

VEH Accident

- Approve \$13,000 -

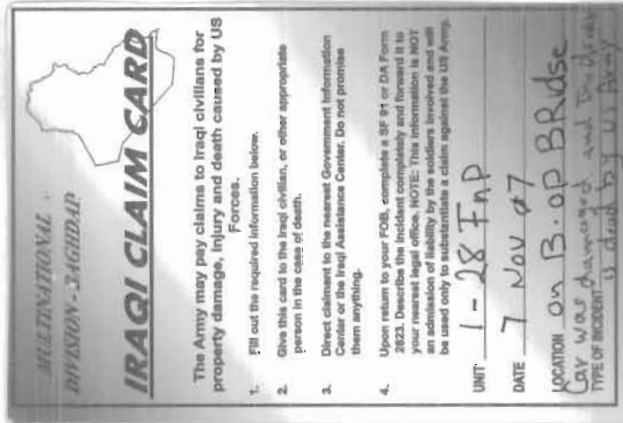
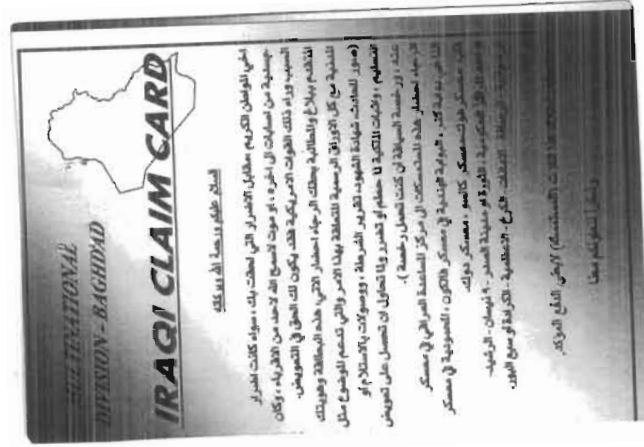
63-2  
5-Feb-08

(b)(6)

8-79/2

CENTCOM 011433

08-IK5-T942-00001



Standard Form 1034 (20)		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER NO.		
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION				10 DATE VOUCHER PREPARED		SCHEDULE NO.	
DEPARTMENT OF THE ARMY 24th FMC Camp Liberty, Iraq APO-AE 09344 DSSN: 5579				19-Jul-08			
				CONTRACT NUMBER AND DATE		PAID BY 24th FMC Camp Liberty, Iraq APO AE 09344 DSSN: 5579	
				REQUISITION NUMBER AND DATE		DATE INVOICE RECEIVED	
CLAIM #: 08-1K5-T942 PAYEE'S NAME AND ADDRESS: Baghdad (b)(6)						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 <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.					\$13,000.00
(Use continuation sheets if necessary) (Payee must NOT use the space below)						TOTAL \$13,000.00	
PAYMENT: <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			
		RV: (b)(3)(b)(6)	\$1.00			000.00	
		TITLE: SFC, US Pay Agent			(b)(3), b(6)		
Pursuant to authority vested in me, I certify that		(b)(3), b(6)			Foreign Claims Commission IK5		
28 July 08 (Date)							
ACCOUNTING CLASSIFICATION							
(b)(2) High				\$13,000.00			
CHECK NUMBER		ON ACCOUNT OF U.S. TREASURY		CHECK NUMBER		ON (	
PAID BY CASH		DATE 28 Jun 08		PAYEE (b)(6)		(b)(6)	
\$13,000.00							
* 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 received 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.						PER	
						TITLE	

Previous edition usable

PRIVACY ACT STATEMENT

N5N 545-60-906-2234

The information requested on this form is required under the provisions of 31 U.S.C. 52b and 52c, 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 this information will hinder discharge of the payment obligation.

CENTCOM 011435

08-1K5-T942-00003



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

19-Jul-08

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)  
08-IK5-T942 / 63-2

1. Facts.

The claimant alleges that a CF convoy ran into her husband's car while he was driving, killing him and damaging the car.

Claimant has requested \$13,000.00

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 \$13,000.00

(b)(3), b(6)

CPT, JA  
Claim Attorney IK5

CENTCOM 011436

08-IK5-T942-00004

**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: 28 Jul 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

19 July 2008

Foreign Claims Commission: IK5

RE: (b)(6) 08-IK5-T942 / 63-2

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 \$13,000.00.**

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 بالمتلكات الشخصية الخاصة بك، تنظيم الجيش 20-27 و ادارة شؤون US وقد قمت بمراجعة طلبك 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 13,000.00.

