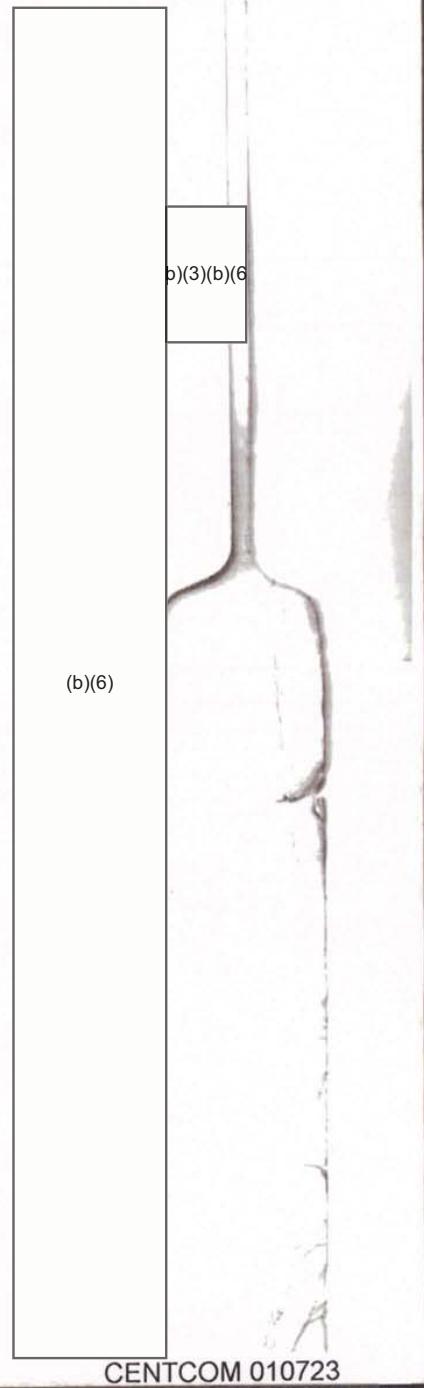


4UN



Claim Number: 08-I2A-A526

Name: (b)(6)

Date of Incident: 22-Aug-07

Date Received: 12-Apr-08

Amt Req: \$15000

Summary:

Old Claim lost in the shuffle. Now back again looking for answers. I agree with MAJ. (b) deny for jurisdiction and information unless TIGR says otherwise

Circle Decision, Fill-in Date, and initial

DENY	INVESTIGATE	PAY - \$
DATE 14 Jul 08	DATE 14 Jul 08	DATE
INIT (b)(3), (b)(6)	INIT (b)(3), (b)(6)	INIT

- Insufficient Evidence
- Combat Exception
- US Involvement
- Lack of Causation
- Statute of Limitations
- Not a Proper Claimant
- Non-Cognizable Claim

TIGRnet
SIGACT
15-6
Claims Card
Empty
No EVIDENCE!

NOTES:

CERP

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

CENTCOM 010724
08-I2A-A526-00002

Claims Checklist and Chronology of Action

Claim Number:	Claimant's Name		
0819021	(b)(6)		
Date of Incident	Date Filed	Date Received	Amount of Claim:
22 Aug 07	29 JAN 08		15000
Claim Type:	Claim Arose From:	Paralegal Recommends: SGT Snyder	
Vehicle Damage	Combat Activities	Approved	Amount
Detainee Property	Non Combat Activities	CERP	Amount
Damage during Raids	or Negligence	Denied	
SAF Damage/Injury	Claimant's Assertion: Claimant states her husband was in an accident with coalition forces		
Real Estate	and was killed		
Other DEATH			
FCC Decision: CPT	(b)(3), (b)(6)		
FCC Decision Date:	29 MAR 08		
Approved	Amount		
SF 44	Settlement Agreement		
Less Than Letter	Action Memo		
CERP	Amount		
SF 1034	Denial Memo		
Condolence Memo	Settlement Agreement		
Action Memo			
Denied	(b)(3), (b)(6)		
Denial Memo	Action Memo		
Date Action Taken:	Action Taken By:	Action Taken:	
29 JAN	(b)(3)(b)(6)	Need to see if SIGADS or 18-6 exists	

CENTCOM 010725

08-I2A-A526-00003



DEPARTMENT OF THE ARMY
HEADQUARTERS, 1ST BRIGADE COMBAT TEAM
4TH INFANTRY DIVISION
FOB FALCON, IRAQ 09361

SUBJECT: Claim # 08-I2A-A526

(b)(6)

(b)(2)High Iraq

Dear Sir:

You have submitted a claim seeking compensation for the loss of your loved one. I have thoroughly reviewed your claim pursuant to the Foreign Claims Act (FCA), Title 10, United States Code §2734, Army Regulation 27-20, and Department of the Army Pamphlet 27-162 Claims Procedures.

