



DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

PHYLLIS W. CHENG, Director

1350 Front Street | Suite 1063 | San Diego | CA 92101
(619) 645-2681 | TTY (800) 700-2320 | Fax (619) 645-2683
www.dfeh.ca.gov

July 2, 2010

Daryl Tilghman
Assistant Vice President of Human Resources
PREFERRED EMPLOYERS INSURANCE COMPANY
1455 Frazee Road, Suite 1000
San Diego, CA 92108

RE: E200910D0961-00-pev/37AB013243
CORKILL/PREFERRED EMPLOYERS INSURANCE COMPANY

Dear Daryl Tilghman:

NOTICE OF FILING OF DISCRIMINATION COMPLAINT

Enclosed is a copy of a complaint filed with the Department of Fair Employment and Housing (DFEH) pursuant to Government Code section 12960. This shall constitute service in accordance with Government Code section 12962.

DFEH serves as a neutral fact-finder and represents the State of California rather than the complaining party. The merits of this complaint have not been determined. It was, however, subjected to a screening process, and the allegations, if proven, could support a finding of discrimination.

If this complaint has also been filed with the U.S. Equal Employment Opportunity Commission (EEOC), a notice is enclosed. You need not reply to EEOC unless that agency specifically requests a response.

Follow the instructions on the attached form "Response to a Complaint of Discrimination" to compose your reply.

An on-site review for purposes of an investigation may be necessary. If such a need should arise, you will be contacted.

California Government Code section 12946 requires that all employment records (or union membership and referral records) be retained for a minimum of two (2) years. When a discrimination complaint has been served, the records must be kept until DFEH closes its inquiry and until any resulting law suit or appeal has been terminated.

Notice of Filing of Discrimination Complaint
Page Two

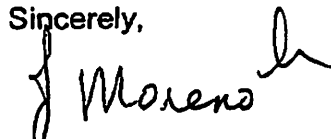
Further, Government Code section 12940, subdivision (f), prohibits any retaliatory action against a person because he or she has filed a complaint, has opposed any practices forbidden under the Fair Employment and Housing Act, or has assisted in any proceeding before the DFEH or the Fair Employment and Housing Commission.

California Code of Regulations, title 2, section 7411, requires respondents to file their addresses within ten (10) days of being notified by DFEH that a complaint has been filed against them, provided DFEH notifies them of this requirement. You are hereby notified that, as a respondent, you are required to file your address with DFEH within ten (10) days of this notice. You are also required to notify DFEH in writing of any pending change of address and the effective date of such change, while the complaint is under investigation and throughout any administrative adjudication. Forms have been included for your convenience.

If you are interested in discussing a possible settlement of this complaint, we encourage you to contact the assigned consultant (listed below) immediately. This will avoid unnecessary delay and limit the accrual of back pay or other liability. All settlement discussions are confidential, and not subject to disclosure. All discussions referring to evidence or information which has a bearing on determining the merits of this complaint will not be considered part of a settlement discussion unless confidentiality is acknowledged by DFEH. If a settlement is reached which is mutually acceptable to the parties, submission of the requested information may not be necessary.

If you have any questions, please contact the consultant named below.

Sincerely,



JOSE MORENO

Consultant

Telephone Number: 619-645-2688

Enclosures

CERTIFIED MAIL: RETURN RECEIPT REQUESTED



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RESPONSE TO A COMPLAINT OF DISCRIMINATION

You are requested, within thirty (30) calendar days of receipt of this letter, to respond in detail to each of the allegations contained in the complaint and to provide any documentary evidence supporting your position.

1. **PROVIDE THE FOLLOWING INFORMATION:**
 - A. Legal name of business
 - B. Any other name(s) which business has operated under in California
 - C. Total number of persons employed in California
 - D. Does your company have a current contract(s) for the provisions of goods, services or public works with the State of California? If so, name the awarding agency(ies).
 - E. **ANSWER ONLY IF YOU EMPLOY 50 OR MORE EMPLOYEES**
 - 1) The number of supervisory employees employed in the last year.
 - 2) The dates training regarding sexual harassment was provided to supervisory employees in the last year. Submit copies of sign-in sheets or other verification of attendance.
 - 3) Name(s) and qualifications of trainer(s). (You may attach the resume or curriculum vitae of the trainer(s)).
 - 4) Copies of the training materials provided to supervisors, including, but not limited to, workbooks, flyers, memoranda, PowerPoint or other multi-media presentations, etc.

2. RESPOND TO EACH ALLEGATION LISTED IN THE COMPLAINT. THE RESPONSE SHOULD INCLUDE AN ANSWER TO THE SPECIFIC ALLEGATIONS STATED ON THE COMPLAINT FORM AND EVIDENCE, SUCH AS RECORDS, DOCUMENTS, AND STATISTICS, WHICH SUPPORTS THAT ANSWER.

A. Answer the complaint:

Each issue raised in the complaint should be addressed. Factual statements made in the complaint should be either verified as accurate or refuted. For example, if an employee claims he or she was the only person punished for tardiness, a list of others who were tardy should be submitted. The list should show, for each individual, the number of tardies, and the punishment, if any.

