



6-1K8-11  
10 Jan 00

**DEPARTMENT OF THE ARMY**  
HEADQUARTERS, 101<sup>ST</sup> AIRBORNE DIVISION (AIR ASSAULT)  
TASK FORCE BAND OF BROTHERS  
FORWARD OPERATING BASE SPEICHER  
APO AE 09393

AFZB-JA-C

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 101<sup>st</sup> Airborne Division (Air Assault) Claims Office at DSN 318-845-1022.

[REDACTED]  
CPT, FCC  
Foreign Claims Commissioner

001380



**DEPARTMENT OF THE ARMY**  
**OFFICE OF THE STAFF JUDGE ADVOCATE**  
**HEADQUARTERS, 101ST AIRBORNE DIVISION (AIR ASSAULT)**  
**OPERATION IRAQI FREEDOM, COB SPEICHER**  
**TIKRIT, IRAQ APO AE 09393**

AFZB-JA-C

5 January 2006

**MEMORANDUM OF OPINION**

**SUBJECT:** Claim of [REDACTED], 06-IA8-017

- 1. Identifying Data:** [REDACTED], POA [REDACTED]
- 2. Date and place the incident occurred giving rise to the claim:** The claim occurred on September 28, 2005 in Balad, Iraq.
- 3. Amount of claim and date it was filed:** Claimant filed a claim for \$2,500 on 7 Jan. 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 properly filed in a timely manner.
- 5. Facts:** The Claimant alleges that her father, [REDACTED] was driving his vehicle near an IA checkpoint. A CF convoy approached in the opposite direction. CF allegedly told the deceased to pull over and then shot the vehicle. The driver of the vehicle was allegedly killed causing the car to roll several times. A SIGACTS investigation revealed that a CF convoy had fired on a LN vehicle when it failed to get off the road for an approaching convoy. Instead of pulling over to the side of the road, the deceased turned his lights on high and continued down the road toward the convoy. One warning shot was fired which caused the vehicle to depart the roadway. No injuries were reported. Claimant is filing the claim for damage to his vehicle.
- 6. Opinion:** Under AR 27-20, paragraph 10-3, Claims arising "directly or indirectly" from combat activities of the U.S. Armed Forces are not payable. AR 27-20 defines combat activities as, "Activities resulting directly or indirectly from action by the enemy, or by the U.S. Armed Forces engaged in armed conflict, or in immediate preparation for impending armed conflict." Here, the Claimant's damage was proximately caused by anticipatory self defense by CF. Here, self defense and force protection constitutes combat activity because action was taken in immediate preparation for impending armed conflict.

001381

7. **Recommendation:** The claim is denied.

[REDACTED] [REDACTED]  
[REDACTED] FER

CPT, JA  
Claims Judge Advocate

COMBAT CLAIM  
- 016

### Claims Form

To: United States Army Foreign Claims Commission

From: Name: \_\_\_\_\_

POA/ATT: \_\_\_\_\_

† Power of Attorney provided and interpreter approved: \_\_\_\_\_

Decedents: \_\_\_\_\_

Hometown: \_\_\_\_\_

† Iraqi Resident:

My claim arose at: \_\_\_\_\_

(Town)

28 sept 05

(City)

(Country)

My claim arose on: \_\_\_\_\_

Month

Balance

Day

Year

Proof of Ownership: \_\_\_\_\_

Interpreter Approved:

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

COB - GSW

† Interpreter Approved: \_\_\_\_\_

Legal Expert Opinion: \_\_\_\_\_

† Interpreter Approved:

Witness Statement (Consistent?): \_\_\_\_\_

see # 016

† 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.)

Decedent killed by CF when CAR  
got too close to convoy

see claim # 016

Evidence: witness X 3, original Death Cert,

IP Report.

001383

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
Wrongful death	\$2,500

Total: \$2,500

I was insured to the following extent against the damage or injuries I have sustained:

W/D

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)  
\$ 2,500 local

(Signature of Claimant)

Subscribed before me this 2 day of JAN, 2006.

[Redacted Name]  
(Print Name)

[Redacted Signature]  
(Signature)