

FLC DA COMMISSION ON HUMAN RIGHTS
 325 John Knox Road, Suite 240, Building F
 Tallahassee, Florida 32303-4149

Division of Administrative Hearings

CHARGE OF DISCRIMINATION		FCHR No. 2100765 DH	
Name (Indicate Mr., Ms., or Mrs.) Jan Hall Szugye		01 FEB Social Security Number 242-86 4312	Date of Birth 12-11-51
Street Address 3400 Jenkins Road, Apt. 731		Home Telephone Number (area code) 423-893-3209	
City, State, and Zip Code Chattanooga, Tn 37421		Work (if possible to call you there) (423) 888 757-6225	
List the employer, labor organization, employment agency, apprenticeship committee, government agency, or other person who discriminated against you.			
Name Miami Herald - Knight Rider Publishing Company	No. of Employees 15+ 23 yrs.	Telephone No. (area code) 305-350-2112	
Street Address One Herald Plaza	City, State, and Zip Code Miami, Florida 33132	County Dade	
CAUSE OF DISCRIMINATION BASED ON [Check appropriate box (es)] <input 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 checked="" type="checkbox"/> AGE <input type="checkbox"/> MARITAL STATUS <input type="checkbox"/> RETALIATION		Date Most Recent Or Continuing Discrimination Took Place (month, day, year) 12/27/99	

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

I. **PERSONAL HARM:**

On December 27, 1999 I was discharged from my employment after 23 years.

II. **RESPONDENT'S REASON FOR PERSONAL HARM:**

Reason offered for my discharge was pretextual.

III. **DISCRIMINATION STATEMENT:**

I believe I have been discriminated against because of my age 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;

1. Everything was fine until a new manager Matthew Fine (under forty) was assigned to head up my department.
2. I was replaced by an outside sales representative under the age of forty.

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

Jan Hall Szugye

1/30/01