

00-2850
FLORIDA COMMISSION ON HUMAN RELATIONS

3
 John Knox Road, Suite 240, Building
 Tallahassee, Florida 32303-4149

CHARGE OF DISCRIMINATION

FCHR No. 99V1875 Amended

Name (Indicate Mr., Ms., or Mrs.)
 Chester R. Cooper

Social Security Number Date of Birth
 420-78-5861 12-22-54

Street Address
 316 Seattle Slew Court

Home Telephone Number (area code)
 850-689-6647

City, State, and Zip Code
 Crestview, Florida 32539

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
 Gulf Coast Treatment Center

No. of Employees
 15+

Telephone No. (area code)
 850-863-4171

Street Address
 1015 Mar Walt Drive

City, State, and Zip Code
 Ft. Walton Beach, Florida 32547

County
 Okaloosa

RECEIVED
 FLORIDA COMMISSION ON
 HUMAN RELATIONS
 00 FEB 28 04 2:28

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) 11-06-98

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

I. PERSONAL HARM:

I was discharged from my position.

II. RESPONDENT'S REASON FOR PERSONAL HARM:

No reason was given for the harm.

III. DISCRIMINATION STATEMENT:

I believe I have been discriminated against because of my Race and Color which is in violation of Chapter 760 of the Florida Civil Rights Act, and Title VII of the Federal Civil Rights Act for the following reason;

I was discharged from my position for allegedly handcuffing two minors together. A white coworker under similar circumstances and was the individual that actually committed the offense the night before, was not reprimanded, suspended or discharged.

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

DATE

Chester R. Cooper

22 Feb 00