



199913 TBD.C
'CHARGES OF DISCRIMINATION'

Unofficial Reporter

3/22/1999 - 3/28/1999

{MOST RECENT UPDATE: 1/3/2023}

E: TextBookDiscrimination@gmail.com

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199913 TBD.C 001
'CHARGES OF DISCRIMINATION'

CAPTION: *Royster v. Pen Air Federal Credit Union*

CITATION: 199913 TBD.C 001

DATE: 3/22/1999

STATE: FL

CASE NO: 99T877 (FCHR)

02-001975 (DOAH)

CASE TYPE: Employment Discrimination

| age | col | dis | fam | mar | nat | rac | rel | ret | sex | unk |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
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CHARGE OF DISCRIMINATION

02-1975

CHARGE NUMBER

99-7877

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FEPA
 EEOC

FLORIDA COMMISSION ON HUMAN RIGHTS and EEOC
Division of Administrative Hearings
State or local Agency, if any

FILED

NAME (Indicate Mr., Ms., Mrs.) Mr. Daryl A. Royster
CITY, STATE AND ZIP CODE Pensacola, FL 32505
TELEPHONE (Include Area Code) (850) 469-9910

STREET ADDRESS 4406 Chantilly Way, Pensacola, FL 32505
DATE OF BIRTH 11/30/1967

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

NAME Pen Air Federal Credit Union
NUMBER OF EMPLOYEES, MEMBERS Cat A (15-100)
TELEPHONE (Include Area Code) (850) 453-4341

STREET ADDRESS 21 Cunningham St. N.A.S., Pensacola, FL 32508
COUNTY 3 033

NAME
TELEPHONE NUMBER (Include Area Code)

STREET ADDRESS
CITY, STATE AND ZIP CODE
COUNTY

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))
 RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY OTHER (Specify)
DATE DISCRIMINATION TOOK PLACE
EARLIEST 01/24/1999 LATEST 02/08/1999
 CONTINUING ACTION

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

I. PERSONAL HARM:

Beginning on January 29, 1999 and continuing until February 8, 1999, I was denied a reasonable accommodation and harassed in my position as Maintenance Tech. My terms and conditions of employment were different than other employees. Everyone received a new telephone with voice mail except me. I was not given a personal code number to check my messages on the computer. I was terminated on February 8, 1999.

II. RESPONDENT'S REASON FOR ADVERSE ACTION:

Penny Moody, Assistant Vice President, told me I should resign. I told her no, she would have to fire me and she did.

III. DISCRIMINATION STATEMENT:

I believe I was discriminated against because of my religion, Holiness, in violation of Title VII of the Civil Rights Act of 1964, as amended, and retaliated against for not working on weekends.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the foregoing is true and correct.

Date 03/22/99
Charging Party (Signature) Daryl A. Royster

NOTARY - (When necessary for State and Local Requirements)

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Day, month, and year) 3/22/99

Janet P. McDonald

Daryl A. Royster



Janet P. McDonald
Florida Notary No CC569057
Commission Expires 7/11/2000

199913 TBD.C 002
'CHARGES OF DISCRIMINATION'

CAPTION: *Pedraza v. Lockheed Martin*

CITATION: 199913 TBD.C 002

DATE: 3/25/1999

STATE: FL

CASE NO: 1999-0849 (FCHR)
02-000237 (DOAH)

CASE TYPE: Employment Discrimination

| age | col | dis | fam | mar | nat | rac | rel | ret | sex | unk |
|-----|-----|-------------------------------------|-----|-----|-------------------------------------|-----|-----|-------------------------------------|-----|-----|
| | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | |

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CHARGE OF DISCRIMINATION

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| | |
|------------------------------------------|---------------|
| AGENCY | CHARGE NUMBER |
| <input type="checkbox"/> EPA | |
| <input checked="" type="checkbox"/> EEOC | |

Florida Comm. on Human Relations and EEOC
State or local Agency, if any

| | |
|--------------------------------|-----------------------------------------------|
| NAME (Indicate Mr., Ms., Mrs.) | HOME TELEPHONE (Include Area Code) |
| Mr. Manuel Pedraza | (407) 264-6000 ²⁶⁴⁻⁵⁴⁰⁷ |
| STREET ADDRESS | CITY, STATE AND ZIP CODE |
| 7504 GOREN BLVD. #1022 | FT. LAUDERDALE, FL 33322 |
| STREET ADDRESS | CITY, STATE AND ZIP CODE |
| 400 Julia Street | Titusville, FL 32796 |

