MEMORANDUM OF OPINION

SUBJECT: Claim of 6-IT6-041

1. Identifying Data: by POA

2. Date and place the incident occurred giving rise to the claim: The claim occurred on 25 April 2006, in Samarra, Iraq.

3. Amount of claim and date it was filed: Claimant filed a claim for $3500.00 on 20 June 2006.

4. Jurisdiction: This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was filed in a timely manner.

5. Facts: Claimant alleges CF shot and killed his father.

6. Opinion: Under AR 27-20, paragraph 10-3, Claims arising "directly or indirectly" from combat activities of the U.S. Armed Forces are not payable. AR 27-20 defines combat activities as, "Activities resulting directly or indirectly from action by the enemy, or by the U.S. Armed Forces engaged in armed conflict, or in immediate preparation for impending armed conflict." A search of the SIGACTS revealed that at 250742APR2006 an EOF occurred in Samarra, resulting in the shooting death of a LN. This claim arose during combat activities and is non-compensable under the FCA.

7. Recommendation: The claim is denied.

CPT, JA
FCC
AFZB-JA-C

MEMORANDUM FOR Record

SUBJECT: Claimant Denial

1. This is in response to your claim against the United States Government. Your claim has been reviewed under the Foreign Claims Act, 10 U.S.C. 2734, as implemented by Army Regulation 27-20, Chapter 10. I regret to inform you that your claim has been denied.

2. Your claim has been denied for the following reasons:
   a. There is not enough evidence to prove your claim.
   b. The evidence shows that United States Forces did not cause the damage.
   c. The evidence shows that the damage was caused during combat.
   d. The evidence shows that the damage was caused by your own negligence or wrongdoing.
   e. The evidence shows that your claim was fraudulent.
   f. Other: ________________________________________________________________

3. If this is the first time your claim has been viewed by this office, you may submit an appeal. This office must receive the appeal no later than 30 days after receipt of this message. The appeal must also contain additional evidence supporting your claim. If the appeal is sent after 30 days have passed, or does not provide additional evidence, then the appeal will be denied.

4. POC is the 101st Airborne Division (Air Assault) Claims Office at DSN 318-845-1022.

CPT, JA
FCC

000407
AFZB-JA-C 23 June 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of Badrich Kamel Mohammed; 6-IT6-041

1. Identifying Data: [ redacted by POA ]

2. Date and place the incident occurred giving rise to the claim: The claim occurred on 25 August 2005 in Ad Duloyiah, Iraq.

3. Amount of claim and date it was filed: Claimant filed a claim for $3,500 on 25 May 2006.

4. Jurisdiction: This request is presented for consideration under the provisions of the Foreign Claims Act, 10 USC Section 2734, as implemented by Chapter 10, Army Regulation 27-20. This claim was properly filed in a timely manner.

5. Facts: The Claimant alleges that a CF shot his father. A SIGACTS investigation revealed no activity during the relevant time period which substantiates claimant’s allegations.

6. Opinion: “Under AR 27-20, paragraph 10-3, liability under the FCA may be based on acts or omissions of U.S. soldiers or civilian employees of a U.S. military department only if they are considered negligent or wrongful.” Here, there is insufficient credible evidence to link CF with claimant’s allegations.

7. Recommendation: The claim is denied

CPT, JA
Claims Judge Advocate
TF Band of Brothers Claims Intake Form

To: United States Army Foreign Claims Commission.
From: Name: [Redacted]

POA/ATT:
Power of Attorney provided and interpreter approved: 
Decedents: 

Hometown: Samarra, Iraq

My claim arose at: Samarra, (City) and (Country)

My claim arose on: April 26, 2006

Proof of Ownership: 
VIN Match: 
Interpreter Approved: 

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): [Redacted]

Interpreter Approved: 

Medical Report/Legal Expert Opinion: 
Interpreter Approved: 

Witness Statement (Consistent?): 

Interpreter Approved: 

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.)

Evidence:

000409