Proteen invitable filed claim, but was a Killed by insungents so he has taken over the claim. brother is in college and will come minute to be paid. \$3500.00 for nothers and \$3500.00 for forthers 21 40 10)(3),(b)(Capt o)(3),(b)(6 X

Foreign Language Text

(b)(6)

3

20 20 Nov OC 196

GENTCOM 006840

27 Jul, 1900, C.F. counterfire after IED blast, Killed ather & mother, dostr. POSSI WE SIGART MATCH

(b)(6)

ın Language

DATE: 271940 JUL DE SI SIGACT: XES (removed) / NO

FCA/CERP PACKETS

Claim #:
Name of Person Submitting Claim:
Location of Incident: Z7 Jul 04
Date Claim Submitted: 20 Nov Cx.
Person Receiving Claim:
Date Packet Completed:
Date Claim Paid/Amount Paid:
Notes: SIGACT MATCHES STORY VERY WELL.
Copy of ID Card
O Proof of ownership (deed, proof of inheritance, bill of sale)
Opening Death certificates
O Medical Examination
O POA's
O Pictures of Damage
O Checked SigActs: O Yes O No

Claims Form	
To: United States Army Foreign Claims Commission. From: Name: (b)(6) Address: Kamadi MShurta Guartre	description and the second sec
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) 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: (Town) (City) (Country) My claim arose on: Month Day Year Give a brief statement of the accident or incident on which the claim for damages to property or for	
on July 27 06 Thursday Affer 7,00 oclar on July 27 06 Thursday Affer The Market ne street (b)(6) for buy Some Clother and domestic this Abomb blasted in Street (b)(6) Affer the ex	as as
The cooling forces shot in the region and the Shops in the regional that led to tary my father and mother when they were info	et
their lives to bring them to hospital, but Describe nature and extent of property damage or personal injury sustained as a result of the above incident. They died - I claim the Coalities ferce	
po pay me fer this accident - CENTCOM 0068	

Page 6 redacted for the following reason:
-----Foreign Language Text

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tem (1) fill full	Total: 5000	8
was insured to the f	ollowing extent against the damage or injuries I have sustained	d:
:		
The name and addres	ss of my insurer (if any) is:	
(Name)		
(IVallie)	(Address)	
I claim as damages: (\$	Indicate injount in U.S. dollars and local currency) local	000
Subscribed before me	e this \$ day of 15 . 200 6	
	(Print Name) (b)(6)	
	(Signa (b)(6)	
	7	
	2	

Pages 8 through 12 redacted for the following reasons:

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