

Complaint Fair Housing & Employment

confirmation # E44168AT263

Tiffany Kay Anderson 209-263-7132

Attention: Appointment Clerk

TIFFANY KAY ANDERSON LOOKING FORWARD TO MY INTERVIEW ON
OCTOBER 1 2009 BETWEEN 1-4 @209-263-7132

Supplemental Information Questionnaire

🍏 John Stroh Manager of San Joaquin County Mosquito & Vector Control District

🍏 Harassment & retaliation has been implemented prior to my employment it is a method of running operations used by management in place of best management practices taught by RISK management. When a previous victim of this behavior witnessed my situation they encouraged me to file a complaint. The behavior as it applies to me started June 7, 2004 with my first work comp claim. The last date of harassment retaliation occurred on June of 2009.

🍏 During the year of 2006 I was a witness to a work comp claim. My testimony was recorded in December of 2006. I was told at that time by the insurance claims adjuster if a settlement was not agreed upon, with the two parties my testimony would be handed over to the attorney of the complainant and I could be subpoenaed by either side as a witness.

🍏 Concurrently one week after my recorded testimony my supervisor was changing to accommodate an affair that had transpired in the work place between supervisor Bob Durham and employee Janine Esau Finely his subordinate. Both of which are parties to the lawsuit mentioned above and still pending to date.

By June 2007 I had worked my ways up the chain of command with complaints due to sexual harassment from the jealous girlfriend and unequal and unsafe practices along with misconduct applied from Bob Durham my supervisor.

I had confronted: Bob, Janine, Eddie, Duane Bridgewater, John Stroh and by July 27, 2007 I had requested the services of Jerry Preciado our in house E.R.M.A. Risk management educator.

On 7-25-07 I had written a complaint and requested the services of mediation to find reconciliation. I was transferred on 7-27-2007 to a new region under the supervision of Keith Neinhuis. The protocol that is used when any employee is moved or transferred to a new area was not followed. The only protocol that took place was that of making sure employees who complained wanted to quit their jobs or followed. During my time under Keith I was given two evaluations in the sixth month period. One from Bob the supervisor I had complained to management about and by Keith. At this time I was given a chain of command and instructed to use it. Both evaluations were disparaging, untrue and a total abuse of power. My manager not once followed through to see if the conditions had improved and by May of 2008 my supervisor Keith had been replaced by Brian Heine who had no knowledge of what had transpired. Brian however was given my evaluations and told I was a

problem. John Stroh and Eddie Luchessi brought me in the office the first few weeks after Brian's new assignment as my supervisor and continued the machine of trying to fire me. It was at this time I told John and Eddie of Keith's Behavior:

1. Keith sent me home 1-2008 due to my heavy bleeding of my menstrual cycle and the possibility that I may be a liability to the district
2. Keith 8-2007 Keith asked me if I could beat up Janine or Mary who would it be?
3. During a union meeting Keith held up the wine garden card and asked me if I would use it the next time he reprimanded me

John & Eddie with their mouths open wide asked why I did not come to them and say anything. All I can say is look at the chain of command I was given with the orders to stifle my complaints. You would think it all would have ended on this date here. I have documentation of retaliation up to my last day at work. Gerry Preciado has been called in for 3 emergency trainings due to my situation. The bottom line is management only gives it lip service and does not uphold the precepts being taught.

🍏 I do believe this is enough to peak one's interest. I had an interview with Leon Medina in 2007 after my transfer. Leon was new and my ability to explain what was going on was limited. I know have journals. I have witnesses. If you pursue this investigation I am sure I will have ample information for a successful investigation. I have been under the care of a team of physicians to document the changes that have occurred during this time. I could not quit my job as I had children at home to provide for. Documentation was my only power.

🍏 There are plenty of witnesses to confirm my situation. Each employee has their own story of retaliation and fear of retribution. I ask you to please come in and take a look.

🍏 On March of 2008 I tore my lateral meniscus out in the field. I returned to work in 1-2009. I re tore the same injury with no chance of surgery 3-2009 and returned to work from May to the end of June of 2009. My employer has inflicted so much pressure on me it is clear I will not be able to return with further injuries. December of 2008 our secretary retired after 33 years of employment. Any position offered is supposed to be offered in house first. I was on modified duty and could have temporarily filled the position and inquired hoping for an opportunity to remove myself from the field operations altogether, this opportunity was denied of me by John Stroh.