Allow me to express my sympathy for the loss of your loved one from events occurring on August 22, 2007. However, in accordance with the cited references and our investigation of the operational records concerning your claim, your claim is not compensable. There is insufficient evidence to validate your claim. Accordingly, your claim is denied.

If you are dissatisfied by this action, you may request reconsideration of the decision in accordance with AR 27-20. Any such request must be based on new or additional evidence and should be forwarded to this office. While there is no prescribed format for such a request, it must describe the legal and/or factual basis for relief. Any request for reconsideration should be made in writing within 30 days of your receipt of this letter. Thank you for your kind attention.

Sincerely,

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

MAJ, JA USAR
Foreign Claims Commission I2A

CENTCOM 010726
08-I2A-A526-00004

Cell Phone Number:

(b)(6)

Claims Form
طلب تظلم

Name:

(b)(6)

الاسم:

Address

(b)(6)

العنوان:

I am

أنا

a. A national citizen of: IRAQI ا. أحمل جنسية:

b. A permanent resident of: above address ب. عنوان الدائمة:

c. Employed by: / ت. أصل لدى:

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

The vehicle accident. by car
claim card attached.

ن أتظلم لدى حكومي الولايات المتحدة للأضرار والاصابات التي لحقت من: (المنظمة، الوحدة العسكرية)

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.)

The vehicle damaged and driver was died.

الممثلات المعتبرة مطلوبة من: (إذا كان هذا التظلم لكم من قبل ممثل أو ذربيب أو عائل ذار جاء أحاطر المستعمرات التي تخولكم وترككم التقدم بهذا

الظلم، أو أي ممثل من ممثلين رسبيين).

بملا التظلم بالأسفل للأفراد المذكورة بالشکوري للإصابات أو الأضرار التي أصابتهم).

My claim arose in: ANNA
(Town)

Baghdad
(City)

IRAQ
(Country)

البلد أو المعاشرة

المدينة

الجريدة

CENTCOM 010727
08-I2A-A526-00005

My claim arose on: 3 Month 24 Day 2008 Year

الموافق: 3 يوم 24 شهر 2008 قدم في:

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.)

She said on 8-22-2007 her husband involved in accident when he was going to Basra and The C.I.F vehicle came oppit direction hit the car in front resulting to damaged and driver was died. that near Haloon-DORA closed to Salam bridge is location of accident.

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
<u>The car damaged and driver was died.</u>	
<u>Model, Opel, Make</u>	(b)(6)
Total:	<u>\$ 15,000</u>

بالتفصيل متى تضرر والكلمة للممتلكات أو للإصابات الجسدية وبكلفتها (إلا جاء أضافة التبريرات والمعتمدات، والواتير الضروري لكل شئ)

للتضرر _____
للممتلكات _____
الإجمالي _____

CENTCOM 010728
08-12A-A526-00006

I was insured to the following extent against the damage or injury I have sustained:

No insurance

أمين على الممتلكات أو الضرر الجسدي المتضرر بما يوازي:

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

\$ 15,000 I.D. _____

لب بتعويض للأضرار يوازي (أكتب بالدولار الأمريكي أو العملة المحلية)

العملة المحلية _____

I (have/ have not) previously filed a claim relating to the incident described above.

بما (لم) (لم أقم) بتقدير يلاع لهذه الحادثة المذكورة بالأعلى

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

من علمي طلب تظلم (قدم) (لم يقدم) لهذه الحادثة المذكورة بالأعلى

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

ملاحظة: بالتوقيع أسلئل هذا النظم لمان تقسم على أن كل المعلومات المقدمة في هذا النظم هي صحيحة وحقية. أي شخص يحاول تقديم تظلم كاذب أو مخلل أو يزور النظم ضده حكومة الولايات المتحدة الأمريكية سوف يواجه عقوبات جنائية حادة ويحاكم من قبل السلطات.

