Dear Sir or Ma’am:

This notice constitutes final administrative action on your claim against the United States.

Foreign Claims Commission (FCC) IO9 has investigated and considered the claim under the Foreign Claims Act (FCA), Title 10, United States Code, Section 2734, as implemented by Army Regulation (AR) 27-20, Chapter 10. The claim is cognizable solely under the FCA as it concerns an inhabitant of Iraq. The Federal Tort Claims Act, Title 28, United States Code, Section 2680(k), is not applicable as it excludes claims arising in foreign countries. Under the FCA, a claim for death or personal injury may be allowed whether or not the negligent act complained of was made within the scope of employment.

FCC IO9 has reviewed all of the evidence given and has investigated this claim to the best of its ability considering the information presented.

Unfortunately your claim has been denied. The FCA does not permit the payment of claims arising from the actions of service members unless such actions were either negligent or wrongful. However, in your claim you have been unable to substantiate that the US forces acted either negligently or wrongfully and accordingly your claim is denied.

If you are dissatisfied by this action, AR 27-20 provides that you may request that the decision be reconsidered. Any such request must be forwarded to this office for FCC consideration. There is no prescribed format for such a request. However, it should describe the legal and/or factual basis for relief. Any request for reconsideration must be made, in writing, within 30 days of receipt of this letter.

The FCC’s action on reconsideration is final and conclusive by law.

UNCLASSIFIED/official USE ONLY

[Signature]
Captain, U.S. Army
FCC IO9
FICI-JA

Claim of 06-IO9-T0002

ACTION

1. Facts: The claimant alleges that on 19 July 2005, her son was a driver that transports passengers between Baghdad and Jordan. Coalition troops appeared suddenly in front of his vehicle and shot two rounds at him, one in the left side and the other in the neck. He died due to the fatal shot in the neck. The amount requested for this claim is $7,000.

2. Opinion: The FCA permits compensation for damages caused by the negligent and wrongful acts of US forces. The claimant provided no evidence that the US committed a negligent or wrongful act.


4. Action: The claim is therefore denied.

CPT, U.S. Army
FCC IO9

UNCLASSIFIED/OFFICIAL USE ONLY
UNITED STATES ARMED FORCES CLAIMS FORM

I. TO: United States Army Foreign Claims Commission

II. FROM: Name (English): ____________________________________________

Name (Arabic): ____________________________________________

(a) Circle one: Claimant / Attorney / Authorized representative

Parent/ Brother/Sister/ Son/Daughter

[Attorney or representative MUST attach proof of authorization.] Other:

(b) IRAQI IDENTIFICATION NUMBER: ________________________________

(c) DETAINEE IDENTIFICATION NUMBER: ______________________________

III. ADDRESS of person filing claim:

(English): ____________________________________________

(Arabic): ____________________________________________

IV. HOME OR CELL PHONE NUMBER: _____________________________

(a) I, the above named claimant/attorney/representative, certify that I (or the person on whose behalf I am making this claim) am a resident of Iraq.

(b) I hereby make a claim against the UNITED STATES GOVERNMENT for damages or injuries caused by the following military unit:

(c) The property damaged is owned by: _____________________________

(d) The incident happened on ________________ at __________________

(Date) (city/town/neighborhood/highway name & number)

V. The facts of the incident are as follows: According to her speech, her son was driving a driver in one of the GHC's that transfer the passengers between Baghdad and Jordan and her son was shot dead by a Coalition troop appear suddenly in front of his car, they shoot him two rounds one in the left side the other in the neck and that Qusay bin was a fatal shoot, they transfer him to a U.S base and then to Al-Rutta Hospital to take his body. He was single and the main supporter to his mother and two single sisters.

[Use back of sheet if needed. Be sure to include any photographs, statements from witnesses, documents proving ownership of damaged or destroyed property, death certificates, medical bills and repair estimates.]
VI. The following is a detailed list of what was damaged or destroyed and the estimates for repair if damaged and replacement if destroyed:

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<tr>
<th>ITEM</th>
<th>PRICE</th>
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<td>Death of her Son</td>
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**TOTAL** $7,000

(a) I had insurance for the following:

(b) My insurer is:

VII. My total claim in U.S. Dollars against the United States Government is: $7,000

and in Iraqi Dinar is:

***CLAIM WILL NOT BE VALID IF US DOLLAR AMOUNT IS LEFT BLANK***

This is my total claim resulting from this incident. I understand that if I accept a settlement of this claim that I will not receive any other money for this incident. I also understand that if my claim is denied, I will have the opportunity to appeal the decision but will likely need to provide new evidence in order to have my claim approved.

(Signature of Claimant)

***CLAIM WILL NOT BE VALID IF SIGNATURE IS LEFT BLANK***

The claimant was assisted in completing this claim form by:

(Name)

(Contact Information: e-mail, address, DSN/DNVT, etc.)