Thank you for any consideration your office might give to observing my complaint.

Interview Date:	Processing Time: :HR :MIN
Approval:	Action Taken:
Interviewer:	Computer Entry:

PRE-COMPLAINT QUESTIONNAIRE - EMPLOYMENT

The information requested on this form will assist the Department in helping you. There is no guarantee that the information submitted will result in an investigation. Please check or answer only those questions that apply.

PLEASE PRINT

DATE

NAME Tiffany Kay Anderson
First Middle Last
 ADDRESS 1516 Sylvan Way #205 Lodi S.J. 95242
Street Apt. Number City County ZIP Code
 TELEPHONE NUMBER: Home WORK (209) 263-7132 HOME (209) 263-7132
Area Code Area Code

I prefer to be contacted by telephone at work/home: (home) Days: any Time: any
 Person to contact if you cannot be reached or if you move:
 Name NA TELEPHONE () 263-7132
Area Code

I WISH TO COMPLAIN AGAINST: (Name and address of company, government entity [city, county, state], employment agency, union, etc.)
 NAME San Joaquin County Mosquito Control & Vector District John Stroh
Eddie Luchessi, Bob Durham, Keith Nuihuis, Morgan Bennett
 ADDRESS 7759 S. Airport Way Stockton CA S.J. 95207
Street City County ZIP Code
 TELEPHONE NUMBER: WORK (209) 982-4675 NUMBER OF EMPLOYEES (Estimate, if necessary)
Area Code Job Site 25 Company-Wide 40

I WISH TO COMPLAIN AGAINST: (Other named individuals who were involved in this particular complaint.)
 NAME John Stroh, Eddie Luchessi, Bob Durham, Keith Nuihuis, Morgan Bennett Janine Esau
 TITLE Manager, ass. stant manager, supervisor tech I TELEPHONE (209)
(if known) Street City County ZIP Code
 ADDRESS 7759 S. Airport Way Stockton CA SJ 982-4675
(if known) Street City County ZIP Code

EMPLOYER LISTED ON W-2 FORM:
 NAME San Joaquin County
 ADDRESS 24 S. Plunier Street Room #103 S.J. 95202
(if known) Street City County ZIP Code

(CONTINUE ON BACK IF NECESSARY)

1. I believe I was discriminated against because of my (please circle):
- Race
 - Sex
 - Cancer
 - Pregnancy
 - Age (40 and over)
 - Color
 - Sexual Orientation
 - Genetic Characteristics
 - Marital Status
 - Denial of Family Care Leave
 - Religion (Please specify)
 - Disability (including AIDS) (Please specify)
 - National Origin/Ancestry (Please specify)

2. Circle the discriminatory treatment and indicate the date occurred:
- Terminated/Laid Off _____ Not Hired _____ Denied Promotion 1-2009 Harassed X 6-2009
 - Denied Leave (Pregnancy/Family Care Leave) _____ Denied Accommodation _____ Denied Equal Pay _____
 - Denied Accommodation for Pregnancy _____ Impermissible Non-Job-Related Inquiry _____
 - Retaliation X 6-2009 Other _____

3. Why do you believe the unfair treatment was discrimination? (If others were treated better than you, give names, addresses and examples.) _____

4. List the names, addresses, job titles and telephone numbers (if possible) of witnesses, co-workers, or others you feel could provide evidence. Explain what you think each witness will be able to tell us.

Name and Address	Title/Relationship	Telephone Numbers	
		Home	Work
_____	_____	_____	_____
_____	_____	_____	_____

Can provide information regarding: _____

Name and Address	Title/Relationship	Telephone Numbers	
		Home	Work
_____	_____	_____	_____
_____	_____	_____	_____

Can provide information regarding: _____

(Use extra sheets of paper for additional witnesses, if necessary.)

