

FOL: 18 Dec 06
DET STATUS 06 1700

DET

PD 2500

Approved
29 AUG 07
CFT
KUC-P600

CENTCOM 006651

32471

Lawyer

21066

5 Aug, 1960, Al-Katara, in front of T.D. office,
C.E. fire (marine military department) killed
wife

CE

006652

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CERP PACKETS

Claim #: DI7

Name of Person Submitting Claim: _____

Location of Incident: 5 AUG 06

Date Claim Submitted: 18 DEC 06

Person Receiving Claim: 7

Date Packet Completed: _____

Date Packet Submitted to MEF: _____

Date Claim Paid/Amount Paid: _____

Notes: REDACTED NEED CLAIMANT TO SHOW LOCATION. LOTS OF SAF FROM
CFS AIF.

Copy of ID Card

Proof of ownership (deed, proof of inheritance, bill of sale)

Death certificates

Medical Examination

POA's

Pictures of Damage

Checked SigActs: Yes No

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32473

051707AUG06: 3/8 MAR sustained multiple attacks while conducting security and observation operations in central Ramadi. OP [REDACTED] was attacked with SAF and MMG fire from their north and south. Post 1 [REDACTED] [REDACTED], Post 2 [REDACTED], and Post 6 [REDACTED] positively identified (4-6) AIF with AK-47s and PKCs in the 2nd Balconies Building [REDACTED]. Post 1, Post 2, and Post 6 returned fire with (UNK volumes of) 5.56mm [REDACTED], 7.62mm [REDACTED], 40mm [REDACTED] and (2) [REDACTED] rockets at a distance of 300m. Post 4 [REDACTED] established PID of (2) AIF with AK-47s at the intersection of B St and West Graves [REDACTED], and (2) AIFs with AK-47s at the Charlie House [REDACTED]. Post 4 returned fire with 7.62mm [REDACTED] at distances of 220m, and 310m.

To : United States Army - Persian Gulf

From : Name: -

Address :-

Ramadli - Alsharka

I am

- a. A citizen and national of : Iraq
- b. A permanent resident of : Ramadli - Alsharka - Iraq
- c. Employed by : _____
- d. Check one () An insure () 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)

(U.S. Army) Military - Department

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).-

Alsharka Ramadli Iraq
My claim arose at : _____
(Town) Alsharka (City) Ramadli (Country) Iraq
My claim arose on : _____
Month July Day 25 year 2006

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).

In the date of 5-8-2006 at five o'clock happened some shooting by coalition forces which led to leave to our home and when we were in the st. of front of TD office. The forces on it began to shoot to all of directions which led to touch my wife which led for death after we have taken her to hospital so I am asking about compensation.

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Foreign Language Text

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

The description of the claim is
the death of my wife

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>
<u>The amount is equal 5,000 five</u>	
<u>thousands of american Dollars</u>	
Total:	<u>5,000 five thousand</u>
	<u>of american Dollars</u>

I was insured to the following extent against the damage 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)

\$ 5,000 five thousand 7.5 seven and half
of american Dollars millions of Iraqi Dinars

(Signature of Claimant) _____

Subscribed before me this day of 200.....

(Print Name)

(Signature)

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