



DEPARTMENT OF THE ARMY
HEADQUARTERS, 3rd BRIGADE COMBAT TEAM
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZP-VA-HQ

1 April 2006

CP3AAS60940401-5
MEMORANDUM FOR RECORD

SUBJECT: Commander's Emergency Response Program payment to [REDACTED] (Claim
Number 06-IR8-383.1)

1. On 11 December 2005, [REDACTED]s cousin, [REDACTED], was killed by U.S. Forces as he was traveling on the Bayji Tikrit bypass.
2. I certify that CERP funds are available to pay [REDACTED] in the amount of \$2,500.00. This is a condolence payment.
3. The request to pay [REDACTED] in the amount of \$2,500.00 from CERP has been legally reviewed. There is no legal objection to this payment and it is accordingly approved.

CPT, EN
Project Purchasing Officer

000601



DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, FOB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

10 March 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of [REDACTED] at; 6-IR8-383

1. **Identifying Data:** [REDACTED] by Attorney [REDACTED]
2. **Date and place the incident occurred giving rise to the claim:** The claim occurred on December 11, 2005 in Tikrit, Iraq.
3. **Amount of claim and date it was filed:** Claimant filed a claim for \$2,500 on 7 March 2006.
4. **Jurisdiction:** This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was properly filed in a timely manner.
5. **Facts:** The claimant alleges that CF killed [REDACTED] while he was travling on the Bayji Tikrit bypass. A SIGACTS investigation revealed that a CF convoy conducted an escalation of force in the area, but no injuries or fatalities were noted. A LN vehicle would not yield to the convoy until CF fired a flare, which caused the vehicle to yield.
6. **Opinion:** "Under AR 27-20, paragraph 10-3, liability under the FCA may be based on acts or omissions of U.S. soldiers or civilian employees of a U.S. military department only if they are considered negligent or wrongful." Here, there is no credible evidence of this event actually occurring.
7. **Recommendation:** This claim is denied.

CPT, JA
Claims Judge Advocate

000602

6-1R8-383.1

11 MAR 06



DEPARTMENT OF THE ARMY
OFFICE OF THE STAFF JUDGE ADVOCATE
HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)
OPERATION IRAQI FREEDOM, COB SPEICHER
TIKRIT, IRAQ APO AE 09393

AFZB-JA-C

MEMORANDUM FOR Record

SUBJECT: Claimant Denial

1. This is in response to your claim against the United States Government. Your claim has been reviewed under the Foreign Claims Act, 10 U.S.C. 2734, as implemented by Army Regulation 27-20, Chapter 10. I regret to inform you that your claim has been denied.
2. Your claim has been denied for the following reasons:
 - a. There is not enough evidence to prove your claim.
 - b. The evidence shows that United States Forces did not cause the damage.
 - c. The evidence shows that the damage was caused during combat.
 - d. The evidence shows that the damage was caused by your own negligence or wrongdoing.
 - e. The evidence shows that your claim was fraudulent.
 - f. Other: _____
3. If this is the first time your claim has been viewed by this office, you may submit an appeal. This office must receive the appeal no later than 30 days after receipt of this message. The appeal must also contain additional evidence supporting your claim. If the appeal is sent after 30 days have passed, or does not provide additional evidence, then the appeal will be denied.
4. POC is the 101st Airborne Division (Air Assault) Claims Office at DSN 318-845-1022.

[REDACTED]
CPT, JA
Chief of Claims

000603

TF Band of Brothers Claims Intake Form

To: United States Army Foreign Claims Commission.

From: Name: [REDACTED]

POA/ATT: [REDACTED]

Power of Attorney provided and interpreter approved:

Decedents: [REDACTED] (C's cousin)

Hometown: Tikrit Iraqi Resident: [REDACTED]

My claim arose at: Tikrit (Town) (City) (Country)

My claim arose on: Dec 11 2005 (Month) Day Year

Proof of Ownership: N/A

VIN Match: [REDACTED]

Interpreter Approved: [REDACTED]

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): Original Seen

Interpreter Approved: [REDACTED]

Medical Report/Legal Expert Opinion: his med.

Interpreter Approved: [REDACTED]

Witness Statement (Consistent?): ① Brother - driving Brothers car

Interpreter Approved: [REDACTED]

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.)

6:00 pm. Patrol 200 m away. "Surprised" at patrol coming for the wrong reason. Started to shoot at them

Baixi → Tikrit highway. CF convoy. Conv
car, shot the C.

took to Speicher - Opel White 1992
33829

CF stopped - took to FOR Speicher & then to LSAA

Evidence: Original death cert, POA, witness X

000604

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>
Wrongful death	2500

Total: 2500

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

(Signature of Claimant)

Subscribed before me this ____ day of _____, 200__.

(Print Name)

~~(Signature)~~

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