(Signature of Claimant)

(توقيع النظم) الرجاء كتابة الاسم والتوقيع

Subscribed to me this 24 day of 5, 2008.

(Signature of Witness)

(Printed Name)

ENCLOSURE I (Claims Form)

CENTCOM 010729
08-I2A-A526-00007

Claims Form

Foreign Langu

Name:

(b)(6)

الاسم:

Address:

(b)(6)

العنوان:

Phone Number:

(b)(6)

I am

Iraq

أنا

a. A national citizen of: Iraq

أحمل جنسية:

b. A permanent resident of: Above address

ب. عنوان الدائم:

c. Employed by:

ت: أعمل لدى:

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

CCO 2-14 Inf

أنى اتظلم لدى حكومى الولايات المتحدة للأضرار والاصابات التي تجتى من: (المنظمة، الوحدة العسكرية)

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.)

Car accident death

الممتلكات المتضررة مملوكة من: (إذا كان هذا التظلم قدم من قبل ممثل أو قريب أو عامل فالرجاء أحاطر المستمسكات التي تخولكم وتوكلكم للتقدم بهذا التظلم ، أو أي دليل من ممثلي رسوبين.
إذا قدمتم بالأسفل للأفراد المذكورة بالشكوى للإصابات أو الأضرار التي أصابتهم.)

My claim arose at: High Way near Al dura Area of Baghdad Iraq
(Town) (City) (Country)

البلد أو المحافظة

المدينة

القرية

تظلم قدم في:

CENTCOM 010730

08-12A-A526-00008

My claim arose on: Aug 22 2009
Month Day Year

نظمى قدم فى:

المن يوم شهر

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.)

While the claimant husband driving on the high way
he exposed to accident by collision forces the

باختصار اشرح ما حدث والاضرار التي اصابتك جراء ذلك ، سواء كانت جسدية او ممتلكات . (الرجاء استعمال خلية هذه الورقة إن لم تكن الأسطر لكتفي)
vehicle damage and he killed -

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
Car damage	
person death	15000
Total:	15000

أشرح بالتفصيل متى تضرر والكلفة للممتلكات أو للإصابات الجسدية وتكلفتها (الرجاء إضافة الثبوتات والمumentos والمواد وغيرها المضروبة
لكل قسم لوحدة)

تكلفته

الشيء المتضرر

اجمالى الكلفة

CENTCOM 010731
08-I2A-A526-00009

I was insured to the following extent against the damage or injury I have sustained:

10 148470

لدي تأمين على الممتلكات او الضرر الجسدي المتضرر بما يوازي:

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

\$ 15000

I.D. /

اطالب بتعويض للأضرار يوازي (أكتب بالدولار الأمريكي أو العملة المحلية)

العملة المحلية

\$

I (have/ have not) previously filed a claim relating to the incident described above.

سابقاً (قمت) (لم أقم) بتقديم بلاغ لهذه الحادثة المذكورة بالأعلى

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

لحسن علمي طلب تظلم (قدم) (لم يقدم) لهذه الحادثة المذكورة بالأعلى

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

ملاحظة: بالتوقيع أسفل هذا التظلم فإن تقسم على أن كل المعلومات المقدمة في هذا التظلم هي صحيحة وحقوقية. أي شخص يحاول تقديم تظلم كاذب أو مخالف أو يزور التظلم ضدحكومة الولايات المتحدة الأمريكية سوف يواجه عقوبات جنائية حادة ويحاكم من قبل السلطات.

(Signature of Claimant)

(توقيع التظلم) الرجاء كتابة الاسم والتوقيع

Subscribed to me this / day of Dec, 2007.

(Signature of Witness)

(Printed Name)
CENTCOM 010732
08-I2A-A526-00010

foreign language

full story

(b)(6)

foreign language

the claimant said while her husband was [redacted]
on the high way at Adura area he exposed to

foreign language

an accident by coalition forces

[redacted him]
foreign language

Death - and her husband was sole provider for the
family - and she asks for compensation -

CENTCOM 010733
08-12A-A526-00011

(b)6 Foreign Language

CENTCOM 010734
08-I2A-A526-00012

27695

Sir,

Claimant said she was
turned in the claim on
Nov. 2007 it lost in our
OFFice, this one is
Second claim.

