

ACCIDENT CLAIMS FORM

0415A T040

NAME:

[REDACTED]

DATE OF ACCIDENT:

16-7-2003

PLACE OF ACCIDENT:

Amnoma village

YEAR, MAKE & MODEL OF CAR (IF APPLICABLE):

EXPLANATION OF HOW ACCIDENT OCCURRED:

This woman claims that his son ([REDACTED]) was a night guard in the A/m village, the accident happened at 3 o'clock at midnight, at that time a patrol of Marines passed, when they saw the guard they shot at him six bullets and injured him, He took him to [REDACTED] and just one bullet was removed and got taken him to Jax Alaskar hospital and removed the other five bullets, but the patient still is suffering from the injury and unable to work.

POLICE REPORT ATTACHED:

PHOTOS ATTACHED: NO

ESTIMATED COST OF (REPAIR) (MEDICAL EXPENSES):

COMMENTS & RECOMMENDATION OF GST PERSONNEL:

recommendation: pay

G D. [Signature]

COMPLETED FILE SHOULD BE SUBMITTED TO CPT TYSON AVERY, USMC 1ST MEF JAG, AT BABYLON PALACE COMPOUND