PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

U.S. DEPT. BUREAU, OR ESTABLISHMENT AND LOCATION
DEPARTMENT OF THE ARMY
B-DEPT/TH FINANCE BATTALION
FOR WARHORSE, QIF III
APO AE 09397

DATE VOUCHER PREPARED 20-Dec-05
SCHEDULE NO.

PAYS RECEIVED
NAME AND ADDRESS

SHIPPED FROM
TO
WEIGHT

BAQUBAH, IRAQ

ARTICLES OR SERVICES
21-Nov-05 17-Dec-05 filed for compensation for two deaths and two injuries.

QUAN.

UNIT PRICE

AMOUNT

14,000.00

$14,000.00

$14,000.00

PAYMENT

PROFESSIONAL

FUND

PAYOR

DISBURSING OFFICER

FORWARDED TO: LTC, PC

ACCOUNTING CLASSIFICATION

2162020 22-0204 P436099.22-4200 VIRQ F9203 S99999 APC: 9204

$14,000.00

CASH

$14,000.00

DATE

000854
MEMORANDUM OF OPINION

SUBJECT: Claim of [Redacted], 06-IA5-182a

1. Claimants name and address: [Redacted], Baqubah, Iraq

2. Incident date and place the incident occurred giving rise to the claim: Incident occurred on 21 November 2005 in Baqubah, Iraq.

3. Amount of claim and filing date: Claimant filed a claim in the amount of $14,000 on 17 December 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; filed for compensation for two deaths and two injuries.

5. Facts: Claimant’s two children were killed and wife and child were injured when elements of 3d BCT, 3d ID and 3rd BN, 3d BDE, 5 DIV IA fired from a convoy at their vehicle.

6. Opinion: 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. TF Badger’s S-5 Officer verifies the occurrence of this raid and the facts and circumstances surrounding this incident.

7. Recommended Action: This claim is payable under the FCA for the above mentioned reasons. Consequently this claim is approved for $14,000.

CPT, JA
Claims Judge Advocate
Claims Form CF-1

1. To: United States Army Foreign Claims Commission
   From: Name: __________________________
         Address: __________________________

         I am
         a. A citizen and national of: __________________________
         b. A permanent resident of: __________________________
         c. Employed by: __________________________

2. I hereby make a claim against the United States Government for damages or injuries caused by: (Unit Name or Individual)

3. The property damaged is owned by: __________________________

4. My claim arose at: __________________________
   (Town)
   (City)
   (Country)

5. My claim arose on: __________ __________ __________
   Month   Day   Year

6. 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.)
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________

7. 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
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________
   __________________________

   Total: __________________________

8. I claim as damages: (Indicate amount in U.S. dollars and local currency)

   $ __________________________
   local __________________________

   __________________________
   (Signature of Claimant)

9. Subscribed before me this __________ day of __________________________

   __________________________
   Name: __________________________
   Rank: __________________________

   000856