MEMORANDUM FOR Claimant

SUBJECT: Claim 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 proving your claim. If the appeal is sent after 30 days has passed, or does not provided additional evidence, then the appeal will be denied.

4. POC is the Tikrit Claims Office at DNVT 553-3362.

CPT, JA
Foreign Claims Commissioner
Claims Form

To: United States Army Foreign Claims Commission.
From: Name: [Redacted]
POA/ATT: [Redacted]
☐ Power of Attorney provided and interpreter approved:
Decedents: [Redacted]

Hometown: Samarra   □ Iraqi Resident:

My claim arose at: Samarra   Samarra   Iraq

(Town)   (City)   (Country)

My claim arose on: March   1   2005

Month   Day   Year

Proof of Ownership:
☐ Interpreter Approved:

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

☐ Interpreter Approved:

Legal Expert Opinion:
☐ Interpreter Approved:

Witness Statement (Consistent?): [Redacted]
☐ 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.)

[Handwritten text:

Claimant saw nothing.]

Evidence:
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.)

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wrongful Death</td>
<td>$5000</td>
</tr>
</tbody>
</table>

Total: $5000

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)

$5000

(Signature of Claimant)

Subscribed before me this 8 day of J une, 2005

(Print Name)
MEMORANDUM OF OPINION

SUBJECT: Claim of [Redacted], 05-IA3-1231

1. Identifying Data: [Redacted], Samarra, Iraq

2. Date and place the incident occurred giving rise to the claim: The claim occurred on 1 March 2005, in Samarra, Iraq.

3. Amount of claim and date it was filed: Claimant filed a claim for $5,000 on 8 June 2005.

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 that her husband was killed by U.S. Forces in Samarra. The claimant alleges that her husband was riding in his car in Samarra, when U.S. Forces shot him in the head. The claimant did not witness the event. Neither the claimant, nor her witnesses could provide any further detail as to what occurred or how or why it occurred. The claimant provided a police report and a death certificate.

6. Opinion: There is insufficient evidence to indicate that U.S. Forces were involved in the death of the claimant's husband.

7. Recommendation: The claim is denied.

CPT, JA
Chief, Claims