

ATTACHMENT A

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
NOTICE OF RIGHT TO SUE (ISSUED ON REQUEST)

To: **Malry L. Tardd, Jr.**
P.O. Box 1210
Quogue, NY 11959

From: **New York District Office**
33 Whitehall Street
5th Floor
New York, NY 10004

On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

520-2007-01639

Patricia M. Araujo,
Investigator

(212) 336-3681

(See also the additional information enclosed with this form.)

NOTICE TO THE PERSON AGGRIEVED:

Title VII of the Civil Rights Act of 1964 and/or the Americans with Disabilities Act (ADA): This is your Notice of Right to Sue, issued under Title VII and/or the ADA based on the above-numbered charge. It has been issued at your request. Your lawsuit under Title VII or the ADA **must be filed in a federal or state court WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a state claim may be different.)

- More than 180 days have passed since the filing of this charge.
- Less than 180 days have passed since the filing of this charge, but I have determined that it is unlikely that the EEOC will be able to complete its administrative processing within 180 days from the filing of this charge.
- The EEOC is terminating its processing of this charge.
- The EEOC will continue to process this charge.

Age Discrimination in Employment Act (ADEA): You may sue under the ADEA at any time from 60 days after the charge was filed until 90 days after you receive notice that we have completed action on the charge. In this regard, **the paragraph marked below applies to your case:**

- The EEOC is closing your case. Therefore, your lawsuit under the ADEA **must be filed in federal or state court WITHIN 90 DAYS of your receipt of this Notice**. Otherwise, your right to sue based on the above-numbered charge will be lost.
- The EEOC is continuing its handling of your ADEA case. However, if 60 days have passed since the filing of the charge, you may file suit in federal or state court under the ADEA at this time.

Equal Pay Act (EPA): You already have the right to sue under the EPA (filing an EEOC charge is not required.) EPA suits must be brought in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

If you file suit, based on this charge, please send a copy of your court complaint to this office.

On behalf of the Commission

Enclosures(s)


Spencer H. Lewis, Jr.,
Director

08/24/07
 (Date Mailed)

cc: **BROOKHAVEN NATIONAL LABORATORY**
Legal Department
P.O. Box 5000
Upton, NY 11973

Gregory Calliste, Jr., Esq.
 Law Office of Frederick K. Brewington
 50 Clinton Street, Suite 501
 Hempstead, NY 11550-4282

EEOC FORM 151 (5/01)

U.S. Equal Employment Opportunity Commission

BROOKHAVEN NATIONAL LAB
Legal Department
P.O. Box 5000
Upton, NY 11973

RECEIVED
MAR 28 2007
BNL LEGAL DEPT.

PERSON FILING CHARGE

Mairy L. Tardd, Jr.

THIS PERSON (check one or both)

Claims To Be Aggrieved

Is Filing on Behalf of Other(s)

EEOC CHARGE NO.

520-2007-01639

NOTICE OF CHARGE OF DISCRIMINATION

(See the enclosed for additional information)

This is notice that a charge of employment discrimination has been filed against your organization under:

Title VII of the Civil Rights Act

The Americans with Disabilities Act

The Age Discrimination in Employment Act

The Equal Pay Act

The boxes checked below apply to our handling of this charge:

1. No action is required by you at this time.

2. Please call the EEOC Representative listed below concerning the further handling of this charge.

3. Please provide by **16-APR-07** a statement of your position on the issues covered by this charge, with copies of any supporting documentation to the EEOC Representative listed below. Your response will be placed in the file and considered as we investigate the charge. A prompt response to this request will make it easier to conclude our investigation.

4. Please respond fully by _____ to the enclosed request for information and send your response to the EEOC Representative listed below. Your response will be placed in the file and considered as we investigate the charge. A prompt response to this request will make it easier to conclude our investigation.

5. EEOC has a Mediation program that gives parties an opportunity to resolve the issues of a charge without extensive investigation or expenditure of resources. If you would like to participate, please say so on the enclosed form and respond by _____ to _____

If you **DO NOT** wish to try Mediation, you must respond to any request(s) made above by the date(s) specified there.