B. Where written evidence exists, it should be provided to support each answer given to the complainant. Personnel records of the complainant which verify the employer's position should be submitted. Witness statements should be in the form of affidavits or signed statements. Reference to other employees should include a notation identifying them by race, sex, age, etc., depending upon the type of discrimination alleged in the complaint.

3. IN ADDITION TO RESPONDING TO THE ALLEGATIONS CONTAINED IN THE COMPLAINT, PLEASE FURNISH THE INFORMATION REQUESTED ON THE "SUPPLEMENT TO NOTICE OF FILING OF EMPLOYMENT DISCRIMINATION COMPLAINT."

4. PERSON PREPARING RESPONSE: (Please type or print the following)

NAME:

TITLE:

SIGNATURE: _____

DATE:



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NOTIFICATION OF RESPONDENT'S ADDRESS

Pursuant to California Code of Regulations, title 2, section 7411, I hereby file my address with the Department of Fair Employment and Housing (DFEH):

Respondent's Legal Name

Address

City

State

Zip Code

Telephone Number

I understand that I am required to notify DFEH of any change in address throughout the investigation and administrative adjudication.

Signature: Respondent's Representative

Date

Print Name

Title



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NOTIFICATION OF RESPONDENT'S CHANGE OF ADDRESS

Pursuant to California Code of Regulations, title 2, section 7411, I hereby notify the Department of Fair Employment and Housing (DFEH) of a change in my address as follows:

CHANGE FROM

CHANGE TO

Respondent's Legal Name

Respondent's Legal Name

Address

Address

City State Zip Code

City State Zip Code

Telephone Number

Telephone Number

Effective date of change of address: _____

Signature: Respondent's Representative

Date

Print Name

Title

**SUPPLEMENT TO NOTICE OF FILING OF
EMPLOYMENT DISCRIMINATION COMPLAINT**

Case No. E200910-D-0961-00-pev

In addition to the following specific information, please remember to complete the "Response to a Complaint of Discrimination - B" and respond, in detail, to each allegation in the complaint. Please supply all statements or documents, which, in your opinion, will assist us in determining the merits of this complaint.

1. State the reason(s) complainant was terminated and provide all documentation to support your reasons, i.e., counseling notices, written reprimands, attendance records, etc. In addition, please state complainant's salary/rate of pay, and benefits received at the time of termination. Explain or submit a copy of the policy, which governed complainant's termination.
2. Provide a copy of any written notice(s) to complainant of her termination.
3. Provide a copy of the job description for Complainant. If no written description exists describe the duties, responsibilities and required skills.
4. List all employees, to include complainant, who were supervised by the same person supervising complainant during the past two years. Identify each person's protected class, job classification and provide the current home address, telephone number and work number. Provide copies of any reprimands, counseling notices and evaluations for each employee for the past two years. If evaluations are not available, provide a statement with copies of substantiating documentation, describing how well each person performed his duties.
 - a. Identify which of these employees were discharged for the same or equally serious reason as the complainant. Provide supporting documentation.
 - b. Explain how the policy governing termination was applied to these employees and provide supporting documentation.
 - c. State how your pre-termination policy referenced in Question 4 was applied to the employees and provide appropriate documentation.
5. Provide the name, age, job classification, date of hire and salary of Complainant's replacement.
6. Provide a copy of Complainant's personnel file.
7. What is the policy on contacting employees on leave regarding their return date?
8. State when you first learned that Complainant has a disability/medical condition. State who first learned this and by what method.
9. Describe the essential requirements of Complainant's position. Provide a copy of the standards. Describe the standards that Complainant did not meet, if any and if not, explain why Complainant did not meet these standards.
10. Why was the Complainant denied a reasonable accommodation?
11. Provide a copy of your reasonable accommodation policy.

COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DFEH # E200910-D-0961-00-pev

EEOC # 37AB013243

If dual-filed with EEOC, this form may be affected by the Privacy Act of 1974.

CALIFORNIA DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING and EEOC

COMPLAINANT'S NAME (indicate Mr. or Ms.)

CORKILL, CHRYSTI J. (Ms.)

ADDRESS

[Redacted address]

TELEPHONE NUMBER (INCLUDE AREA CODE)

(858) [Redacted]

CITY STATE ZIP COUNTY COUNTY CODE
San Diego, CA San Diego 073

NAMED IS THE EMPLOYER, PERSON, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, OR STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME:

PREFERRED EMPLOYERS INSURANCE COMPANY

ADDRESS

1455 Frazee Road Ste.1000

TELEPHONE NUMBER (INCLUDE AREA CODE)

(888) 472-9001

CITY STATE ZIP COUNTY COUNTY CODE
San Diego CA 92108 San Diego 073

CAUSE OF DISCRIMINATION BASED ON (CHECK APPROPRIATE BOX(ES))

