

DEPARTMENT OF THE ARMY

HEADQUARTERS, 2D BRIGADE  
3D INFANTRY DIVISION  
BAGHDAD, IRAQ  
APO AE 09380

REPLY TO  
ATTENTION OF:

AFZP-VB-JA

Date: 12 October 2005

MEMORANDUM FOR RECORD

SUBJECT: FOREIGN CLAIM II8T06-0089 APPROVAL AS FOLLOWS:

Claim of: [REDACTED]

Address: [REDACTED] Iraq

Date Filed: 11-May-05

Amount Claimed: \$13,793.00

Claimed Loss: Claimant's husband died and vehicle damaged in a vehicular accident involving C.F.

1. Your above-mentioned claim is approved, and will be paid as follows:

Approved: The claimant, [REDACTED], will be paid \$10,000.00 in compensation for property damaged, lost, destroyed, captured, or abandoned in service.

2. 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.

3. If you are dissatisfied by this action, AR 27-20 provides that you may request that the decision be reconsidered. Any such request must be forwarded to this office for FCC consideration. There is no prescribed format for such a request. However, it should describe the legal and/or factual basis for relief. Any request for reconsideration must be made, in writing, within 30 days of receipt of this letter. The FCC's action on reconsideration is final and conclusive by law.

4. POC for this memorandum is [REDACTED] Camp Loyalty, @ VOIP 242-7063.

[REDACTED]  
CPT, JA  
R.

FOREIGN CLAIMS COMMISSION

000729

Standard Form 1034 (EG) Revised October 1987 Department of the Treasury 1 TFM 4-2000 1034-121		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER NO.	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION <b>DEPARTMENT OF THE ARMY</b> HQ, 3D Infantry Division Office of the Staff Judge Advocate APO AE 09380		10 DATE VOUCHER PREPARED <b>12 October 2005</b> CONTRACT NUMBER AND DATE REQUISITION NUMBER AND DATE		SCHEDULE NO.		
				PAID BY <b>3d Finance, 3d SSB</b> <b>Camp Liberty, Iraq</b> <b>APO AE 09352</b> <b>DSSN: 5579</b>		
CLAIM #: <b>II8T06-0089</b>				DATE INVOICE RECEIVED		
PAYEE'S NAME M [REDACTED] Al- Baghdad, Iraq				DISCOUNT TERMS		
AND ADDRESS				PAYEE'S ACCOUNT NUMBER		
SHIPPED FROM		TO		WEIGHT	GOVERNMENT B/L 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.				<b>\$10,000.00</b>
(Use continuation sheet(s) if necessary)		(Payee must NOT use the space below)			TOTAL	<b>\$10,000.00</b>
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		
			=\$	=\$1.00		
	BY					
	TITLE			Amount verified; correct for (Signature or initials) <b>\$10,000.00</b>		
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.						
19 NOV 05 (Date)		CPT, JA Claims Judge Advocate (Title)				
Authorized Certifying Officer						
ACCOUNTING CLASSIFICATION						
2162020 22-0204 P436099.22-4200 VIRQ F9203 S99999 ARG-9204						
SFC, USA Foreign Claims Pay Agent						
PAID BY	CHECK NUMBER		ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER		ON (Name of bank)
	CASH		DATE 19 NOV 05	PAYEE		600730
1 When stated in foreign currency, insert name of currency. 2 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.						PER
3 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.						TITLE

Previous edition usable

## PRIVACY ACT STATEMENT

The information requested on this form is required under the provisions of 31 U.S.C. 82b and 82c, 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.