For further inquiry on this matter, please use the charge number shown above. Your position statement, your response to our request for information, or any inquiry you may have should be directed to:

John B. Douglass,
Supervisory Investigator

EEOC Representative

Telephone **(212) 336-3765**

New York District Office
33 Whitehall Street
5th Floor
New York, NY 10004

Enclosure(s): Copy of Charge

CIRCUMSTANCES OF ALLEGED DISCRIMINATION

RACE COLOR SEX RELIGION NATIONAL ORIGIN AGE DISABILITY RETALIATION OTHER

See enclosed copy of charge of discrimination.

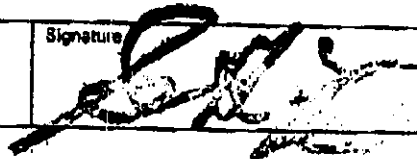
Date

Name / Title of Authorized Official

Signature

March 21, 2007

Spencer H. Lewis, Jr.,
Director



CHARGE FORM PAGE 1

EEOC Form 1 (501)

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

FEPA
 EEOC

520-2007-01639

New York State Division Of Human Rights

and EEOC

State or local Agency, if any

Name (indicate Mr., Ms., Mrs.)

Mr. Malry L. Tardd, Jr.

Home Phone (incl. Area Code)

(631) 653-8966

Date of Birth

Street Address

City, State and ZIP Code

P.O. Box 1210

Quogue, NY 11959

Name of the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name

BROOKHAVEN NATIONAL LABORATORY

No. Employees, Members

500 or More

Phone No. (include Area Code)

(631) 344-8000

Street Address

City, State and ZIP Code

Legal Department, P.O. Box 5000

Upton, NY 11973

Name

No. Employees, Members

Phone No. (include Area Code)

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)

RACE COLOR SEX RELIGION NATIONAL ORIGIN
 RETALIATION AGE DISABILITY OTHER (Specify below.)

DATE(S) DISCRIMINATION TOOK PLACE
Earliest Latest

04-13-2006

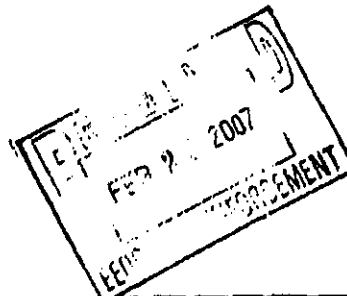
ON-GOING

CONTINUING ACTION

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

I believe that I was discriminated against by my former employer when I was denied long term disability benefits and terminated in retaliation for prior complaints of discrimination, in violation of Title VII of the Civil Rights Act of 1964, as amended.

Please see attached statement submitted to the EEOC by Facsimile on February 7, 2007.



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 phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

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

2-23-2007

Date

Malry Tardd Jr
Charging Party Signature

NOTARY - When necessary for State and Local Agency 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 (month, day, year)

Notary Public, State of New York
No. 01CL8024226

Commission Expires May 3, 2017

CHARGE FORM PAGE 2

EEOC Form 1 (5-01)

CHARGE OF DISCRIMINATION <small>(This form is regulated by the Privacy Act. See enclosed Privacy Act Statement and other instructions before completing this form.)</small>	Charge Presented To:	Agency(ies) Charge No(s):
	<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	520-2007-01639

New York State Division of Human Rights and EEOC
State or Local Agency, if any

Name: (Include Mr., Ms., Mrs.) MR. Mahay L. Tanaka Jr Date of Birth: 8/25/55

Street Address: P.O. Box 1210 City, State and ZIP Code: Queque NY 11959

Named in the Complaint, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two are named, list under PARTICULARS below.)

