



**HEADQUARTERS
MULTI-NATIONAL CORPS - IRAQ
BAGHDAD, IRAQ
APO AE 09342**

REPLY TO
ATTENTION OF:

FICI-JA

Claim of [REDACTED] 06-IV6-T0025

ACTION

1. Facts: The claimant alleges that on 12 May 2005, US Forces shot at a bus traveling from Iraq to Jordan and killed his son. The amount requested in damages is \$15,000.
2. Opinion: The FCA permits compensation for damages caused by the negligent and wrongful acts of US forces. This claim was determined to be a combat action.
3. Authority: The Foreign Claims Act (10 U.S.C. § 2734) as implemented by AR 27-20, Chapter 10.
4. Action: The claim is therefore denied.

[REDACTED]
CPT, JA
FCC IV6

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000910



HEADQUARTERS
MULTI-NATIONAL CORPS - IRAQ
BAGHDAD, IRAQ
APO AE 09342

REPLY TO
ATTENTION OF:

FCC IV6

16 February 2006

CLAIM OF: [REDACTED]
CLAIM NUMBER: 06-IV6-T0025

Dear Sir or Ma'am:

This notice constitutes final administrative action on your claim against the United States.

Foreign Claims Commission (FCC) IV6 has investigated and considered the claim under the Foreign Claims Act (FCA), Title 10, United States Code, Section 2734, as implemented by Army Regulation (AR) 27-20, Chapter 10. The claim is cognizable solely under the FCA as it concerns an inhabitant of Iraq. The Federal Tort Claims Act, Title 28, United States Code, Section 2680(k), is not applicable as it excludes claims arising in foreign countries. Under the FCA, a claim for death or personal injury may be allowed whether or not the negligent act complained of was made within the scope of employment.

FCC IV6 has reviewed all of the evidence given and has investigated this claim to the best of its ability considering the information presented.

Unfortunately your claim has been denied. The FCA does not permit the payment of claims arising from the actions of service members unless such actions were either negligent or wrongful. However, in your claim you have been unable to substantiate that the US forces acted either negligently or wrongfully and accordingly your claim is denied. This claim was determined to be a combat action.

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.

[REDACTED]
E
CPT, U.S. Army
FCC IV6

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000911

UNITED STATES ARMED FORCES CLAIMS FORM

I. TO: United States Army Foreign Claims Commission Today's Date:

II. FROM: Name (English):

Name (Arabic):

(a) Circle one: Claimant / Attorney/ Authorized representative/ Parent/ Brother/Sister/ Son/Daughter
→ [Attorney or representative MUST attach proof of authorization.] Other:

(b) IRAQI IDENTIFICATION NUMBER:

(c) DETAINEE IDENTIFICATION NUMBER:

III. ADDRESS of person filing claim:

(English):

(Arabic):

IV. HOME OR CELL PHONE NUMBER:

(a) I, the above named claimant/attorney/representative, certify that I (or the person on whose behalf I am making this claim) am a resident of Baghdad

(b) I hereby make a claim against the UNITED STATES GOVERNMENT for damages or injuries caused by the following military unit:

(c) The property damaged is owned by:

(d) The incident happened on May 12th 05 at _____
(Date) (city/town/neighborhood/highway name & number)

V. The facts of the incident are as follows:

According to his speech that when his son was traveling to Jordan by Bus they found an American Military Convoy, they shot the Bus randomly resulted in to kill his son with some woman. When the Convoy stopped, they took the victim to Al Rutba Hospital and gave him a claim card.

* notes: the Bus was (white mercedes 1990)

[Use back of sheet if needed. Be sure to include any photographs, statements from witnesses, documents proving ownership of damaged or destroyed property, death certificates, medical bills and repair estimates.]

UNITED STATES ARMED FORCES CLAIMS FORM

VI. The following is a detailed list of what was damaged or destroyed and the estimates for repair if damaged and replacement if destroyed:

| ITEM | PRICE |
|--------------|-------|
| | |
| | |
| Death of Son | |
| | |
| | |
| | |

TOTAL \$ 15,000

(a) I had insurance for the following: _____

(b) My insurer is: _____

VII. My total claim in U.S. Dollars against the United States Government is: \$ 15,000
and in Iraqi Dinars is: _____

CLAIM WILL NOT BE VALID IF US DOLLAR AMOUNT IS LEFT BLANK

This is my total claim resulting from this incident. I understand that if I accept a settlement of this claim that I will not receive any other money for this incident. I also understand that if my claim is denied, I will have the opportunity to appeal the decision but will likely need to provide new evidence in order to have my claim approved.



(Signature of Claimant)

CLAIM WILL NOT BE VALID IF SIGNATURE IS LEFT BLANK

The claimant was assisted in completing this claim form by:

(Name)

(Contact Information: e-mail, address, DSN/DNVT, etc.)

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