

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

222-4
14-Apr-08

OTHER

- Approve \$5,000 -

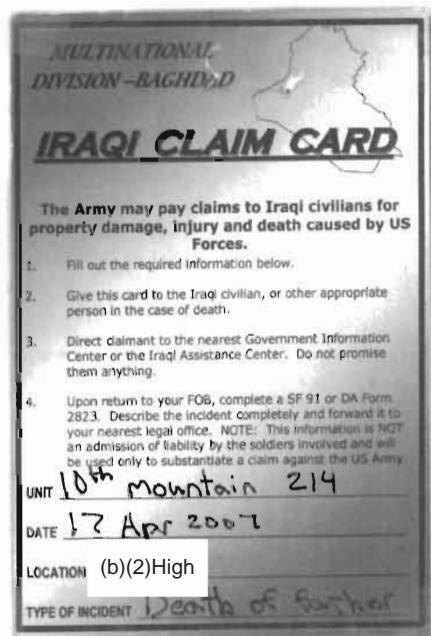
(b)(6)

08-145-T715

CENTCOM 017239

08-IK5-T715-00001

29709



CENTCOM 017240

08-IK5-T715-00002

29710



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, 3D BRIGADE COMBAT TEAM
101ST AIRBORNE DIVISION (AIR ASSAULT)
CAMP STRIKER, IRAQ
APO AE 09322



AFZB-KC-JA

3 July 2008

Foreign Claims Commission: IK5

RE: (b)(6) 08-IK5-T715 / 222-4

Dear Claimant:

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

Your damages are of great concern to the United States. In accordance with the cited references and the facts our investigation into your claim, I find your claim is **compensable**. **The United States will compensate you for your losses in the amount of \$5,000.00.**

If you are dissatisfied with this decision and wish to present additional evidence, you have thirty (30) days submit and appeal in accordance with AR 27-20.

عزيزى مقدم الطلب

لقد قدمت مطالبة للحصول على التعويضات عن الاضرار المزعومة والتي لحقت بالممتلكات الشخصية الخاصة بك، تنظيم الجيش 27-20 وادارة شؤون US وقد قمت بمراجعة طبک وبدقة وفقا لقانون المطالبات الخارجية المعنون 10, 2734, الجيش 27-162 من اجراءات المطالبة.

ان الاضرار الخاصة بك تعتبر محظ اهتمام الشعب الولايات المتحدة، وفقا للواقع المذكور في طلبك ومن خلال التحقيق اجد ان طلبك قابل للتعويض 5,000.00.

اذا كنت غير راض عن هذا القرار و ترغب في تقديم ادلة اضافية، لديك ثلاثة يومنا (30) و يقدم الطعن وفقا للمادة (27-20) من قانون الجيش AR.

(b)(6)

Sincerely,

Claimant

Date

(b)(6)

22 Aug 08

(b)(6)

Witness

Date

Captain, US Army
Claims Attorney, IK5

22 Sep 08

CENTCOM 017241

08-IK5-T715-00003

29711

SAFETY & SECURITY Revised October 2007 Department of the Treasury 1776-0200 100-012	PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			VOUCHER TWO	
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION DEPARTMENT OF THE ARMY 24th FMC Camp Liberty, Iraq APO AE 09364 DSN 61 09364		DATE VOUCHER PREPARED 03-Jul-08	SCHEDULE NO. 000-000		
		CONTRACT NUMBER AND DATE	PAGE 07 24th FMC Camp Liberty, Iraq APO AE 09364		
		REQUISITION NUMBER AND DATE			
AMOUNT DUE: \$64,765.15					
PAYEE'S NAME ARM ADDRESS		(b)(6)			
Baghdad					
		DATE INVOICED RECEIVED			
		DISCOUNT TERMS			
		PAYEE'S ACCOUNT NUMBER			
SUBMITTED FROM		VIA AIR			
DATE OF DELIVERY OR SERVICE AND DATE OF ORDER		ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply item code, and other information deemed necessary)	COUNTY	INVOICE COST PER	AMOUNT
		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.			\$5,000.00
NOTE: continuation sheet(s) if necessary)		(Payee must NOT use the space below)			TOTAL \$5,000.00
APPROVED FOR		EXCHANGE RATE	Differences		
<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		1.00 +31.00			
(b)(3), (b)(6)			000.00		
TITLE: SPC, US Pay Agent			(b)(3), (b)(6)		
Payee is to be officially vested in (a), (b) and (c)					
(b)(3), (b)(6)					
Foreign Claims Commission (FCC)					
ACCOUNTING CLASSIFICATION					
(b)(2)High					
CHECK NUMBER		ON ACCOUNT OF U.S. TREASURY	CHECK NUMBER		
PAYS BY CASH		DATE 22 Sep 08	PAYER (b)(6)		
\$5,000.00					
When stated in foreign currency, name of currency					
If this is being sent to another country, the name of the currency and the date of conversion are combined in one column, and the date of conversion is necessary, otherwise, the date of conversion is not used.					
When a voucher is received in the name of a company or corporation, the name of the person making the payment or the name as well as the capacity in which he signs, must appear. For example, "John Doe Company, by John Smith, Secretary" or "Treasurer", as the case may be					

CENTCOM 017242

08-JK5-T715-00004

29712



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, 3D BRIGADE COMBAT TEAM
101ST AIRBORNE DIVISION (AIR ASSAULT)
CAMP STRIKER, IRAQ
APO AE 09322



AFER-XC-JA

3 July 2008

Foreign Claims Commission, IK5

RE: (b)(6) 08-IK5-T715 / 222-4

Dear Claimant:

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

Your damages are of great concern to the United States. In accordance with the cited references and the facts our investigation into your claim, I find your claim is compensable. The United States will compensate you for your losses in the amount of \$5,000.00.