Thanks &

CENTCOM 010735
08-I2A-A526-00013

Pages 14 through 15 redacted for the following reasons:

(b)6 Foreign Language

(b)(6), foreign language

deach
centrale

CENTCOM 010738

08-12A-A526-00016

Page 17 redacted for the following reason:

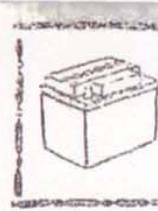
(b)6 Foreign Language

Foreign Language Text, (b)(6)

Reinhardt Technologies

CENTCOM 010740

08-I2A-A526-00018



Foreign Language Text



Nº 1

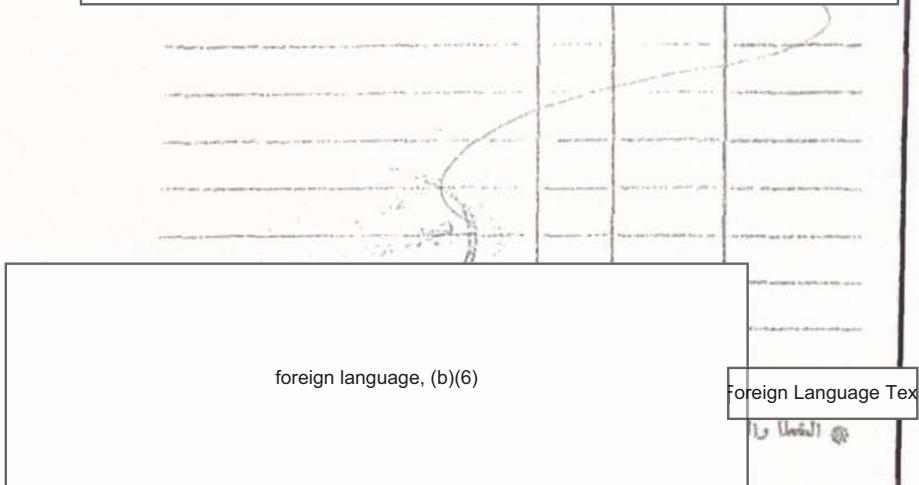
(b)(6)

Dark blue car

Foreign Language Text

Bottle
tree

foreign language



foreign language, (b)(6)

Foreign Language Tex

1. (b)(6)

reign Language Te

CENTCOM 010741

08-12A-A526-00019

27701

foreign language		
	foreign language	foreign language
	foreign language	البلد الكلى
		\$ 200
		\$ 600
		\$ 350
		\$ 150
		\$ 400
		\$ 3600
		\$ 450
		\$ 350}
		\$ 400
		\$ 50
foreign language	\$ 6550	foreign language 6550
foreign Language T		

CENTCOM 010742
08-12A-A526-00020

Langua

foreign language

foreign language, (b)(6)

\$ 800

\$ 700

\$ 1500

foreign language

CENTCOM 010743
08-12A-A526-00021

27703

Page 22 redacted for the following reason:

(b)6 Foreign Language

Foreign Language Text, (b)(6)