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

(b)(6)

18 July 08  
Date

Sincerely,

Claimant

(b)(3), b(6)

(b)(6)

Witness

\_\_\_\_\_  
Date

Captain, US Army  
Claims Attorney, IK5

CENTCOM 011438

08-IK5-T942-00006

## GIC OPINION ABOUT CLAIMS

(b)(6)

Case No. (b)(6)

1. The claimant presented claim card from the US Army confirmed that they killed the claimant's husband and destroyed his vehicle during the crash.
2. The claimant presented the ownership of her husband car type (DAYOOW) PRINCE model (b)(6) white color plate no: (b)(6) Baghdad.
3. The claimant asks amount of \$5,000.00 for killed her husband. And amount of \$8,000.00 for destroyed his car.
4. We suggest compensate her same amount she asks.

With our respect,

(b)(6)

The lawyer.

(b)(6)

6 Feb - 2008

(b)(6)

~~GIC MANAGER~~

(b)(6)

7-Feb-2008

CENTCOM 011439

08-1K5-T942-00007

# Claim Department

## "THE CLAIM'S CONTAINS"

The Claimant name:-

(b)(6)

- Claim card.....
- One picture for the vehicle.....
- Death of certificate.....
- Buying contract.....
- Registration of the vehicle document.....
- Iraqi documents.....

Foreign Text Language

(b)(6)

SIGN;---

NAME; Rafid A. Ali

DATE; 6-Feb-08

CENTCOM 011440

08-1K5-T942-00008





# 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: \_\_\_\_\_
- b. A permanent resident of: \_\_\_\_\_
- c. Employed by: \_\_\_\_\_ (b)(6)
- d. Check one ( ) an insurer  NOT an insurer
- e. Check one  A subrogee ( ) Not a subrogee

Foreign Language Text

Iraqi  
Baghdad - Iraq

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

Against Multi National Forces

The property damaged had 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.) (b)(6)

My claim arose at Airport way Baghdad Iraq  
(Town) (City) (Country)

My claim arose on Nov 7 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 date 7-Nov-07 while my husband ( (b)(6)  
Was driving his vehicle type (DAYWOO) model (b)(6)  
White color plate No: ( (b)(6) Baghdad on the airport way  
The U.S convoy hit his car, which led to death my  
Husband and destroyed the car. So am asking  
For a compensation.

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

Death my husband and destroyed his vehicle  
By the U.S. convoy.

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.)

Item	Amount
1- About value the victim and the car	\$ 13,000,00
2-	
3-	
4-	
5-	
6-	

Total: \$ 13,000,00

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)	
\$ 13,000,00	local 16,250,000 ID

(b)(6)

(Signature of Claimant)

Subscribed before me this 6 day of Feb, 2008.

Foreign Language Text

(b)(6)

(SIGNATURE)

(b)(6)

(PRINT NAME)

Claimant Name:-  
Mrs. [redacted]

(b)(6)

(b)(6)

1443

08-1K5-T942-00011

On the date of 11-07-2007 while my  
husband Mr. [redacted] driving

(b)(6)

his car type (Dagwood) Bmw, model  
[redacted] while in colos, & driving plate No.

(b)(6)

1 Baghdad on the air Post

Street, at nine o'clock in the morning an  
accident happen between an american  
military convoy and my husband car  
which led to the death of my husband  
and the destruction of my husband car  
and when we reached to area of the  
accident after couple hours, we met  
with an american military person  
who gave us the compensation card,  
and he asked us to come to this  
office for compensation.  
The total amount I asked is = \$35000.00

29911

Pages 12 through 13 redacted for the following reasons:

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

foreign language

foreign language

Foreign Language Text, (b)(6)

foreign language

foreign language

contract of buying the car

The seller!

live in

(b)(6)

(b)(6)

Baghdad

(b)(6)

The buyer! -

(b)(6)

The type of vehicle in!

(b)(6)

(b)(6)

type of vehicle! - Datsun Prince model

(b)(6)

white in color plate No is

(b)(6)

white in color.

Price! - is in American currency \$ 8000.00

CENTCOM 011447

08-1K5-1942-00015

Page 16 redacted for the following reason:  
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Foreign Language Text, (b)(6)

(b)(6)

No. [redacted] #07.2007

Death Certificate:- Date:- #07.2007

Name of died Person:-

(b)(6)

Male: Birth date is

(b)(6)

Death date:- at the hour 09 of the day

11-07-2007.

Cause of death:- Car accident with the  
American Patriot.



