



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

14 January 2006

MEMORANDUM OF OPINION

SUBJECT: Claim of [REDACTED], 06-IA3-010

1. **Identifying Data:** [REDACTED] (POA Attorney [REDACTED])
2. **Date and place the incident occurred giving rise to the claim:** The claim occurred on 29 August 2005 at Al Boajed, Iraq.
3. **Amount of claim and date it was filed:** Claimant filed a claim for \$5,000 on 01 November 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 on 29 August 2005 his son went to the family farm to water the crops. The Claimant alleges that artillery rounds began to come in, and when the family departed their house, they claimant found his son deceased. SIGACTS review for this timeframe do not reveal any record of this incident occurring.
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." There is insufficient evidence to support this claim. If sufficient evidence did exist this claim is incident to combat activity.
7. **Recommendation:** The claim is denied.

[REDACTED]  
CPT, JA  
Chief of Claims

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DEPARTMENT OF THE ARMY  
HEADQUARTERS, 1<sup>ST</sup> BRIGADE, 3D INFANTRY DIVISION (FORWARD)  
TASK FORCE LIBERTY, OPERATION IRAQI FREEDOM  
FORWARD OPERATING BASE SPEICHER  
APO AE 09393

DHFT-JA

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 584-1084.

[Redacted Signature]

CPT, FCC  
Foreign Claims Commissioner

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# Claims Form

To: United States Army Foreign Claims Commission.

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

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

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

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

Hometown: Alboajed  Iraqi Resident: Y

My claim arose at: Alboajed  
(Town) (City) (Country)

My claim arose on: Aug 29 2005  
Month Day Year

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

Interpreter Approved: \_\_\_\_\_

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): 21 Yes

Interpreter Approved: Y

Legal Expert Opinion: for w/p Morg. (Autopsy Report)

Interpreter Approved: \_\_\_\_\_

Witness Statement (Consistent?): w<sup>1</sup> brother (saw explosion) w<sup>2</sup> neighbor (saw explosion)

Interpreter Approved: Y

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.)

- Wrongful death -  
Son of claimant went to farm @ 2100 to water farm. Artillery rounds came in family came from house found dead.

Evidence: DC / Autopsy / Witness Statement

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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.)

<u>Item</u>	<u>Amount</u>
Wrongful Death	

Total: \$5000

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

NA

The name and address of my insurer (if any) is:

(Name) NA (Address) \_\_\_\_\_

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

\$ 5000 local [REDACTED]

(Signature of Claimant)

Subscribed before me this 1 day of Nov, 2005.

(Print Name) [REDACTED]

(Signature) [REDACTED]

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