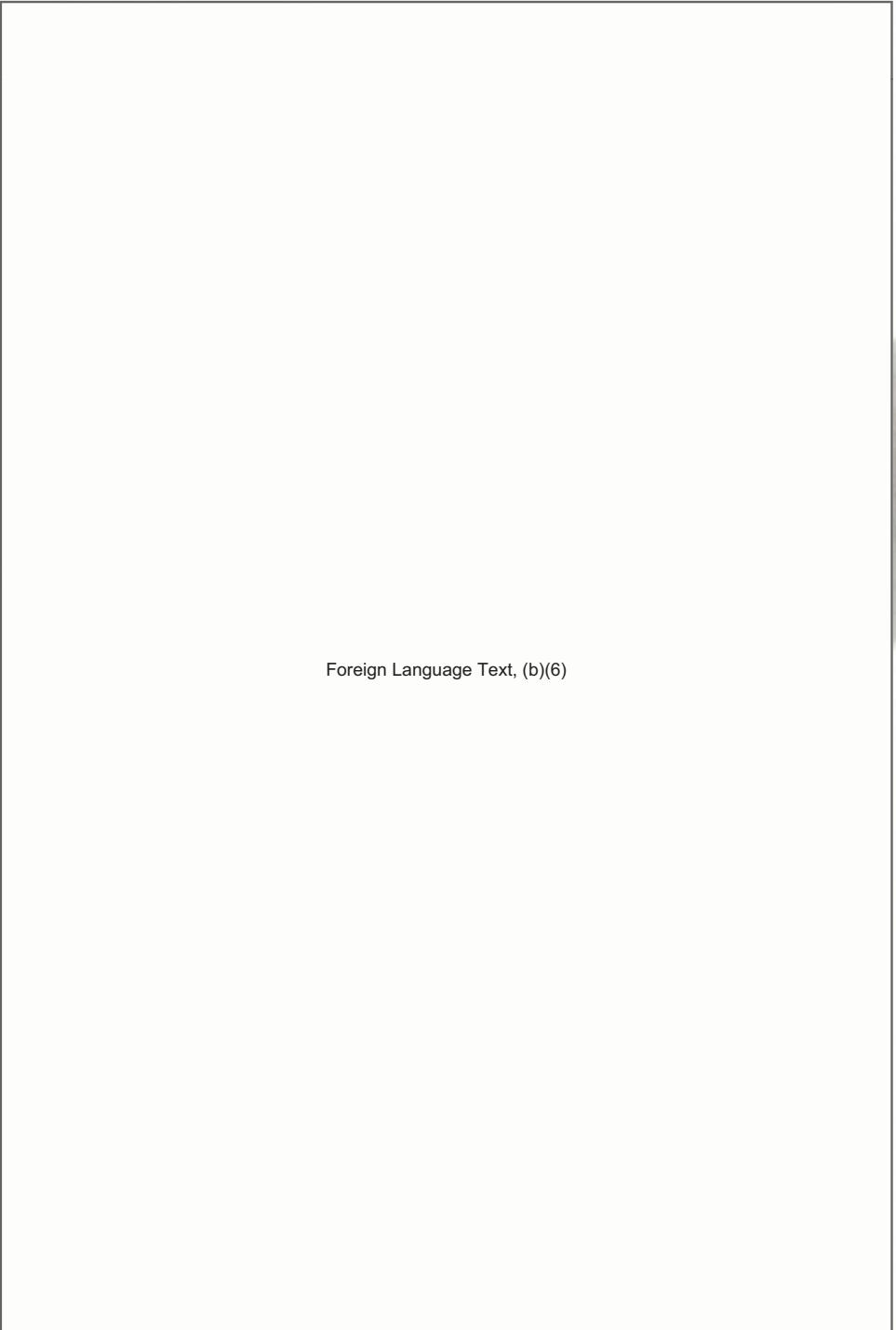
CENTCOM 010745
08-I2A-A526-00023



CENTCOM 010746
08-12A-A526-00024

Foreign Language Text, (b)(6)

CENTCOM 010747
08-I2A-A526-00025



Foreign Language Text, (b)(6)

CENTCOM 010748
08-I2A-A526-00026

Foreign Language Text, (b)(6)

