



200015 TBD.C
'CHARGES OF DISCRIMINATION'

Unofficial Reporter

4/3/2000 - 4/9/2000

{MOST RECENT UPDATE: 1/3/2023}

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200015 TBD.C 001
'CHARGES OF DISCRIMINATION'

CAPTION: *Kreicher v. Sunshine Media*

CITATION: 200015 TBD.C 001

DATE: 4/2/2000

STATE: FL

CASE NO: 20-01839 (FCHR)
02-003357 (DOAH)

CASE TYPE: Employment Discrimination

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

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PAGES: 1



FLOPIDA COMMISSION ON HUMAN RIGHTS

02-3357

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

AMENDED

CHARGE OF DISCRIMINATION		FCHR No. 2001839	
Name (Indicate Mr., Ms., or Mrs.) Sue Kreicher		Social Security Number	Date of Birth
Street Address 274 Fort Royal		Home Telephone Number (area code) (813) 641-3290	
City, State, and Zip Code Apollo Beach, Florida 33572		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 Sunshine Media	No. of Employees 15+	Telephone No. (area code) (602) 277-3372	
Street Address 1540 E Maryland Avenue	City, State, and Zip Code Phoenix, AZ 85014	County	
CAUSE OF DISCRIMINATION BASED ON [Check appropriate box (es)] <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> AGE <input type="checkbox"/> MARITAL STATUS <input type="checkbox"/> RETALIATION		DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year) 4/27/99	
THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s):			
<p>I. Personal Harm: I was terminated from my position as Zone Manager/State Sales Director (Florida) on April 24, 1999. I was subjected to sexist remarks during my employment and held to different terms and conditions than other employees.</p> <p>II. Respondent's Reason for Personal Harm: No reason was given.</p> <p>III. Discrimination Statement: I believe I was discriminated against because of my <i>sex -female</i> which is a violation of the Florida Statute 760.10, and Title VII of the Federal Civil Rights Act of 1992, as amended for the following reason(s):</p> <ol style="list-style-type: none"> 1. I was discharged and replaced by a male employee who consistently produced less. 2. I was subjected to sexist, chauvinistic comments, which included, "Well, it's really up to the husband to provide for the home." 3. I was sent to develop a territory with no expense account. All of the male managers had an expense account. 4. I was the only female employee serving as a state sales director until my termination. 			
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	
<i>Sue Kreicher</i>		4/27/99	

200015 TBD.C 002
'CHARGES OF DISCRIMINATION'

CAPTION: *Carter v. Radisson Hotels*

CITATION: 200015 TBD.C 002

DATE: 4/7/2000

STATE: FL

CASE NO: 20-01694 (FCHR)
00-004872 (DOAH)

CASE TYPE: Public Accommodations Discrimination

age	col	dis	fam	mar	nat	rac	rel	ret	sex	unk
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 325 John Knox Road, Suite 240, Building F
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00-4877
 28-01699

RECEIVED
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 HUMAN RELATIONS

PUBLIC ACCOMMODATION CHARGE OF DISCRIMINATION		FCHR No.	
Name (Indicate Mr., Ms., or Mrs.) Mrs. Cessley Y Carter		Social Security Number 404-17-8064	Date of Birth 4/17/45
Street Address 34 Break Alley		Home Telephone Number (area code) N/A	
City, State, and Zip Code Henderson Ky, 42420		Work (if possible to call you there) 826-0647	

List the public lodging and/or public food service facility which discriminated against you.

Name Radisson Hotel Daytona	Telephone No. (area code) (404) 234-9500
Street Address 140 North Atlantic Avenue	City, State, and Zip Code Daytona Beach Florida - 32118

CAUSE OF DISCRIMINATION BASED ON [Check appropriate box (es)]	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year)
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> CREED <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN	4/17/99

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

I. PERSONAL HARM: While on vacation in Daytona Beach Florida during Black College Reunion I believe that we were discriminated against by the Radisson Hotel due to the following reasons: First of all, my friends and I were made to wear a bright neon bracelet for wearing the bracelets were to keep a lot of people out that did not make rooms at the Radisson and to cut down on partying at the rooms.

II. RESPONDENT'S REASON FOR PERSONAL HARM: The reasons that we were given against due to race because there were caucasian people upon our arrival who we did not see with these bracelets on. We also believe that we paid an enormous amount of money for a room in which we could not have guests unless a bracelet was visible.

