FCSC FORM 1-04 JANUARY 2005

U.S. DEPARTMENT OF JUSTICE FOREIGN CLAIMS SETTLEMENT COMMISSION

OMB Approval No. 1105-0062 Expiration Date: Jan. 31, 2008

| | STATEMENT OF CLAIM FORM | { (FOR FCSC USE ONLY) { CLAIM NO. ALB- | } } } |
|-------------------|---|---|--------------------------------|
| UNIT | FILING OF CLAIMS UNDER THE AGR TED STATES OF AMERICA AND THE G LE I OF THE INTERNATIONAL CLAIMS et seq.). | GOVERNMENT OF THE REI | PUBLIC OF ALBANIA AND |
| this S BEFO | E: To help the Foreign Claims Settlement Co TATEMENT OF CLAIM form CAREFULL ORE you start this form, PLEASE READ the s form if you need more space for your answer | Y AND COMPLETELY. Pleas Instructions that come with it. Y | se TYPE or PRINT clearly. |
| Fill o | ut this form and send it to the Commission at | your earliest convenience. Kee | p a copy for your files. |
| 1. | Name of Claimant: | | |
| 2. | Mailing Address: | | |
| Work F | Phone | | |
| Home I (For ad | Phone ditional claimants and other details, see Instru | actions.) | |
| 3. | Give the name, mailing address and phone | number of the lawyer (if any) re | presenting you in this claim. |
| 4. | Give the name, mailing address and phone | number of a person we can cont | act if we cannot locate you. |
| IMP | ORTANT: You must tell the Commission i | f you move. If your address cl | hanges and you do not tell the |

If claimant is an individual, state how you became a United States citizen: 5a.

Commission, you may lose your right to pursue your claim.

| By birth in the U.S.: Fill in date and place of birth |
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| By naturalization in the U.S.: Fill in date and place of naturalization |

| | Oth | er: Fill in wh | nen and ho | w you beca | ame a U.S | S. citizen (f | or exam | ple, by birth | abroad to | U.S. parents |
|--------------------|---------------------|---------------------------------|-----------------------|---------------------------|--------------------|------------------------------|-----------------------|----------------------------|----------------------------|----------------|
| | or by m | arriage) | | | | | | | | |
| taking, inherit | , explain ed or oth | how and wh | nen that in me the ow | dividual be ner of you | came a Ur interest | Inited State in this claim | es citizer m. Give | n, and expla the name a | in how and nd citizensh | ip of anyone |
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| 5c. | If you h | ave ever los | t your Uni | ted States o | itizenship | o, explain v | when and | d why. | | |
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| 6. | If claim state: | ant is a corp | oration or | other legal | entity (su | ich as a pai | rtnership | or other fo | rm of group | o ownership), |
| | Date and | d place of in | corporatio | n or format | ion | | | | | |
| | When th | na claim arac | se what ne | proentage o | f ownersh | in was hale | d by nati | irol narconc | who were l | U.S. citizens? |
| | WHEH ti | ic ciaiiii aios | se, what pe | Acciliage of | OWNEISH | np was ner | и бу пац | irai persons | who were | J.S. CIUZCIIS! |
| | | • | | | | | ned 50% | or more of | the claiman | at any time |
| (See pa | | the date the the Instruction | | _ | * | | | | | |
| | * | * | * | * | * | * | * | * | * | * |
| | | | S | UMMARY | Y OF LO | SSES CLA | AIMED | | | |
| 7. | Mark ea | ach kind of lo | oss you ar | e claiming. | | | | | | |
| | a. Land | | | b. Bui | ldings [| | | c. Individu | al Personal | Property |
| | (See Qu | estion 9 belo | ow.) | (See C | uestion 9 | below.) | | (See Quest | ion 10 belov | w.) |
| | | ership Intere estion 11 be | | ness [| | Debt Interese ee Question | | ow.) | | |
| | f. Other (Descri | | | | | | | | | |

