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FLORIDA COMMISSION ON HUMAN RELATIONS
John Knox Road, Suite 240, Build 3
Tallahassee, Florida 32303-4149

001217

CHARGE OF DISCRIMINATION		FCHR No. <u>98-3266</u>	
Name (Indicate Mr., Ms., or Mrs.) <u>MS. FELICIA A. ALEXANDER</u>		Social Security Number <u>267 59 6451</u>	Date of Birth <u>27 MAY 68</u>
Street Address <u>P.O. BOX 549</u>		Home Telephone Number (area code) <u>(407) 323 5720</u>	
City, State, and Zip Code <u>SANFORD, FLORIDA 32772</u>		Work (if possible to call you there) <u>NA</u>	
List the employer, labor organization, employment agency, apprenticeship committee, government agency, or other person who discriminated against you.			
Name <u>DYNAIR</u>	No. of Employees <u>15+</u>	Telephone No. (area code) <u>(407) 322 3693</u>	
Street Address <u>2747 CARRIER AVENUE</u>	City, State, and Zip Code	County <u>SEMINOLE</u>	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box (es)) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> AGE <input type="checkbox"/> MARITAL STATUS <input type="checkbox"/> RETALIATION		DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year)	
THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s): <u>See attached sheet A.</u>			
<p>RECEIVED FLORIDA COMMISSION ON HUMAN RELATIONS 98 SEP 18 PM 12:17</p>			
I REQUEST TO BE AFFORDED FULL RELIEF TO WHICH I AM ENTITLED TO UNDER THE LAW(S).			
I will advise the agency if I change my address or telephone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY- (Required for Filing) SUBSCRIBED AND SWORN TO BEFORE ME	
SIGNATURE OF COMPLAINANT <u>[Signature]</u>		<u>Felicia Alexander</u>	
DATE <u>9/15/98</u>		<u>15th OF September, 19 98</u>	


"OFFICIAL SEAL"
INEZ FISHER
 My Commission Expires 04/28/99
 Commission # CC 112222

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SHEET A

00-1217

I. PERSONAL HARM:

EXTREME EMBARRASSMENT, ANXIETY, AND GRIEF. THE SUPERVISORS THAT SCOURNED ME DID SHOW ACTS OF PREJUDICE AND DISLIKE TOWARDS ME. I WAS REPRIMANDED IN THE PUBLIC BEFORE A GREAT NUMBER OF MY CO WORKERS. THEIR ACTIONS ALSO DESTROYED MY MENTALITY, AFFECTED MY REPUTATION. IT WAS AS THOUGH I HAD BEEN TRIED, GUILTY, AND MOST DEFINATELY SENTENCED; THE WAY I WAS TOLD TO GO CLEAN OUT MY LOCKER, TURN IN MY BADGE, MY ACCESS SECURITY KEY, AND WAIT TO BE ESCORTED OUT.

II. RESPONDENTS REASON FOR PERSONAL HARM:

FELICIA, WE HAVE TO DO SOMETHING ABOUT THE SITUATION NOW, YOU WERE THE ONLY ONE TO LEAVE THE PREMISES, THE GARBAGE BAGS WERE NOT TRANSPARENT. "YOU HAVE TO HAVE TAKEN IT"; REFERRING TO THE STOLEN PURSE.

III. DISCRIMINATION STATEMENT:

- A. I WAS SINGLED OUT AS A THIEF OF A STOLEN PURSE WHEN THERE WERE APPROXIMATELY 50 OTHER EMPLOYEES HOUSING THE SAME AREA, WITH THE MAJORITY BEING WHITE AND SPANISH.
- B. I WAS NOT ALLOWED TO COME INTO WORK FOR MORE HOURS WHEN I ASKED CARMEN ALECEA, YET AT THE SAME INSTANT A SPANISH EMPLOYEE WAS GRANTED 2 DAYS EXTRA. THIS ACTION TOOK PLACE IN THE PRESENCE OF MYSELF, FELICIA ALEXANDER.
- C. BY CARMEN, I WAS TOLD TO CHANGE THE SIZE OF MY EARRINGS, WHEN A SPANISH EMPLOYEE WAS COMMENDED ON THE ONES SHE WORE THAT WAS TWICE THE SIZE OF THE ONES I WORE. THIS ACTION ALSO TOOK PLACE IN MY PRESENCE.
- D. AT THE CHRISTMAS PARTY, THE STATEMENT OF CARMEN WAS, "I DON'T WANT ANY AFRICAN AMERICANS TOUCHING THE FOOD" MADE ME FEEL THAT MY SOCIAL ABILITY WAS INACTIVE AND RESTRICTED, BECAUSE I AM, AN AFRICAN AMERICAN. THIS STATEMENT WAS ANNOUNCED IN MY PRESENCE, ALONG WITH A NUMBER OF MY FELLOW CO WORKERS.

THE SLANDER THAT OCCURED FROM JOE MASSARO, AND CARMEN ALECEA DEVoured MY CREDIBILITY AND INTEGRITY. I FEEL IT WAS A DEFAMATION OF MY CHRACTER. THIS DISCRIMINATORY TREATMENT IS A VIOLATION OF THE FLORIDA CIVIL RIGHTS ACT AS STATED IN CHAPTER 760, FLORIDA STATUTES.