- DISABILITY, RACE, SEX, RELIGION, NATIONAL ORIGIN/ANCESTRY, DENIAL OF FAMILY/MEDICAL LEAVE, SEXUAL ORIENTATION, COLOR, AGE, MARITAL STATUS, MEDICAL CONDITION, OTHER

NO. OF EMPLOYEES/MEMBERS DATE MOST RECENT OR CONTINUING DISCRIMINATION RESPONDENT CODE
100 April 12, 2010 73

THE PARTICULARS ARE:

- I. April 9, 2010, I was denied a reasonable accommodation and terminated. I was hired February 21, 2006. At the time of my termination I was earning \$62,500 per year as a Vendor Manager.
II. In a letter Daryl Tilghman, Assistant Vice President of Human Resources told me I was terminated because I was unable to return to work.
III. I believe that I was discriminated against when denied a reasonable accommodation and terminated because of my disability [Redacted] for the following reasons:
A. I was out on approved CFRA/FMLA leave from February 18, 2010 to April 12, 2010. On April 7, 2010, I contacted my employer to request an extension to June 15, 2010 and I offered to return part-time but was told there was no available part-time work. On April 9, I was contacted by Daryl Tilghman, Human Resources who told me I could not return to work part time.
B. On April 12, 2010, I was terminated. I believe that I was terminated because my employer no longer wanted to reasonably accommodate me. This accommodation would not have caused an undue hardship. There was no legitimate business or performance issue for my termination.

Re-typed and mailed for signature June 28, 2010

I also want this charge filed with the Federal Equal Employment Opportunity Commission (EEOC).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge except as to matters stated on my information and belief, and as to those matters I believe it to be true.

Dated June 30, 2010

Chrysti J. Corkill
COMPLAINANT'S SIGNATURE

San Diego
City

DFEH-300-01 (12/99) SD:MB:lm
DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING

DATE FILED: June 30, 2010

RECEIVED

STATE OF CALIFORNIA

Department of Fair Employment & Housing
San Diego District Office

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

CHRYSTI J. CORKILL
 vs.
 PREFERRED EMPLOYERS INSURANCE
 COMPANY

PERSON FILING CHARGE

THIS PERSON (CHECK ONE)

- Claims to be aggrieved
 Is filing on behalf of other person(s)

DATE OF ALLEGED VIOLATION

Earliest *Most Recent*

PLACE OF ALLEGED VIOLATION

EEOC CHARGE NUMBER

37AB013243

FEP A CHARGE NUMBER (if known)

E200910D0961-00-pev

NOTICE OF CHARGE OF DISCRIMINATION IN JURISDICTIONS WHERE AN FEP AGENCY WILL INITIALLY PROCESS
(See EEOC "Rules and Regulations" for additional information)

YOU ARE HEREBY NOTIFIED THAT A CHARGE OF EMPLOYMENT DISCRIMINATION UNDER

- Title VII of the Civil Rights Act of 1964
 The Age Discrimination in Employment Act of 1967 (ADEA)
 The Americans with Disabilities Act of 1990 (ADA)

HAS BEEN RECEIVED BY

- The EEOC and sent for initial processing to _____ (FEP Agency)
 The CALIFORNIA DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING and sent to the EEOC for dual filing purposes.

While EEOC has jurisdiction (upon the expiration of any deferral requirement if this is a Title VII charge) to investigate this charge, EEOC may refrain from beginning an investigation and await the issuance of the Agency's final findings and orders. These final findings and orders will be given weight by EEOC in making its own determination as to whether or not reasonable cause exists to believe that the allegations made in the charge are true.

You are therefore encouraged to cooperate fully with the Agency. All facts and evidence provided by you to the Agency in the course of its proceedings will be considered by the Commission when it reviews the Agency's final findings and orders. In many instances the Commission will take no further action, thereby avoiding the necessity of an investigation by both the Agency and the Commission. This likelihood is increased by your active cooperation with the Agency.

- As a party to the charge, you may request that EEOC review the final decision and order of the above named Agency. For such a request to be honored, you must notify the Commission in writing within 15 days of your receipt of the Agency's final decision and order. If the Agency terminates its proceedings without issuing a final finding and order, you will be contacted further by the Commission. Regardless of whether the Agency or the Commission processes the charge, the Recordkeeping and Non-Retaliation provision of Title VII and the ADEA as explained on the reverse side of this form apply.

For further correspondence on this matter, please use the charge number(s) shown.

- An Equal Pay Act investigation (29 U.S.C. 209(d)) will be conducted by the Commission concurrently with the Agency's investigation of the charge.
 Enclosure: Copy of the Charge

BASIS OF DISCRIMINATION

- RACE COLOR SEX RELIGION NATIONAL ORIGIN AGE OTHER
 DISABILITY RETALIATION

CIRCUMSTANCES OF ALLEGED VIOLATION:

DATE

July 12, 2010

TYPED NAME/TITLE OF AUTHORIZED EEOC OFFICIAL

Olophius E. Perry, District Director, Los Angeles D.O.

SIGNATURE