June 10, 2005

Claims Office

SUBJECT: Claim # 05-IJ8-T345

Dear [Name]

You have submitted a claim seeking compensation for damages allegedly caused by U.S. Forces. I have thoroughly reviewed your claim pursuant to the Foreign Claims Act (FCA), Title 10, United States Code §2734, Army Regulation 27-20, and Department of the Army Pamphlet 27-162 Claims Procedures.

Allow me to express my sympathy for your loss, however, in accordance with the cited references and after investigating your claim, I find that your claim is not compensable for the following reason: Could not confirm that US forces caused the death. Accordingly, your claim must be denied.

If you are dissatisfied by this action, you may request reconsideration of the decision in accordance with AR 27-20. Any such request must be based on new or additional evidence and should be forwarded to this office. While there is no prescribed format for such a request, it must describe the legal and/or factual basis for relief. Any request for reconsideration should be made in writing within 30 days of your receipt of this letter. Thank you for your kind attention.

Sincerely,

[Name]
Captain, U.S. Army
Foreign Claims Commission
To: United States Army Foreign Claims Commission
From: Name: [redacted]
Address: [redacted]

a. A citizen and national of: Iran
b. A permanent resident of: [redacted]
c. Employed by: [redacted]
d. Check one ( ) An insurer ( ) Not an insurer
e. Check one ( ) A subrogee ( ) Not a subrogee

I hereby make a claim against the United States Government for damages or injuries caused by: [Name, Organization, Military Department, Address, Telephone Number]

Multi-National Forces

The property damaged is owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence of authority and fill in the form below for party sustaining the damage or injuries.) [redacted]

My claim arose at: Abu Greenb Baghdad Iraq
(Town) (City) (Country)

My claim arose on: APR 22, 2005
(Month) (Day) (Year)

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.)

On 22nd of April 2005, my son [redacted] was driving his car (KIA-Minibus) at AbuCairoo Main Road a ESD Exploded. The M.N.F. opened fire. My son and his brother wounded and has been transferred to the Al-Koohlyia Hospital. My son [redacted] got shot in his head. He died after two days in the hospital. His brother (Leith) got shot in his leg. I demand for compensation with all due respect.
Describe nature and extent of property damage or personal injury sustained as a result as a result of the above incident.

Killing my son by the M.V. and wounded his brother (Leath)

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>1.</td>
<td>Blood Money for My Son's Death $9,000/00</td>
</tr>
<tr>
<td>2.</td>
<td></td>
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<td>3.</td>
<td></td>
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<td>4.</td>
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<td>5.</td>
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<td>6.</td>
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</tbody>
</table>

Total: $9,000/00

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)

$4,000/00  
local 6,000,000 50

(Signature of Claimant)

Subscribed before me this 26 day of May, 2005.

(Print Name)  
(Signature)