



DEPARTMENT OF THE ARMY
Headquarters, 3rd Brigade Combat Team
3rd Infantry Division
FOB Warhorse, Iraq
APO AE 09397

REPLY TO
ATTENTION OF:

AFVZ-VI-JA

24 October 2005

MEMORANDUM OF OPINION

SUBJECT: Claim of [REDACTED], 05-IA5-1509

1. Claimants name and address: [REDACTED], Ad-Duluiyah, Iraq.
2. Incident date and place the incident occurred giving rise to the claim: Incident occurred on 25 August 2005 in Ad-Duluiyah, Iraq.
3. Amount of claim and filing date: Claimant filed a claim in the amount of \$2,500 on 17 September 2005.
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 personal injury.
5. Facts:
 - a. Claimant's daughter was killed by U.S. artillery.
 - b. There were photographs, and a death certificate included in the submitted claim.
6. Opinion:
 - a. In order to form a basis for a claim under the FCA, the incident in question must have arisen outside the United States. In addition, the incident must be caused by either non-combat activities of the United States Armed Forces or by negligent or wrongful acts of military members or civilian employees of the Armed Forces.
 - b. There is sufficient evidence to suggest that this incident arose out of the negligence and/or wrongful acts of the United States Armed Forces. 1/15th IN's Fire Support Element verifies firing artillery into the village on the claim date.
7. Recommended Action: This claim is payable under the FCA for the above mentioned reasons. Consequently this claim for \$2,500.00 is approved.

[REDACTED]
000503

[REDACTED]
CPT, JA

Claims Form

To: United States Army Foreign Claims Commission.

From: Name: _____

Address: _____

I am

- a. A citizen and national of: Iraq
- b. A permanent resident of: Al-Dulayehai
- 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)

U.S. Army

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.)

My claim arose at: Al-Dulayehai SalahDean Iraq
(Town) (City) (Country)

My claim arose on: Aug 24/25 2005
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.)

In the date mention above the American forces shoot some marker which randomly shooting, which falls in my house and cause hit my girl ([redacted]) in her hand and shoulder, we take her to the hospital for treatment and she submit to operation in her shoulder and her hand to remove the marker pieces from her body, as shown in the medic report and legal expert report.

000504

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

big claims

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 |
|-------------------------------------|---------|
| As shown in the legal expert report | 2500 \$ |

Total: 2500 \$

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.)

\$ 2500

local

(Signature of Claimant)

Subscribed before me this 30 day of Aug 2005

(Print Name)

(Signature)

000505