III. DISCRIMINATION STATEMENT:

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: Cessley Carter
 DATE: 4/5/2000

Cessley Carter
 Cessley Carter

My Commission expires 4-8-01
 KENNETH HARRISON, Acting

200015 TBD.C 003
'CHARGES OF DISCRIMINATION'

CAPTION: *Pruitt v. Radisson Hotels*

CITATION: 200015 TBD.C 003

DATE: 4/7/2000

STATE: FL

CASE NO: 20-01690 (FCHR)

00-004874 (DOAH)

CASE TYPE: Public Accommodations Discrimination

age	col	dis	fam	mar	nat	rac	rel	ret	sex	unk
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00 APR - 7 PM 4:15
 20-01890

PUBLIC ACCOMMODATION CHARGE OF DISCRIMINATION		FCHR No. 20-01890	
Name (Indicate Mr., Ms., or Mrs.) Mrs. Bandy R. Pruitt		Social Security Number 401-29-9699	Date of Birth 07-30-78
Street Address 601 Short 7th Street		Home Telephone Number (area code) (910) 871-1210	
City, State, and Zip Code Henderson, Kentucky 42420		Work (if possible to call you there) N/A	

List the public lodging and/or public food service facility which discriminated against you.

Name Radisson Hotel Daytona	Telephone No. (area code) (904) 259-9800
Street Address 640 North Atlantic Avenue	City, State, and Zip Code Daytona Beach Florida 32118
County 32118	

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))

RACE COLOR SEX CREED DISABILITY

NATIONAL ORIGIN

DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE
 (month, day, year) 4/7/99

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

I. **PERSONAL HARM:** While on vacation in Daytona Beach Florida during Black College Reunion I believe that we were discriminated against by the Radisson Hotel due to the following reasons. First of all my friends and I were made to wear a bright neon bracelet.

II. **RESPONDENT'S REASON FOR PERSONAL HARM:**
 The reason that we were given for wearing the bracelets ~~was~~ were to keep a lot of people out that did not have rooms in the Radisson and to cut down partying in the rooms.

III. **DISCRIMINATION STATEMENT:** I believe we were discriminated against due to race because there were caucasian people upon our arrival who we did not see with these bracelets on. We also believe that we paid an enormous amount of money for a room in which we could not have stayed unless a bracelet was visible.

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

Bandy R. Pruitt
 Bandy R. Pruitt

4/5/2000

Meg (Commission) Eubank 4-8-03
 Kimmie Jamason, Notary

200015 TBD.C 004
'CHARGES OF DISCRIMINATION'

CAPTION: *Cunningham v. Radisson Hotels*

CITATION: 200015 TBD.C 004

DATE: 4/7/2000

STATE: FL

CASE NO: 20-01693 (FCHR)

00-004875 (DOAH)

CASE TYPE: Employment Discrimination

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

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PUBLIC ACCOMMODATION CHARGE OF DISCRIMINATION		FCHR No. 00 APR -7 PM 4:46
Name (Indicate Mr., Ms. or Mrs.) Mrs. Carmen A. Cunningham	Social Security Number 400-13-9771	Date of Birth 08/24/79
Street Address 2406 Green River Road Apt. 10A	Home Telephone Number (area code) (770) 820-8073	
City, State, and Zip Code Henderson KY 42420	Work (if possible to call you there) 812-477-9227	

List the public lodging and/or public food service facility which discriminated against you.

Name Radisson Hotel Daytona	Telephone No. (area code) (404) 254-9800
Street Address 040 North Atlantic Avenue	City, State, and Zip Code Daytona Beach, Florida 32118
CAUSE OF DISCRIMINATION BASED ON [Check appropriate box (es)] <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> CREED <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year)

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

I. PERSONAL HARM: While on vacation in Daytona Beach Florida during Black College Reunion I believe that we were discriminated against by the Radisson Hotel due to the following reasons. First of all my friends and I were made to wear a bright neon bracelet.

II. RESPONDENT'S REASON FOR PERSONAL HARM: The reasons that we were given for wearing the bracelets were to keep a lot of people out that did not have rooms in the Radisson and to cut down on partying in the rooms.

III. DISCRIMINATION STATEMENT: I believe that we were discriminated against due to race because there were Caucasian people upon our arrival who we did not see with these bracelets on. We also believe that we paid an enormous amount of money for a room in which we could not have guests unless a bracelet was visible.