Foreign Language Text, (b)(6)

CENTCOM 011450

08-1K5-T942-00018

Page 19 redacted for the following reason:  
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Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

[Redacted]

[Redacted]

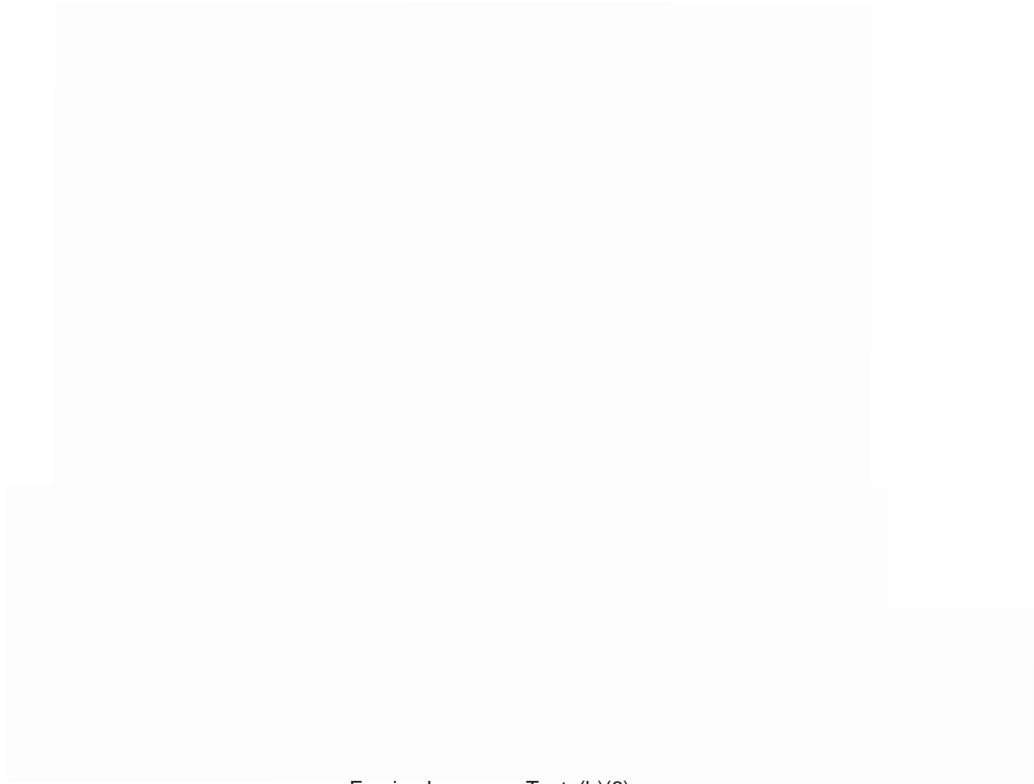
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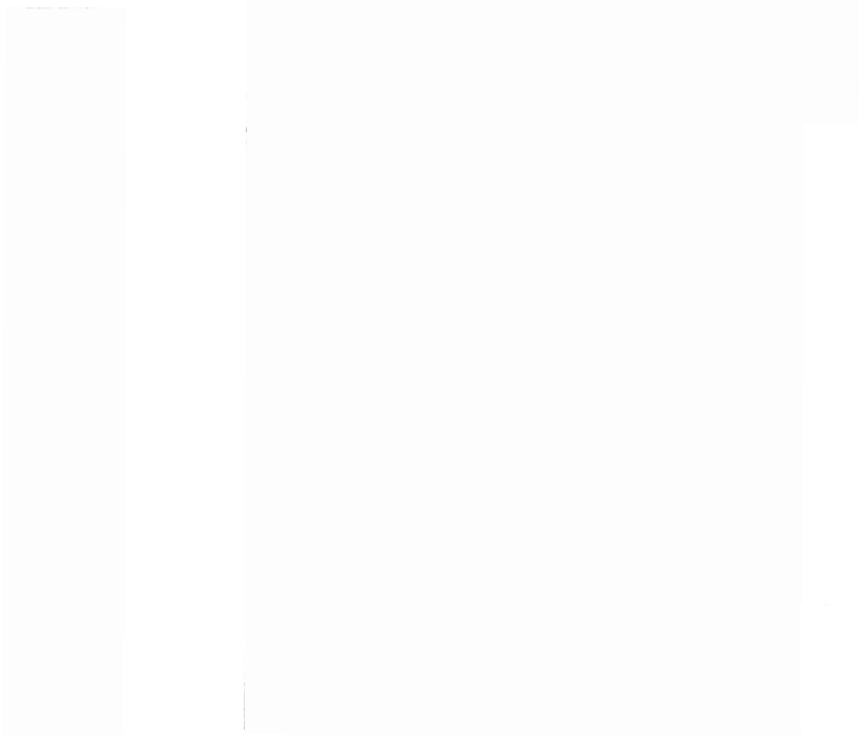
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[Redacted]

[Redacted]



Foreign Language Text, (b)(6)



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Foreign Language Text, (b)(6)

CENTCOM 011455  
08-IK5-T942-00023



(b)(6)

CENTCOM 011456

08-1K5-T942-00024