If you are dissatisfied with this decision and wish to present additional evidence, you have thirty (30) days to submit an appeal in accordance with AR 27-20.

جزيئي مقدم المطلب

لقد قدمت مطالبة للحصول على التعويضات عن الضرر المزعوم الذي لحق بالمتطلبات الشخصية الخاصة بك،
تقدير الجيش 27-20 و إدارة شئون JS وذلك قدمت ببرأيحة طلبك وبدقة وفقاً لقانون المطالبات الخارجية المعنون 10, 2734,
الجيش 27-162 من اجراءات المطالبة

إن الضرر الذي ورد في المطالبة هو فقدان والدك، وحال توضيحي ملحوظ، وتقدير المطالبة يقدر بـ 5,000.00

إنك غير راض عن هذا القرار وترغب في تقديم أدلة إضافية لديك ثلاثة أيام (30) وتقدير المطالبة وفقاً للإدلة (20-27-20)
من قانون الجيش AR

(b)(6)

Sincerely,

22 Aug 08

Claimant

Date

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

(b)(6)

22 Aug 08

Witness

Date

Captain, US Army
Claims Attorney, IK5

CENTCOM 017243

08-IK5-T715-00005

29713



REPLY TO
ATTENTION OF:

DEPARTMENT OF THE ARMY
Headquarters, 1st Brigade Combat Team
101st Airborne Division (Air Assault)
Camp Striker, Iraq, APO AE 09322

AFZB-KC-JA

03-Jul-08

MEMORANDUM FOR RECORD

SUBJECT: Action on Claim of (b)(6)
08-IK5-T715 / 222-4

1. Facts.

The claimant alleges that CF was in a firefight with AQIZ and a stray bullet killed his father.

Claimant has requested \$5,000.00

2. Opinion. In order to form a basis for a claim under the FCA, it must be shown that the incident occurred outside the United States, and that it was caused by noncombatant activities of the United States Armed Forces or by the negligent or wrongful acts of military members or civilian employees of the Armed Forces. The claim packet contained credible evidence of damage caused by US forces not involved in combat operations.

3. Authority. The Foreign Claims Act (10 U.S.C. § 2734) as implemented by AF 27-20, Chapter 10.

4. Action. Settle this claim in the amount of \$5,000.00

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

CPZ JA
Claim Attorney IK5

CENTCOM 017244

08-IK5-T715-00006

29714

Page 7 redacted for the following reason:

Foreign Language Text, (b)(6)

CLAIMS LOG

AMOUNT CLAIMED: \$15,000

CLAIMANTS NAME: _____ (b)(6) _____

DATE CLAIM SUBMITTED: 19 Apr 08

DATE OF INCIDENT: 12 Apr 07

PARALEGAL RECOMMENDATION: _____ (b)(5) _____

FCC ACTION: DENY APPROVE OTHER

COMMENTS / REMARKS:

- Claims card and death certificate present for
father killed.

ID: _____ (b)(6) _____

Des - His father was caught in SAF and he
was killed.

type - other



THE GIC OPINION ABOUT A CLAIM

(b)(6)

Case No. (b)(6)

1. The claimant presented claim card from the US Army proved their responsibility for killing her father.
2. The claimant ask amount of **\$ 5000**.
3. We suggest compensate her amount of **\$ 5000**.

With our respect,

(b)(6)

(b)(6)

LAWYER

(b)(6)

19 April 08

CENTCOM 017247

08-IK5-T715-00009

29717

Claim Department

"THE CLAIM'S CONTAINS"

The Claimant name:- (b)(6)

- Claim card.....
-
- Death certificate.....
-
- Survey of accident location.....
-
- Two witnesses.....
-
- Personal documents.....
-
-

SIGN; ----- (b)(6) -----

NAME; -----

DATE: 4/14/08



Claims Form



To: United States Army Foreign Claims Commission
From: Name: (b)(6)

Address: Baghdad (b)(6)

Iraqi ID No. (b)(6)
I am

- a. A citizen and national of: Iraq
- b. A permanent resident of: Baghdad - Iraq
- 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 and Telephone Number)

M.N.F

The property damaged had 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 in (b)(6)

Baghdad (City) Iraq (Country)

My claim arose on APR (Month)

17 (Day)

2007 (Year)

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.)

On 14- Apr-07 The U.S army opened fire randomly towards our houses, there location in (b)(6)
Due to killed my father. that's why am asking
For compensation

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

Killed my Father by U.S army

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>
1- <i>For the victim</i>	<i>\$ 5000/00</i>
2-	
3	
4	
5	
6	
Total: <i>\$ 5000,00</i>	

I was insured to the following extent against the damager 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)

\$ *5000/00* local *6,000,000 ID*

(b)(6)

(Signature or Claimant)

Subscribed before me this *14* day of *Apr*, 200*8*

(b)(6)

(SIGNATURE)

(b)(6)

(PRINT NAME)

CENTCOM 017250

08-IK5-T715-00012

29720

Pages 13 through 15 redacted for the following reasons:

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

Foreign Language Text

Foreign Language Text

Foreign Language Text

Foreign Language Text, (b)(6)

CENTCOM 017254

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08-IK5-T715-00016

Foreign Language Text, (b)(6)

CENTCOM 017255

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08-IK5-T715-00017

Pages 18 through 22 redacted for the following reasons:

Foreign Language Text, (b)(6)

Foreign Language Text, (b)(6)

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08-IK5-T715-00023

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