



**DEPARTMENT OF THE ARMY**  
HEADQUARTERS, 42d INFANTRY DIVISION (Mechanized)  
OPERATION IRAQI FREEDOM (FOB LIBERTY)  
APO AE 09308

DHFT-JA

6 June 2005

**MEMORANDUM OF OPINION**

**SUBJECT:** Claim of [REDACTED] 05-IA3-1213

1. **Identifying Data:** [REDACTED] Tikrit, Iraq
2. **Date and place the incident occurred giving rise to the claim:** The claim occurred on 18 April 2005, in Tikrit, Iraq.
3. **Amount of claim and date it was filed:** Claimant filed a claim for \$2,500 on 4 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 U.S. Forces shot and killed his son. Claimant's son was driving from Bayji to Tikrit, when he was shot by a U.S. Forces convoy driving in the other direction. He was shot in the abdomen and groin. A second convoy, following the first, stopped and administered first aid. Then an Iraqi ambulance took him to the hospital, where he died. The claimant provided two corroborating witness statements, medical records, a death certificate and a police report.
6. **Opinion:** There is sufficient evidence to indicate that U.S. Forces killed the claimant's son. However, those forces were involved in security operations at the time. Therefore, this case falls within the combat exception.
7. **Recommendation:** The claim is denied.

[REDACTED]  
CPT, JA  
Chief, Claims

001688

# Claims Form

To: United States Army Foreign Claims Commission.

From: Name: [REDACTED]

POA/ATT: [REDACTED]

Power of Attorney provided and interpreter approved: Verified by Mother

Decedents: [REDACTED]

Hometown: IRAQ Ramadi Iraqi Resident: \_\_\_\_\_

My claim arose at: Tikrit Tikrit Iraq  
(Town) (City) (Country)

My claim arose on: Apr 18 2005 (1630)  
Month Day Year

Proof of Ownership: Volkswagen Passat - 1988 - White

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

Death Certificates (Name, Cause of Death, Age, and Time of Death Consistent with Claimant allegations): Name - [REDACTED] - many Bullets to body, Died 19 April,

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

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

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

Witness Statement (Consistent?): 2 Consistent Statements

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.) CLAIMANTS SON

was driving from Baiji to Tikrit near Al Mamara Village American Convoy coming other direction shot at vehicle & killed him  
- Convoy on opposite side of highway. No other shooting or anything going on. Convoy did not stop

- Injured made statement to police before death stating shot in left side of abdomen by US Convoy, and in grain area. also states US forces gave him first aid & then Iraqi ambulance took him to hospital

Evidence: Statements & Statement by injured

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	2500

Total: 62500

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)

\$ 1500 local \_\_\_\_\_

[Redacted Signature]  
(Signature of Claimant)

Subscribed before me this 4 day of JUNE, 2005.

SGT [Redacted Name]  
(Print Name)

[Redacted Signature]  
(Signature)