

DEPARTMENT OF THE ARMY
3d Brigade Combat Team
4th Infantry Division (Mechanized)
FOB Warhorse, Iraq
APO AE 09397

JAN 16 2006

AFZC-FC-JA

MEMORANDUM FOR RECORD

SUBJECT: Claim of [REDACTED]: 06-3/4-90

1. Claimants name and address: [REDACTED] Balad, Iraq.
2. Incident date and place the incident occurred giving rise to the claim: Incident occurred on 2 Dec 05, in Balad, Iraq
3. Amount of claim and filing date: Claimant filed a claim in the amount of \$25000, on 26 Dec 05.
4. Chapter the claim was considered under and a brief description of the incident or of the issues raised by the claimant on reconsideration: Foreign Claims Act and Chapter 10, AR 27-20; claim filed for compensation for the death of husband.
5. Facts: The claimant stated that her husband was shot and killed by coalition forces while driving produce from his farm to sell at the market. As stated in the SIGACT report, the victim drove his vehicle into the middle of a convoy. The Coaliton Forces took her husband's body to her house.
6. Opinion: In order to form a basis for a claim under the FCA, the incident in question must have arisen outside the Unites States. In addition, the incident must be caused by either non-combat activities of the Unites States Armed Forces or by negligent or wrongful acts of military members or civilian employees of the Armed Forces. The shooting was lawful as it was initiated only after the victim demonstrated hostile intent by pulling into the middle of the convoy.
7. Recommended Action: This claim is not payable under the FCA for the above mentioned reasons. Consequently this claim for \$25000 is denied.

[REDACTED]
CPT, JA
Foreign Claims Commission

000108



DEPARTMENT OF THE ARMY
HEADQUARTERS, 1st BATTALION, 8th INFANTRY REGIMENT
3rd BRIGADE COMBAT TEAM, 4th INFANTRY DIVISION
UNIT # 52003 FOB PALIWODA, BALAD, IRAQ
APO AE 09391

REPLY TO
ATTENTION OF

AFTV-VVB

26 December 2005

MEMORANDUM OF OPINION

SUBJECT: Claim of [REDACTED]

1. Claimant's name and address: [REDACTED] Balad, Iraq.
2. Date and Place the incident occurred giving rise to the claim: Incident occurred on 02 December 2005, Balad, Iraq.
3. Amount of Claim and the date it was filed: Claimant filed the claim in the amount of \$25,000.00, 26 December 2005.
4. Chapter(s) the claim was considered under, and a brief description of the incident or of the issues raised by the claimant on reconsideration: Foreign Claims Act and Chapter 10, AR 27-20; claim filed for compensation for death of [REDACTED]
5. Facts:
 - a. 02 December, 2005 vic MC257607 Claimant stated that her husband, [REDACTED] was shot and killed by CF while driving produce from his farm to sell at the market. Claimant also stated that CF brought her husband's body to her house.
6. Opinion:
 - a. Although this event is confirmed in the SigActs, the vehicle displayed hostile intent by pulling out into the middle of the convoy. Therefore this claim should be denied.
7. Recommended action: This claim should be denied.

[REDACTED]
SGT, USA
BN-Claims Officer
[REDACTED]

Claim

06-3/4-90

DENIED
(AB)

000109

Claims Form

To: United States Army Foreign Claims Commission.

From: Name: [REDACTED]

POA/ATT: _____

Power of Attorney provided and interpreter approved: _____

Decedents: _____

Hometown: BALAD Iraqi Resident: YES

My claim arose at: BALAD (Town) IRAQ (Country)

My claim arose on: December (Month) 02 (Day) 2005 (Year)

Proof of Ownership: _____

Interpreter Approved: [REDACTED]

Death Certificate (Name, Cause of Death, Age, and Time of Death Consistent with claimant allegations): [REDACTED]

Shot, 47.

Interpreter Approved: [Signature]

Legal Expert Opinion: I.P. CPT S [REDACTED]

Interpreter Approved: [REDACTED]

Witness Statement (Consistent?) [REDACTED]

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.)

Her husband was driving on Amy, bringing oranges from his farm to sell @ the market in Balad. C.F. shot at his vehicle and killed him. She states that C.F. brought his body to her home.

Evidence: photographs, hospital reports, I.P. report.

000110

Item

DEATH

Amount

\$25,000.00

Total: \$25,000.00

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)

\$ 25,000.00

local

(Signature of Claimant)

Subscribed before me this 26 day of December, 2005.

(Print Name)
(Signature)

SGT, CA

000111

Claims Form

To: United States Air Force Foreign Claims Commission ✓

From: Name: _____

Address: Balad - Al-Soo'd

I am

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

Coalition Forces

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.) For my brother who had been killed by the U.S. troops.

My claim arose at: channel 14/Balad Station Balad Iraq
(Town) (City) (Country)

My claim arose on: _____
Month Day 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.)

At the morning of 21 Dec/05 my brother was going out to Balad station place for selling the fruits. at once of his arrival to channel 14 place, the us forces shoted him with guns and knocked him down. My brother was leading the car type Toyota/pick up model 1980 white colored No 8136 Diyala

000112

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

My brother had been killed by 25000
the U.S. Sheats.

Total: 25000 \$

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)

\$ 25000

local 37000000 Iraqi Dinars.

(Signature of Claimant)

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

(Print Name)

(Signature)

000113