Name: BROOKHAVEN NATIONAL LAB No. Employees, Members: 3000 Phone No. with Area Code: 631-344-8000

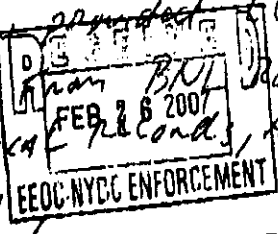
Street Address: P.O. Box 5000 City, State and ZIP Code: Union New York 11973

Name: _____ No. Employees, Members: _____ Phone No. with Area Code: _____

Street Address: _____ City, State and ZIP Code: _____

DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> OTHER (Specify below.)	DATE(S) DISCRIMINATION TOOK PLACE Earliest: _____ Latest: <u>JUNE 2006 - PRESENT</u> <input type="checkbox"/> CONTINUING ACTION
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THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):
 IN ADDITION TO THE TERMINATION OF EMPLOYMENT DATE I BROOKHAVEN NATIONAL LAB AND ITS MANIPULATIONS AND DEFENDANTS, HAVE CONTINUED THROUGH DOCUMENTATION AND RETALIATION TO THIS PRESENT DATE OF 2/23/07 CONSPIRED TO DENY, FABRICATE, AND SUBJECT ME TO RETALIATION IN LONGTERM DISABILITY + WORKERS COMP. BENEFITS. NEW OBTAINED EVIDENCE FROM WORKERS COMP. DOCUMENTATION, FROM BNL RECORDS CLEARLY DEMONSTRATES DOCT MEDICAL RECORDS, AND LAWYER MISCONDUCT, AND PERJURY.



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 phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

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: Mahay L. Tanaka Jr
 SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) FEB 23, 2007 BY ADAM CLEMENTS
 Notary Public, State of New York
 No. 01CL6024226
 Qualified in Suffolk County
 Commission Expires May 3, 2007

Date: 2-23-07 Charging Party Signature: Mahay L. Tanaka Jr

page 1

To: EEOC Investigators / Long Island, New York
 Complainant: Malry L Tardd Jr Filed ,with Lenora, Anne Myers, at 1-800-669-4000
 April 7,2007 Page 1
 Address: P.O. Box 1210, Quogue, NY, 11959
 Telephone: 631-653-8966

Name of Employer in complaint: Brookhaven National Laboratory
 Address: P.O. Box 5000, Upton, New York 11973-5000

Description of my complaint against Brookhaven National Lab: illegal termination
 because of race and disability

Date of termination: April 13, 2006,

Why I know I was discriminated in termination of employment against because of
 my race and disability: ?

My name is Malry L Tardd Jr. And my statement and beleif is, I was subjected to an
 illegal termination from my former employer.

Brookhaven National laboratory, because of my race as an Black male and also
 because, I was diagnosed as having an disability prior to being terminated.

Prior to being terminated, I had filed a verified complaint of retaliation with the EEOC
 for being subjected to, severe harassment and many bias crimes performed against me
 by Brookhaven Management and employees, such as Example (Klu Klux Klan hood)
 worn by Employee Mike Caruso and witnessed be My manager/supervisor Walter
 Deboer and many other employees, (A noose was hung from my office door),(a white
 sheeted doll was hung by the neck from a sign by my office with a note attached), Signs
 were posted on office walls about me, my memos were ripped up by employees.And
 many other acts of hate and discrimination were performed againt me because I had
 filed a federal complaint with your office EEOC . In the next months after filing a federal
 civil lawsuit against William Hempling(HR Manager) Susan Foster(HR manager),Mike
 Goldman(BNL Legal) , Walter deboer(Supervisor),Ed Hass(Department manger) I was
 subjected to many acts of retaliatory actions against me daily, that reinforced a known
 medical condition of acute anxiety,and panic attacks . My Supervisor Walter Deboer in
 an action to cause me harm attacked me in my office at Brookhaven National lab. I was
 threatened with the words you got me and now I am going to get me.in a severely
 face to face threat He accused me of using company time and company paint to paint
 my personal objects in an illegal place. He only accused me of said action ,after I
 caught him trying to set me up with an camera in hand and delegating his employees to
 spy on me and support his attack of me.

Because of his physical attack in actions against me , and many more ,I was subjected
 to an severe emotional anxiety break down and panic attacks and was seen at the BNL
 medical facility by a Dr Quinn. He diagnosed me as having a panic attack. He was
 contacted against my wishes by Mike Goldman(Legal) and discussed my medical
 condition. At that point Mike Goldman, Walter deboer , Susan Foster, William Hempling
 , Ed Hass (Department Manager), Eric Johnson Department Manager, Together
 fabricated the assault as an action against me. (In order to protect Walter deboers action