

FLO... COMMISSION ON HUMAN R...IONS

525 John Knox Road, Suite 240, Building F

Tallahassee, Florida 32303-4149

FILED 02-582

CHARGE OF DISCRIMINATION

FCHR No. 98-2192 Amended

Name (Indicate Mr., Ms., or Mrs.)
James Powell Jr.

Soc. Sec. Number
267-08-8638

Date of Birth
03/14/52

Street Address
11929 U.S. One North

Home Telephone Number (area code)
904-768-2660

City, State, and Zip Code
Jacksonville, Fl. 32219

Work (if possible to call you there)

List the employer, labor organization, employment agency, apprenticeship committee, government agency, or other person who discriminated against you.

Name
CSX Railroad

No. of Employees
15+

Telephone No. (area code)
904-381-2677

Street Address
500 Waters St.

City, State, and Zip Code
Jacksonville, Fl. 32202

County
Duval

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box (es))
 RACE COLOR SEX RELIGION DISABILITY
 NATIONAL ORIGIN AGE MARITAL STATUS RETALIATION

DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE
(month, day, year) 7/1/97

THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s):

PERSONAL HARM:

I worked for respondent as a laborer, since 12-27-72, until I had to take a leave of absence July 1, 1997, due to a medical impairment. My supervisor constantly harassed and mistreated me on the job, which lead to my condition.

RESPONDENT'S REASON FOR PERSONAL HARM:

The supervisor said that he was the boss and CSX was his railroad. I was not given a reason for the action which was taken against me.

DISCRIMINATION STATEMENT:

I believe I have been discriminated against because of my race, in violation of the Florida Civil Rights Act of 1992 and Title VII of the U.S. Civil Rights Act of 1964 as amended for the following reason(s).
 The supervisor treated me differently than the white coworkers and was constantly harassing me. He was at all times, shouting, reprimanding and or intimidating me by saying the place of work (shop) and the railroad was his, making me fearful for my job security.

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.

SIGNATURE OF COMPLAINANT

DATE 10/12/98

NOTARY- (Required for Filing)
 SUBSCRIBED AND SWORN TO BEFORE ME
 GWENDOLYN M ERVIN
 NOTARY PUBLIC STATE OF FLORIDA
 COMMISSION NO. CC719432
 MY COMMISSION EXP. FEB. 23, 2002

Gwendolyn M. Ervin
 12th OF October 19 98

James Powell Jr