

02-1907

Date Stamp (FCHR Use Only)

FLORIDA COMMISSION ON HUMAN RELATIONS  
325 John Knox Road, Suite 240, Building F  
Tallahassee, Florida 32303-4149

02 MAY -9 AM 9:02

31 DEC 12 PM 12:13

AMENDED CHARGE OF DISCRIMINATION

FCHR No. 2200114 NW

Name (Indicate Mr. Ms. or Mrs.)  
Mr. Norris L. Fails

Social Security # Date of Birth

Street Address  
604 Brooke Ct.

Home Telephone Number (area code)  
352/243-6651

City, State, and Zip Code  
Clermont, Florida 34711

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	Number of Employees	Telephone Number
Clermont Police Dept.	15+	
Street Address	City, State and Zip Code	County
865 West Montrose Street	Clermont, Florida 34711	Lake

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) 12/15/00

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

I. Personal Harm:

I was terminated from my position of Police Officer on December 15, 2000. I had been employed for 7 1/2 years with Respondent. I was also subjected to different terms and conditions than my white co-workers.

II. Respondent's Reason for Personal Harm

I was terminated for talking inside a car with a childhood friend who had a warrant out for his arrest that I didn't know about.

III. Discrimination Statement:

I believe I have been discriminated against because of my race, black which is in violation of Florida Civil Rights Act of 1992, as amended; and Chapter 760 of the Florida Statutes for the following reasons:

1. I have witnessed white officers socializing with convicted felons that they were aware of and no disciplinary action was taken.
2. I was doing my duties no different than my white counterparts but I received low evaluations when they didn't.
3. I was disciplined for putting the wrong date on my Army Reserve Leave form when I had proof I was at drill the entire weekend.

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

*Handwritten signature of Norris L. Fails*

12-07-01