

Marvin Green

v.

HRC, Secretary,
U.S. Dept. of State

DOS Case: DOS F-125-10
EEOC Case: 570-2011-00700X

Exhibit 27 of ____.

Formal Complaint 09 01 10 – Freetown

Formal Complaint 11 07 11 -- Wellington.

FREE TOWN



U.S. Department of State
Office of Civil Rights (S/OCR)

FORMAL COMPLAINT OF DISCRIMINATION

PRIVACY ACT STATEMENT (5 U.S.C. § 552(a))

AUTHORITY	Public Law 92-261
PRINCIPAL PURPOSE	Used for processing complaints of discrimination because of race, color, national origin, sex, age, physical and/or mental disability, reprisal, or sexual orientation by Department of State employees, former employees, applicants for employment, and some contract employees.
ROUTINE USES	Information will be used (a) as a data source for complaint information for production of summary descriptive statistics and analytical studies of complaints processing and resolution efforts; (b) to respond to general requests for information under the Freedom of Information Act; (c) to respond to requests from legitimate outside individuals or agencies (White House, Congress, Equal Employment Opportunity Commission) regarding the status of a complaint or appeal; or (d) to adjudicate a complaint or appeal.
DISCLOSURE	Voluntary, however, failure to complete all appropriate portions of this form may lead to a delay in processing and/or rejection of the complaint on the basis of inadequate data to continue processing.

COMPLAINANT CONTACT/PERSONAL INFORMATION

1. Name (Last, First, MI.) Green Marvin E		2. U.S. Citizen <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Home Telephone (Include area code) Skype w/voice mail 202 657 4911		4. Work Telephone (Include area code) On Home Leave, Not Yet @ Post
5. Home Address (Include ZIP code) Unit 4360 Box 6035 DPO AP 96532 - not yet at post		
6. Home E-Mail Address marvin.e.green@gmail.com	6b. Work E-Mail Address greenme@state.gov	7. Are you working for the Federal government? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. Aggrieved is a(n): <input checked="" type="checkbox"/> Employee <input type="checkbox"/> Applicant <input type="checkbox"/> FSN <input type="checkbox"/> Contractor <input type="checkbox"/> Other (Specify) _____		
9. Title and Grade of Current Position FS-4 Information Management Specialist		10. Current Employer State Department - Embassy Wellington
11. Work Address 4360 Wellington Place, Dulles, VA, 20189-4360		

REPRESENTATIVE/ATTORNEY INFORMATION

12. Do you have a representative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	13. If yes, provide name of representative.
14. Is your representative an attorney? <input type="checkbox"/> Yes <input type="checkbox"/> No	15. Address
16. Telephone (Include area code)	17. E-Mail

COMPLAINT INFORMATION

18. Bureau/Office/Post Where Discrimination Allegedly Took Place FSI and American Embassy, Freetown, Sierra Leone - 03-30-2008, 09-23-2008, 01-19-2009, 08-18-2009				
19. Date(s) Alleged Discrimination Occurred				
03-25-2010 (mm-dd-yyyy)	03-30-2010 (mm-dd-yyyy)	04-27-2010 (mm-dd-yyyy)	05-21-2010 (mm-dd-yyyy)	09-07-2010 (mm-dd-yyyy)

20. Why do you believe you were discriminated against? (Check all that apply and specify.)

- Race _____ Color _____
- Religion _____ Sex _____
- Age (mm-yyyy) 05-1953 National Origin _____
- Disability (Check all that apply and specify)
- Mental _____
- Physical _____
- Reprisal (Provide date. Check all that apply, and specify.)
- Date (mm-dd-yyyy) 09-07-2010
- Engaging in prior protected activity (Specify) Refusing to pay overtime unless I drop my complaint
- Opposing discriminatory policies or practices (Specify) Hold HHE/UAB Unit I Drop Complaint "signing HR Docs"
- Sexual Orientation _____

21. Did you discuss your complaint with an EEO Counselor?

Yes No

22. Did you receive a copy of the EEO Counselor's report?

Yes No

23. Name of EEO Counselor

Kendl Williams

24. Date of Final Interview (mm-dd-yyyy)

09-01-2010

25. Explain specifically how you were discriminated against (treated differently from other employees or applicants) because of your race, color, religion, sex, national origin, age, mental or physical disabilities, reprisal, or sexual orientation.

(Space will expand to fit. Attach additional sheets if necessary. To print the additional pages (addendum), check the print addendum box in the right hand corner of the print dialog box.)

See Attached DS-3079 Addendum "Age Wage Rage Complaint 09 09 10.pdf"

26. What remedies and relief are you seeking?

(Space will expand to fit. Attach additional sheets if necessary. To print the additional pages (addendum), check the print addendum box in the right hand corner of the print dialog box.)