| State the total estimated value of your losses at the time of taking in United States Dollars: \$ |
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| State the total estimated value of your losses at the time of taking in Albanian lek or other currency: |
| LAND AND BUILDINGS If you are claiming for loss of land or buildings, describe the property taken. State the land area in acres or hectares, and describe any buildings or other improvements. |
| State the exact location of the property (street, number, town, district, etc.). |
| Was the property subject to a mortgage or other encumbrance? If so, in what amount? When was the property taken? |
| Describe how the property was taken, including the law or decree, if you know. |
| State the name and nationality (citizenship) of the owner of the property at the time it was taken. |
| State how the owner acquired the property. |
| Explain how you acquired the right to claim for the loss. |
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| 9i. | State the name, address and nationality (citizenship) of anyone other than you who may have an interest in this claim. |
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| 9j. | State the value of the property at the time it was taken and explain how you determined that value. |
| 9k. | Provide any other information which may help the Commission decide this claim. |
| SAM | YOUR CLAIM IS FOR MORE THAN ONE PIECE OF LAND OR ONE BUILDING, PROVIDE THE IE INFORMATION FOR EACH ON A SEPARATE SHEET OF PAPER. ANSWER QUESTIONS 9a COUGH 9k for each.) |
| 10. | Individual Personal Property Losses If you are claiming for personal property losses, make a list of all items of personal property lost. Explain when and how the property was taken, who took the property, where the property was located when it was taken, the value of each item when acquired, the date each item was acquired, and the value of each item on the date of loss. Describe the condition of each item on the date of loss. |
| 11a. | BUSINESS INTERESTS, DEBTS AND OTHER LOSSES If you are claiming for loss of an ownership interest in a partnership, corporation or other group form of ownership, explain how the ownership interest was taken. Also provide: (1) the name of the company or group; (2) the percentage of your ownership interest in that company or group; (3) a description of the assets taken; (4) the date of loss; and (5) the value of the assets taken at the time of loss. |

| 11b. | If you are claiming for a debt, describe the nature of the debt (e.g., mortgage, securities, etc.). State how and when the debt obligation was taken, and give the value of the obligation on the date of loss. |
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| 11c. | If you are claiming for the loss of any other kind of property interest, describe that property interest, state |
| | how and when that interest was taken, and give the value of the interest on the date it was taken. |
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| 12. | Provide any other information which may help the Commission decide this claim. |
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| 13. | Is information or evidence about any part of this claim available at another United States Government |
| | agency? If the answer is Yes, give the name and address of the agency. |
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| 15. Does your claim include any property which was the subject | ` |
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| If the amovem is Vos sive the claim manh an W | |
| State the amount awarded, if any. | |
| 16. RELEASE: The information provided in this Statement of and information submitted before or after this Statement of will be treated as public information which may be disclosed about the claims program and individual claims filed in the of Claim, you acknowledge that you are aware and agree the authorize the Commission and its staff to conduct any invest the exchange of information concerning the claim with the Commission and its staff to conduct any invest the exchange of information concerning the claim with the Commission. | Claim in regard to or in support of the claim, d to interested persons who make inquiries program. By your signature on this Statement at such disclosures will be made, and you tigation needed to decide your claim, including |
| 17. CERTIFICATION | |
| I, | , certify that |
| (Type or print your nam | e) |
| I am the claimant | |
| I am authorized to make this certification on behalf of the | he claimant. |
| (State your relationship to claimant: |) |
| I further certify that, to the best of my knowledge and beli Claim, including any papers attached to or filed with the Sta all material facts have been set forth in this Statement of Cla | atement of Claim, are true and accurate, and that |
| Date Signate | ure |
| PENALTIES | |

Your attention is directed to the federal law on false statements, 18 U.S.C. section 1001, which provides:

[W] hoever, in any matter within the jurisdiction of the executive, legislative, or judicial branch of the Government of the United States, knowingly and willfully-

- (1) falsifies, conceals or covers up by any trick, scheme, or device a material fact;
- (2) makes any false, fictitious, or fraudulent statement or representation; or
- (3) makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry;

shall be fined under [Title 18, U.S. Code] or imprisoned not more than 5 years, or both.

MAIL THIS FORM TO: FOREIGN CLAIMS SETTLEMENT COMMISSION 441 G STREET, N.W., 6th FLOOR WASHINGTON, DC 20579

BE SURE TO ATTACH DOCUMENTS TO HELP PROVE YOUR CLAIM.

NOTE: Each document in a foreign language must be accompanied by a verified English translation-- i.e., a translation prepared by a person who verifies in writing that he or she is proficient both in the foreign language and in English, and that the translation is accurate and correct.