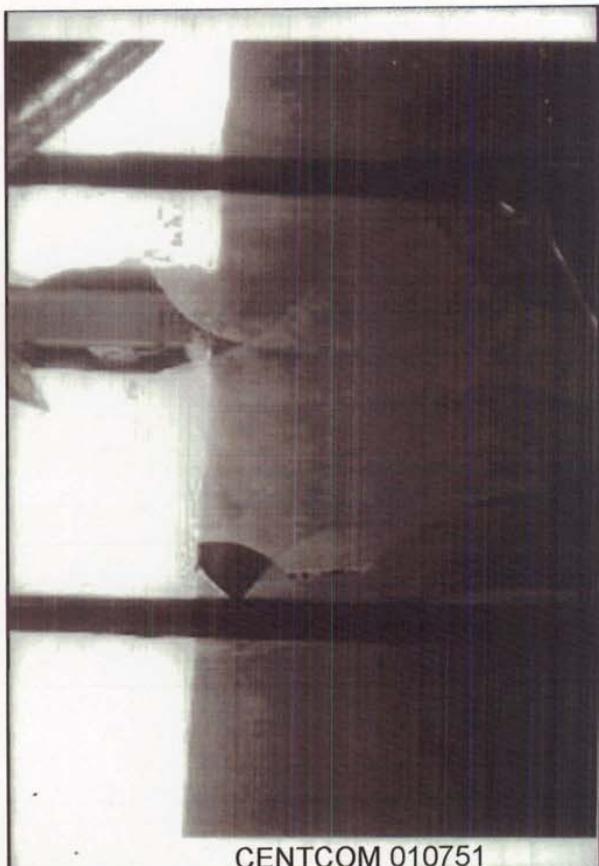
CENTCOM 010749
08-12A-A526-00027

27709



CENTCOM 010750

08-I2A-A526-00028



CENTCOM 010751

08-I2A-A526-00029



CENTCOM 010752

08-I2A-A526-00030

27712



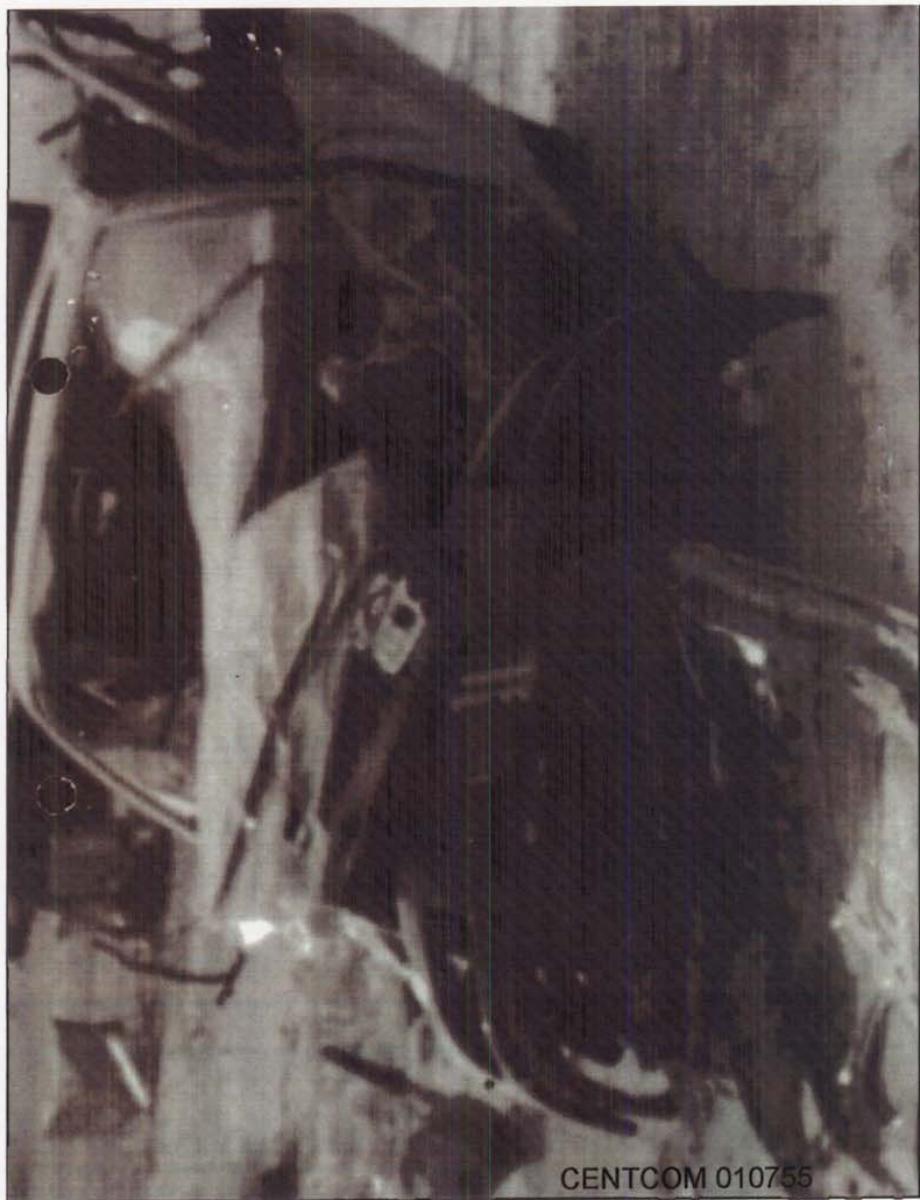
CENTCOM 010753

08-I2A-A526-00031



CENTCOM 010754

08-I2A-A526-00032



CENTCOM 010755

08-12A-A526-00033