See Attached DS-3079 Addendum/Summary Reilief Sought at End of "Age Wage Rage Complaint 09 09 10.pdf"

27. Have you filed a grievance or appealed to the MSPB on the matter(s)?

Yes No

28. Complainant's Signature

29. Date (mm-dd-yyyy)

WELLINGTON



U.S. Department of State
Office of Civil Rights (S/OCR)

FORMAL COMPLAINT OF DISCRIMINATION

AUTHORITY	Public Law 92-261
PRINCIPAL PURPOSE	Used for processing complaints of discrimination because of race, color, national origin, sex, age, physical and/or mental disability, reprisal, or sexual orientation by Department of State employees, former employees, applicants for employment, and some contract employees.
ROUTINE USES	Information will be used (a) as a data source for complaint information for production of summary descriptive statistics and analytical studies of complaints processing and resolution efforts; (b) to respond to general requests for information under the Freedom of Information Act; (c) to respond to requests from legitimate outside individuals or agencies (White House, Congress, Equal Employment Opportunity Commission) regarding the status of a complaint or appeal; or (d) to adjudicate a complaint or appeal.
DISCLOSURE	Voluntary, however, failure to complete all appropriate portions of this form may lead to a delay in processing and/or rejection of the complaint on the basis of inadequate data to continue processing.



1. Name (Last, First, MI.) Green Marvin E	2. U.S. Citizen <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Home Telephone (Include area code) Skype w/voice mail 202 657 4911	4. Work Telephone (Include area code) 202 647-4478

5. Home Address (Include ZIP code)
101 Chanel Ter., Apt 202, Falls Church, VA, 22046

Home E-Mail Address marvin.e.green@gmail.com	6b. Work E-Mail Address greenme@state.gov	7. Are you working for the Federal government? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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8. Aggrieved is a(n):
 Employee
 Applicant
 FSN
 Contractor
 Other (Specify) _____

9. Title and Grade of Current Position FS-4 Information Management Specialist	10. Current Employer State Department
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11. Work Address
2201 C Street NW Washington DC 20520; Attn: Marvin Green/WHA/Rm3906



12. Do you have a representative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	13. If yes, provide name of representative.
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14. Is your representative an attorney? <input type="checkbox"/> Yes <input type="checkbox"/> No	15. Address
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16. Telephone (Include area code)	17. E-Mail
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18. Bureau/Office/Post Where Discrimination Allegedly Took Place
Embassy Wellington

19. Date(s) Alleged Discrimination Occurred
06-07-2011 _____ _____ _____ _____
(mm-dd-yyyy) (mm-dd-yyyy) (mm-dd-yyyy) (mm-dd-yyyy) (mm-dd-yyyy)

20. Why do you believe you were discriminated against? (Check all that apply and specify.)

Race _____ Color _____
 Religion _____ Sex _____

Age (mm-yyyy) _____ National Origin _____

Disability (Check all that apply and specify)
 Mental _____
 Physical _____

Reprisal (Provide date. Check all that apply, and specify.)

Date (mm-dd-yyyy) 06-07-2011

Engaging in prior protected activity (Specify) DOS-F-125-0

Opposing discriminatory policies or practices (Specify) overtime practices, covered up with falsified security violation

Sexual Orientation _____

21. Did you discuss your complaint with an EEO Counselor?
 Yes No

22. Did you receive a copy of the EEO Counselor's report?
 Yes No

23. Name of EEO Counselor
Kendl Williams

24. Date of Final Interview (mm-dd-yyyy)
09-01-2010

25. Explain specifically how you were discriminated against (treated differently from other employees or applicants) because of your race, color, religion, sex, national origin, age, mental or physical disabilities, reprisal, or sexual orientation.

(Space will expand to fit. Attach additional sheets if necessary. To print the additional pages (addendum), check the print addendum box in the right hand corner of the print dialog box.)

In reprisal for opposing age discrimination in regards to premium compensation for overtime and standby duty, and for bringing said practices to the attention of the Management Officer, Tim Simas, between January 2011 and June 28, 2011 did systematically through reprimands, exaggerated and falsified security violation reporting, and an EER where he perjured himself and suborned myself to perjury in the midst of Tim Liddard's investigation of DOS-F-125-0, allowing me to select false dates (the same meeting we had brought his overtime practices to the attention of the Management Officer); where the next day he started writing up a security violation; whereupon he conspired with William Potter to have Separation Orders issued directing my to Folsom California, thus attempting to obstruct and prevent me from pursuing adjudication of DOS-F-125-0.

26. What remedies and relief are you seeking?
(Space will expand to fit. Attach additional sheets if necessary. To print the additional pages (addendum), check the print addendum box in the right hand corner of the print dialog box.)

I was a GS-12 step 10 with 12 years of DoD experience doing very similar work. Had I not joined the Foreign Service where older candidates are not tenured at the same rate as the younger candidates I would now be a GS-13 step 8 at \$109,807. FS-2 Step 9 at \$111,284 is the next closest FS equivalent. In the job announcement I was promised 2 full 2 year tours of evaluated experience prior to a final tenure decision. The remedy I seek is the same as my original job application: 2 full overseas tours of evaluated experience prior to a final tenure decision at the pay I would have garnered had the discrimination not occurred, with back pay for the past 4

(See Addendum 1)

27. Have you filed a grievance or appealed to the MSPB on the matter(s)?
 Yes No

28. Complainant's Signature
 Green, Marvin E

29. Date (mm-dd-yyyy)
11-07-2011