FLORI COMMISSION ON HUMAN REL ONS
325 John Knox Road, Suite 240, Building F
Tallahassee, Florida 32303-4149

02-2787

AMENDED CHARGE OF DISCRIMINATION	FCHR No. 9903025 J. Moran
Name (Indicate Mr., Ms., or Mrs.) Oscar Jones 99 AUG 18 1:59	Social Security No. 262-25-8821 / 16
	Date of Birth 6/21/56
Street Address 1817 E. 27th Street	Home Telephone Number (area code) 904/858-4386
City, State, and Zip Code Jacksonville, FL 32206	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	No. of Employees	Telephone No. (area code)
Coastal Maritime Services	15+	904/727-7007
Street Address 9550 Regency Square Blvd., Suite 1107	City, State, and Zip Code Jacksonville, FL 32225	County Duval

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

DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE
(month, day, year) 9/2/98

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

I. Personal Harm:

On September 2, 1998, I was informed by a letter that I would not be re-hired into my position as Longshoreman.

II. Respondent's Reasons for Personal Harm:

I was told that I tested positive for drugs and their policy states that I should be fired with no medical or monetary benefits.

III. Discrimination Statement:

I believe I have been discriminated against because of my Race - Black, which is in violation of Chapter 760 of the Florida Civil Rights Act as amended for the following reasons:

1. During my employment, I was the oldest employee in my job position. All older White males around my age were in management positions. White males continued to be promoted, while I was denied promotion opportunities.

2. After an accident on the job involving myself and 3 other White employees, I was made to take a drug test. This was not policy, but management hand-wrote "drug test required" in the manual. I was told the test came back positive. The other 3 employees, Kevin Geiger, Vic Rogers and Scott Boatwright, were not tested or disciplined. There were 2 other White employees who were arrested for smoking and possessing drugs, but were allowed to return to work and were never required to take a drug test.

3. I was terminated on this day, May 28, 1998, until I could see a specialist for my injury. After seeing the specialist, and after it was determined that I was fit to return to work, I re-applied on August 27, 1998, but learned a few days later on September 2, 1998, that my application was denied.

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.

Under penalties of perjury, I declare that I have read the foregoing charge of discrimination and that the facts stated in it are true.

SIGNATURE OF COMPLAINANT

Oscar L. Jones

DATE

8-17-99