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

| | | |
|--------------------------|------------------------------|-------------------------------|
| NAME | NUMBER OF EMPLOYEES, MEMBERS | TELEPHONE (Include Area Code) |
| United Space Alliance | Cat B (101-200) | (407) 861-5764 |
| STREET ADDRESS | CITY, STATE AND ZIP CODE | COUNTY |
| 8550 Astronaut Boulevard | Cape Canaveral, FL 32920 | 009 |

| | |
|----------------|--------------------------------------|
| NAME | TELEPHONE NUMBER (Include Area Code) |
| | |
| STREET ADDRESS | CITY, STATE AND ZIP CODE |
| | |
| | COUNTY |
| | |

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es)) | DATE DISCRIMINATION TOOK PLACE |
| <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify) | EARLIEST LATEST 03/15/1998 04/07/1998 <input checked="" type="checkbox"/> CONTINUING ACTION |

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

1. I am an Hispanic male. I was terminated on ^{March 26,} April 7, 1998, because of my disabilities, age and national origin.

2. During my employment, I was told by my manager, Kendrick Black, that I needed to retire because of my age and disabilities. He made these remarks in front of a supervisor. Cindy Ward, lead on second shift, harassed me by mocking my accent over the telephone.

I believe the Respondent also terminated my employment because I complained about discrimination at the Respondent's facility.

3. The Respondent discriminated against me in violation of Title VII of the 1964 Civil Rights Act, the Age Discrimination in Employment Act, and Title I of the Americans with Disabilities Act.

FILED
 JAN 14 AM '99
 DIVISION OF
 ADMINISTRATIVE
 HEARINGS

OFFICIAL NOTARY SEAL
 MIRIAM BAZ
 NOTARY PUBLIC STATE OF FLORIDA
 COMMISSION NO. CC66612
 EXPIRES 03/31/2001

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures. | NOTARY - (When necessary for signature) <u>Maria J. B. 1/25/99</u> |
| I declare under penalty of perjury that the foregoing is true and correct. | I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. |
| 3/25/99 <u>Manuel Pedraza</u> <small>(Complaining Party Signature)</small> | SIGNATURE OF COMPLAINANT <u>Manuel Pedraza</u> SUBSCRIBED AND SHOWN TO BEFORE ME THIS DATE <small>(Day, month, and year)</small> 25th of March 1999 |

199913 TBD.C 003
'CHARGES OF DISCRIMINATION'

CAPTION: *Pedraza v. International Brotherhood*

CITATION: 199913 TBD.C 003

DATE: 3/25/1999

STATE: FL

CASE NO: 99-1636 (FCHR)

02-000238 (DOAH)

CASE TYPE: Employment Discrimination

| age | col | dis | fam | mar | nat | rac | rel | ret | sex | unk |
|-----|-----|-------------------------------------|-----|-----|-------------------------------------|-----|-----|-------------------------------------|-----|-----|
| | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | |

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02-237

CHARGE OF DISCRIMINATION

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AGENCY
 EPA
 EEOC

CHARGE NUMBER

Florida Comm. on Human Relations and EEOC
State or local Agency, if any

NAME (Indicate Mr., Ms., Mrs.)
Mr. Manuel Pedraza

HOME TELEPHONE (Include Area Code)
(407) 264-6000

STREET ADDRESS
7504 GOREN BLVD. OF 12228, FL 32752

CITY, STATE AND ZIP CODE
TIBUSVILLE, FL 32796

DATE OF BIRTH
03/15/1940

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

NAME
United Space Alliance

NUMBER OF EMPLOYEES, MEMBERS
Cat B (101-200)

TELEPHONE (Include Area Code)
(407) 861-5764

STREET ADDRESS
8550 Astronaut Boulevard, Cape Canaveral, FL 32920-4304

CITY, STATE AND ZIP CODE

COUNTY
009

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

DATE DISCRIMINATION TOOK PLACE
EARLIEST LATEST
03/15/1998 04/07/1998

CONTINUING ACTION

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

1. I am an Hispanic male. I was terminated on ^{March 26,} April 7, 1998, because of my disabilities, age and national origin.
2. During my employment, I was told by my manager, Kendrick Black, that I needed to retire because of my age and disabilities. He made these remarks in front of a supervisor. Cindy Ward, lead on second shift, harassed me by mocking my accent over the telephone.
3. The Respondent discriminated against me in violation of Title VII of the 1964 Civil Rights Act, the Age Discrimination in Employment Act, and Title I of the Americans with Disabilities Act.

FILED
JAN 14 AM '99
DIVISION OF ADMINISTRATIVE HEARINGS

OFFICIAL NOTARY SEAL
MIRIAM BAZ
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC66612
EXPIRES 03/13/2001

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.

NOTARY - (When necessary for signature)
M. B. BAZ
I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

I declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF COMPLAINANT

3/25/99
Manuel Pedraza (Complaining Party Signature)

SUBSCRIBED AND SHOWN TO BEFORE ME THIS DATE
(Day, month, and year)
25th of March 1999

APPENDIX

