

CLAIMS FORM  
US ARMY FOREIGN COMMISSION

CLAIM # 2006-4

CLAIMANT NAME [REDACTED]  
ADDRESS [REDACTED]  
SEC/ 513 ST/ 14 H/ 3  
PHONE#: \_\_\_\_\_

I AM

a. A Citizen and National Of: Iraqi

B. A Permanent Resident Of: Pakistan

C. Employed By: \_\_\_\_\_

d. Check one ( ) an insurer ( ) Not an insurer

e. Check one ( ) A subrogate ( ) Not a subrogate

HAVE YOU FILED A CLAIM BEFORE (circle one) YES OR NO

TYPE OF CLAIM (circle which applied)

INJURY DEATH:  
PROPERTY DAMAGE: VEHICLE, BUILDING, FIELD, ANIMAL, OR OTHER  
NAME [REDACTED]

RELATIONSHIP the owner AGE: 27 DOB D/M/Y 21/11/1978

DATE INCIDENT OCCURRED: D/ 4 M/ March /YYYY/ 2005

PLACE INCIDENT OCCURRED Al Meshhal  
SEC/ \_\_\_\_\_ ST/ \_\_\_\_\_ H/ \_\_\_\_\_

SITUATION The American soldiers had shot on him and caused the injury and he is workless because of the injury and his leg is not good to help him for work

List in detail the amount of property damage and itemized expense resulting from the property damage or personal injury: (Attach bills and receipts, if applicable)

Item	Amount
<u>The claim a compensation for the injury and the car damage</u>	

TOTAL AMOUNT: US DOLLAR 6000 \$ 6 thousand dollar for injury and for car damage  
ORDINAR \_\_\_\_\_

Today date 5/4/2005

Signature [REDACTED]