5. EMPLOYMENT DATA: (Complete as many items as you can.)

- A. Date hired or applied for job: _____
- B. Job title/salary at time of discrimination: _____
- C. Name and title of immediate supervisor or interviewer: _____
- D. If you? your employment was terminated, who replaced: _____
- E. If your employment was terminated or if you were refused a job, have you since been employed? Yes _____ No _____
Date of hire: _____ Salary: _____ Job Title: _____
- F. If not hired:
 - < How did you know about the job and/or salary? _____
 - < Did you apply by written application or verbally? _____
 - < To whom did you submit the application? _____ Date _____
 - < How did you find out you had been refused? _____ Date _____
 - < Who got the job, salary, etc. (if known)? _____

6. Have you filed a complaint with the U.S. Equal Employment Opportunity Commission (EEOC) before coming to DFEH? Yes _____ No _____ Date _____

7. Have you talked to an attorney concerning this problem? Yes _____ No _____

NAME _____ TELEPHONE (____) _____
ADDRESS _____ Area Code _____

8. PERSONAL DATA:

RACE/ETHNICITY (Check box that best describes) Native American Asian/Pacific Islander (specify) _____
 African-American African - Other Caucasian (non-Hispanic) Hispanic (specify) _____

PRIMARY LANGUAGE _____

SOCIAL SECURITY NUMBER: _____
(The Federal Privacy Act of 1974 prohibits a state government agency from requiring disclosure of an individual's Social Security Number. Disclosure of your Social Security Number is voluntary.)

DATE OF BIRTH _____/_____/____

SEX: Male Female

DO NOT WRITE IN THIS AREA
INTERVIEWER'S NOTES

Complainant's assertions:

What does Complainant say the employer's position will be?

Comparative data/relevant information:

What does Complainant want as a remedy?

Complaint taken for investigation: Yes ___ No ___
If taken for filing purposes only, explain why:

If NO, was "b" offered? Yes ___ No ___

If not taken, rationale:

Complainant advised of Pilot Mediation Program? Yes ___ No ___

Complainant advised of statute of limitations? Yes ___ No ___

Complainant advised of other agencies? Yes ___ No ___

Date statute runs:

FOR OFFICIAL USE ONLY
DFEH CODE: LAW ___ BASIS ___ ACT ___ REJECT ___ PUBLIC ___

Brenda Barnes

DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100, Elk Grove, CA 95758

Local & Out of State Number: (916) 478-7200 Toll Free: (800) 884-1684 Hearing Impaired: (800) 700-2320

www.dfeh.ca.gov

**INTERVIEW CONFIRMATION NOTICE**

You have an appointment for an interview with our:

Sacramento District Office

TELEPHONE INTERVIEWS

In order to be interviewed, you must complete and return the enclosed Pre-Complaint Questionnaire at least three days before your scheduled appointment to the address listed above. Answer only those questions that apply to your situation. Mailing in a completed Pre-Complaint Questionnaire does not constitute the filing of a complaint of discrimination with this Department. You will be called by an interviewer at the scheduled appointment time. Please allow 1½ hours for the interview.

GENERAL INFORMATION

During your interview, you will need to explain why you believe the treatment or harassment you experienced was based in part on your race, religion, color, national origin, ancestry, physical or mental disability, medical condition (cancer or genetic characteristics), marital status, age (40 and over), sex, sexual orientation, or retaliation for protesting illegal discrimination related to one of these categories. If relevant, you may also need to provide details as to why you were denied a reasonable accommodation, pregnancy disability leave, or family leave.

The interviewer will ask questions about the information provided on the questionnaire and seek additional information about the actions that you believe constitute discrimination. You may be asked how others in your workplace were treated. For example, a woman who believes she was fired because of her gender may be asked about the way men at her workplace were treated under similar circumstances. After conducting the interview, the interviewer will evaluate your complaint to determine if your case will be accepted for investigation. Please be aware that the Department's authority only extends to violations of the Fair Employment and Housing Act, the Ralph and Unruh Civil Rights Acts. Other labor and employment laws are enforced by other agencies. If the Department is unable to assist you, we will attempt to refer you to other agencies that may be able to address your concerns.

Complaints of discrimination must be filed with the Department within one year from the date of the alleged discriminatory act, or, for victims who are under the age of 18, not later than one year of that person's 18th birthday.

Please call (916) 478-7230 if you are unable to keep your appointment.

Thank you for your cooperation.

State of California
DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING
INTERVIEW CONFIRMATION NOTICE

You have been scheduled for a telephone intake interview appointment.

Retain the first card and **return** second card with your Pre-Complaint Questionnaire

TELEPHONE INTERVIEW	IN-PERSON INTERVIEW
October 1, 2009 Between 1:00 PM and 4:00 PM District E	Prior appointment E35301AT 3:29

Tiffany K Anderson
1516 Sylvan Way Apt 205
Lodi, CA 92542-4306

Confirmation Number: E44168AT263