NUMBER AND DATE		Camp Liberty, Iraq
APO AE 09344						APO AE 09344
DSSN: 5579						DSSN: 5579
CLAIM # 08-IK5-T1392						
PAYEE'S NAME AND ADDRESS						
(b)(6)						
DATE INVOICE RECEIVED						
DISCOUNT TERMS						
PAYEE'S ACCOUNT NUMBER						
SHIPPED FROM			TO		WEIGHT	
GOVERNMENT BAL NUMBER						
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE		AMOUNT
				COST	PER	
		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.				\$10,000.00
TOTAL						\$10,000.00
PAYMENT:		APPROVED FOR	EXCHANGE RATE	DIFFERENCE		
<input type="checkbox"/> PROVISIONAL						
<input checked="" type="checkbox"/> COMPLETE			\$1.00			
<input type="checkbox"/> PARTIAL		(b)(3),(b)(6)				
<input type="checkbox"/> FINAL						
<input type="checkbox"/> PROGRESS	TITLE: SFC, 11C					000.00
<input type="checkbox"/> ADVANCE	Pay A					
Pursuant to authority vested in me, I certify that						
22 SEP 08 (Date)			(b)(6), (b)(3)		Foreign Claims Commission IK5 (Title)	
(b)(2)High			\$10,000.00			
CHECK NUMBER	ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER	CH (Name of bank)			
PAY BY	CASH	DATE				
\$10,000.00		22 SEP 08	(b)(6)			
When stated in foreign currency, use full name of currency.						
If the ability to certify and authority to approve are contained 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 negotiated in the name of a company or corporation, the name of the person writing the company or corporation name, as well as the capacity in which he signs, must appear. For example: "To His Due Company, per John Smith, Secretary", or "Trustee", as the case may be.						
Previous edition usable.						
PRELUCE ACT STATEMENT						
The information required on this form is required under the provisions of 31 U.S.C. 825 and 826 for the purpose of distributing Federal income. The information requested is to identify the particular creditor and the amount to be paid. Failure to furnish this information will hinder discharge of the payor's obligation.						



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, 10 BRIGADE COMBAT TEAM
101ST AIRBORNE DIVISION (AIR ASSAULT)
CAMP STRIKER, ILIG
APO AE 99522



AFZB-KC-JA

30 August 2008

Foreign Claims Commission: IK5

RE: (b)(6) 08-IK5-T1392 / 352-5

Dear Claimant:

You have submitted a claim seeking compensation for the alleged loss of your husband. 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 \$10,000.00.

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

أقد قدحت مطالبة للحصول على التعويضات عن الأضرار المزعومة والتي لحقت بالملكات الشخصية الخاصة بك، تنظيم الجيش 27-20 و إدارة شؤون الجنود (AR) وقد تمت مراجعة طلبك وبدقة وفقا لتقارير المطالبات الخارجية المرفوعة في 2734 الجيش 27-162 من إجراءات المطالبة.

إن الأضرار الخاصة بك تعتبر مستحقة اعتمادا على الولايات المتحدة، وفقا للوقائع المذكورة في طلبك ومن خلال التحقيق أجده ان طلبك قابل للتبريز 10,000.00.

إذا كنت غير راض عن هذا القرار وترغب في تقديم أدلة إضافية لديك ثلاثين يوما (30) و يقدم الطعن وفقا للمادة (27-20) من قانون الجيش، AR.

Sincerely,

(b)(6)

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

Captain, US Army
Claims Attorney, IK5

CENTCOM 016748

08-IK5-T1392-0008

29245



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY

Headquarters, 3d Brigade Combat Team
101st Airborne Division (AW Resnick)
Camp Strike, Iraq, APO AE 66322

AFZB-KC-JA

30-Aug-08

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)
08-IK5-T1392 / (b)(6)

1. Facts.

The claimant alleges that CF shot and killed her husband.

Claimant has requested \$10,000.00

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 16.

4. Action. Settle this claim in the amount of \$10,000.00

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

Claim Attorney IK5

THE GIC OPINION ABOUT A CLAIM

(b)(6)

Case No. (b)(6)

1. The claimant presented investigation documents and death certificate all supported that the victim (the claimant's husband) burned killed because of gunshots.
2. The claimant said that the US Army open fire on her husband and that led to killed him.
3. The claimant asks compensation amount \$ 10000.
4. We are suggesting letting her case go to you.

With our respect,

(b)(6)

LAWYER

(b)(6)

16 June 08

Government Information Office
- TO MEI -

(b)(6)



"THE CLAIM'S CONTAINS"

The Claimant name:-

(b)(6)

- 1- death certificat .
- 2- Investigation documents from Al-Resala Police station .
- 3- two statements .
- 4- Personal documents for her husband .