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

Carmen Cunningham
 Carmen Cunningham

4/2/2000

Mrs. Commission Underwood
 4-5-03
 Bernice Johnson, Notary

200015 TBD.C 005
'CHARGES OF DISCRIMINATION'

CAPTION: *Butler v. Radisson Hotels*

CITATION: 200015 TBD.C 005

DATE: 4/7/2000

STATE: FL

CASE NO: 20-01704 (FCHR)

00-005082 (DOAH)

CASE TYPE: Employment Discrimination

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

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PAGES: 1



PUBLIC ACCOMMODATION CHARGE OF DISCRIMINATION		FCHR No.
Name (Indicate Mr., Ms., or Mrs.) Mrs. Scherrie L. Butler		Social Security Number / Date of Birth 400-13-1042 / 06/23/79
Street Address 10 Brad's Alley		Home Telephone Number (area code) (810) 831-5113
City, State, and Zip Code Henderson, KY 42420		Work (if possible to call you there) (810) 831-7300

List the public lodging and/or public food service facility which discriminated against you.

Name Radisson Hotel Daytona	Telephone No. (area code) (904) 239-9800
Street Address 040 North Atlantic Avenue	City, State, and Zip Code Daytona Beach, Florida
	County Wayne

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box (es)) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> CREED <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year) 4/7/99
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THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s):

I. PERSONAL HARM: While on vacation in Daytona Beach Florida during Black College Reunion I believe we were discriminated against by the Radisson Hotel due to the following reasons: (continued on attached sheet)

II. RESPONDENT'S REASON FOR PERSONAL HARM: The reasons that we were given for wearing the bracelets were to keep a lot of people out that did not have rooms in the Radisson and to cut down on partying in the rooms.

III. DISCRIMINATION STATEMENT:
 I believe that we were discriminated against due to race because there were caucasian people upon our arrival who we did not see with these bracelets on. We also believe that we paid an enormous amount of money for a room in which we could not have guests unless a bracelet was visible.

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: Scherrie L. Butler
 DATE: 4/5/2000

Scherrie L. Butler
 My Commission Expires 4-8-03
 Bernice Johnson Notary

200015 TBD.C 006
'CHARGES OF DISCRIMINATION'

CAPTION: *Marshall v. Radisson Hotels*

CITATION: 200015 TBD.C 006

DATE: 4/7/2000

STATE: FL

CASE NO: 20-01692 (FCHR)

00-005092 (DOAH)

CASE TYPE: Employment Discrimination

age	col	dis	fam	mar	nat	rac	rel	ret	sex	unk
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 325 John Knox Road, Suite 240, Building 1
 Tallahassee, Florida 32303-4149

COMMISSION ON HUMAN RELATIONS

06

00 APR -7 PM 4:46

PUBLIC ACCOMMODATION CHARGE OF DISCRIMINATION		FCHR No. 20-01692	
Name (Indicate Mr., Ms., or Mrs.) Mr. Tom M. Marshall 00-5092		Social Security Number 405-13-4081	Date of Birth 12/11/78
Street Address 27 S. Julia		Home Telephone Number (area code) (810) 921-4885	
City, State, and Zip Code Henderson KY, 42420		Work (if possible to call you there) (810) 921-2880	
List the public lodging and/or public food service facility which discriminated against you.			
Name Radisson Hotel Daytona		Telephone No. (area code) (404) 239-9800	
Street Address 1040 North Atlantic Avenue		City, State, and Zip Code Daytona Beach, Florida 32118	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es)) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> CREED <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN		DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year)	
THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s): I. PERSONAL HARM: While on vacation in Daytona Beach Florida during Black College Reunion I believe that we were discriminated against by the Radisson Hotel due to the following reasons. First of all my friends and I were made to wear a bright neon bracelet II. RESPONDENT'S REASON FOR PERSONAL HARM: The reasons that were given for wearing the bracelets were to keep a lot of people out that did not have rooms in the Radisson and to cut down on partying in the rooms. III. DISCRIMINATION STATEMENT: I believe we were discriminated against due to race because there were caucasian people upon our arrival who we did not see with these bracelets on. We also believe that we paid an enormous amount of money for a room in which we could not have guests unless a bracelet was visible			
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	
Tom Marshall		4/5/2000	

Mildred Greenwell
 Notary
 My Commission Expires 6/7/2003

APPENDIX



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ORIGINAL SOURCE

<u>#</u>	<u>Item</u>	<u>Link</u>
1	Original Source	FCHR.MyFlorida.com
2	Secondary Source	DOAH.State.FL.US

INTERACTIVE VERSION

<u>#</u>	<u>Item</u>	<u>Link</u>
1	Web	TextBookDiscrimination.com/Reports/COD/

CONTACT INFORMATION

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W: www.TextBookDiscrimination.com

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