

CLAIMS FORM  
US ARMY FOREIGN COMMISSION

CLAIM # 1#045 # 0 # 5

CLAIMANT NAME -----  
ADDRESS ----- Sadr city  
SEC/----- ST/----- H/-----  
PHONE ( )

IAM

- A - A Citizen and National Of ( Iraq )
- B - A Permanent Resident Of (Baghdad )
- C - Employed By
- D - Check one ( ) an insure (X) Not an insurer
- E - Check one ( ) A subrogate (X) Not a subrogate

HAVE YOU FILED A CLAIM BEFORE ( circle one ) YES OR **NO**

TYPE OF CLAIM ( circle which applied )

INJURY **DEATH**

PROPERTY DAMAGE: VEHICLE , BUILDING , FIELD , ANIMAL , OR OTHER

NAME -----  
RELATIONSHIP The claimant son AGE: 35 DOB DM/Y 11/7/1970

DATE INCIDENT OCCURRED : /D/ 7 /M/ 5 /YYYY/ 2005

PLACE INCIDENT OCCURRED Sadr city

SEC/----- ST/----- H/-----

SITUATION

In this date and when the claimant ~~was~~ brother was  
solved the CD disk in the end of al dekal street -  
The Amirecan traps was enters to this place and open  
shooting and happened clashes between Amirecan traps and  
army men which caused injured the claimant brother and move  
to hospital then dead there for this the claimant request  
compensation.

List in detail the amount of property damage and itemized expense resulting from the property  
Damage or personal injury : ( attach bills and receipts , if applicable )

Item	Amount
<u>The destion left for the Committee</u>	

TOTAL AMOUNT: ----- US DOLLAR ----- OR DINAR -----

Signature -----  
Today date 24/7/05

000318



REPLY TO  
ATTENTION OF:

DEPARTMENT OF THE ARMY  
HEADQUARTERS, 2D BRIGADE  
3D INFANTRY DIVISION  
FOB LOYALTY, IRAQ  
APO AE 09380

AFZP-VB-JA

Date: 07-Aug-05

MEMORANDUM FOR RECORD

SUBJECT: DISAPPROVAL OF FOREIGN CLAIM H8T1210-05:

Claim of: [REDACTED]

Address: [REDACTED] Baghdad, Iraq

Date Filed: 02-Aug-05

Amount Claimed: \$0.00

Claimed Loss: Claimants brother was out on the street selling CD's when AIF and U.S Forces began shooting causing the death of his brother.

Claim Number: 1.0569

1. Your above-mentioned claim is disapproved.
2. This incident **does not** comply with the provisions of the Foreign Claims Act, 10 U.S.C. Section 2734, as implemented by Chapter 10, AR 27-20. This claim was filed in a timely manner. This claim did occur outside the United States.
3. The reason for the disapproval of this claim is code 1:
  1. Loss was a result of Combat Operations
  2. The filing claimant is an improper claimant
  3. Claim lacked evidence supporting U.S. negligence or fault
  4. Claim lacked evidence to prove a loss
  5. Loss was a result of Anti-Coalition Forces
4. 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.
5. POC for this memorandum is [REDACTED] FOB Loyalty, @ VOIP 242-7063.

[REDACTED]

CPT, JA  
FOREIGN CLAIMS COMMISSION

000319