SIGN; (b)(6) -----

NAME -----

DATE: 26-may-2008



Claims Form



To: United States Army Foreign Claims Commission

From: Name: _____ (b)(6)

Address: Baghdad (b)(6)

Iraqi ID No _____ (b)(6)

I am
a. A citizen and national of: Iraq
b. A permanent resident of: Baghdad - Iraq
c. Employed by: _____

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

M. N. F.

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 Khondhuri Baghdad Iraq
(Town) (City) (Country)

My claim arose on 8 14 2007
(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 14 August 2007 The US Army open fire
Against my husband led to kill him,
And for that I am ask for compensation.

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

kill my husband

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>about The value of victim</i>	<i>\$10,000</i>
2-		
3		
4		
5		
6		

Total: *\$10,000*

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)

\$ *10,000*

local

12,000,000 ID

(b)(6)

(Signature of Claimant)

Subscribed before me this *26* day of *5*, 200*8*.

(SIGNATURE)

(b)(6)

(PRINT NAME)

Pages 14 through 15 redacted for the following reasons:

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

claim for the claimant

(b)(6)

live in Baghdad

(b)(6)

description of the accident

On the date of 08-14-2007, my ~~husband~~ husband got fire shots from the U.S. Army Patrols, while he was during the time of his job

(b)(6)

primary school which is located in the district of

(b)(6)

compensation with respect.

The amount of compensation is \$10,000.00

(b)(6)

04-21-08

Page 17 redacted for the following reason:

(b)(6), Foreign Language Text

To the investigating judge of the court of Ato -
Cherub.

Subject: Complaint

On the date of 08-14-2007, My husband
(b)(6) got fire shot

by U.S. Army Patriot, while he is going
to his office. His role was to keep
security to

school, which is located in
(b)(6)

(b)(6) . So I am asking your court
to claim the U.S. police for the reason of
compensation for the damages I got. Thank
you.

To the officer

To investigate and fix the diagram
stamp of the court in the Sudan
(b)(6)

(b)(6) claim

Page 19 redacted for the following reason:

(b)(6), Foreign Language Text

Investigation and diagram of the accident
by the Al Resala Police office center on the
date of 01-23-2008

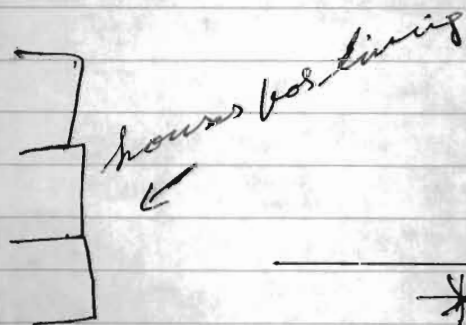
regarding to the ~~claim~~ ^{claim} we received by the
claimant (b)(6) about the killing
of his brother in Zaidan district, we moved
to the accident place, I ~~watch~~ observe the
following.

- 1- place of accident (b)(6) far away from
our office.
- 2- place of accident is general road.
- 3- I did not see anything of advantage
for investigation

Stamp of Court

Signature of
investigating officer

Stamp of Police
office



place of accident



General Road

Foreign Language Text, (b)(6)

Foreign Language Text

Foreign Language Text

Foreign Language Text

Foreign Language Text

Foreign Language Text

CENTCOM 016761

08-1K5-T1392-00021

AL-resala Police office date: 01-27-2008

testimony of the witness (b)(6)
Birth date (b)(6) live in (b)(6) he
testify the following.

In the day of the accident, I was in
my house, I informed by the people of the
area that (b)(6) and (b)(6)

(b)(6) has been killed by U.S. Army, and
I was present at that time. This is my testimony
sig. of the office sig. of the
(b)(6) witness

stamp of the court stamp of Police office

CENTCOM 016762

08-1K5-T1392-00022

29258

(b)(6), Foreign Language Text

witness statement

(b)(6)

CENTCOM 016763

29259

08-1K5-T1392-00023

claim for the claimant

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

On the date of 08-14-2007 the U.S. Forces
killed my husband (b)(6) during
going in his way to where he work in (b)(6) area
with no reason, I have (b)(6) children, and he
was the main source of living in the family
I am asking the compensation from the U.S. Forces
and this is my testimony

use of office

sig of
claimt

(b)(6)

stamp of Police
office

stamp of
court

CENTCOM 016764

08-1K5-T1392-00024

(b)(6), Foreign Language Text

CENTCOM 016765

29261

08-IK5-T1392-00025

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

CENTCOM 016766

29262

08-IK5-T1392-00026



(b)(6), Foreign Language Text



(b)(6), Foreign Language Text



CENTCOM 016767

08-IK5-T1392-00027

(b)(6), Foreign Language Text

(b)(6), Foreign Language Text

CENTCOM 016768

29264

08-IK5-T1392-00028

Personal identification Card No. (b)(6)
Office of Administration date issued 5.22.2005
Name: (b)(6)
Gender: Female (b)(6)
Date of Birth: (b)(6)
Place of Birth: (b)(6)