

0983

(b)(6)

Foreign Language Text

foreign language text

130C

11 AUG WIFE + SON WENT TO MARKET and were  
killed by C.F. FIRE. Sufiya area

- large complex attack conducted

< Need location to match SIGACT

30 July 07

~~#~~ Recommend pay \$5,000  
CPT

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

SIGACT: YES (removed) / NO  
DATE: 5 pages CENTCOM 1018  
11 2002 Aug 06

**FCA/CERP PACKETS**

Claim #: 13 553

Name of Person Submitting Claim: \_\_\_\_\_ (9)(a)

Location/Date of Incident: 11 Ave 06/ Seattle

Date Claim Submitted: 10 Oct 06

Person Receiving Claim: \_\_\_\_\_

Date Packet Completed: \_\_\_\_\_

Date Claim Paid/Amount Paid: \_\_\_\_\_

Notes: \_\_\_\_\_ (9)(a)

\_\_\_\_\_  
\_\_\_\_\_

- Copy of ID Card
- Proof of ownership (deed, proof of inheritance, bill of sale)
- Death certificates
- Medical Examination
- POA's
- Pictures of Damage
- Checked SigActs:       Yes       No

# Claims Form

To: United States Army Foreign Claims Commission.

From: Name: \_\_\_\_\_ (b)(6)

Address: \_\_\_\_\_

I am RAMADY

- a. A citizen and national of: \_\_\_\_\_
- b. A permanent resident of: \_\_\_\_\_
- c. Employed by: \_\_\_\_\_
- d. Check one ( ) An insurer ( ) Not an insurer
- e. Check one ( ) A subrogee ( ) 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)

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: SUFIYA RAMADY IRAQ  
(Town) (City) (Country)

My claim arose on: AUG 11 06  
Month Day Year

Give a brief statement of the accident or incident on which the claim for damages to property or personal injury is based. (Use back of this sheet if necessary.)

DATED AUG, 11, 06 MY WIFE AND MY SON WENT TO MARKET TO SHOP CLOTHES FOR FAMILY AND WHEN THEY REACHED NEAR THE CHECK POINT M-N-F SOLDIER SHOT TO THEM AND KILLED MY WIFE

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

AND MY SON WITH OUT ANY REASON SO I REQUEST COMPENSATION

CENTCOM 011817A

BODYS CLAIM

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>
KILLED MY WIFE	5000 \$
KILLED MY SON	5000 \$
	10,000 \$

I was insured to the following extent against the damage 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.)

\$ \_\_\_\_\_

local \_\_\_\_\_

(b)(6)

Subscribed before me this 27 day of AUG, 2006

(b)(6)

(Print Name)

(b)(6)

CENTCOM 011818

Pages 6 through 8 redacted for the following reasons:

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

CENTCOM 011822

30045

foreign language text, (b)(6)



Nonresponsive

foreign language text, (b)(6)

Nonresponsive