

Elane Photography 2912 Cuervo Dr., NE Albuquerque, NM 87110	PERSON FILING CHARGE Vanessa Willock
	THIS PERSON (CHECK ONE)
	CLAIMS TO BE AGGRIEVED X
	IS FILING ON BEHALF OF OTHER PERSON (S)
	DATE OF ALLEGED November 28, 2006
	CHARGE NUMBER 06-12-20-0685

NOTICE OF CHARGE OF DISCRIMINATION

You are hereby notified that a charge of discrimination has been filed against your organization under:

- Title VII of the Civil Rights Act of 1964
- The Age Discrimination in Employment Act of 1967.
- Americans with Disabilities Act.
- New Mexico Human Rights Act.

Enclosure copy of Charge

BASIS OF DISCRIMINATION:

RACE COLOR SEX RETALIATION AGE RELIGION NATIONAL ORIGIN DISABILITY

CIRCUMSTANCES OF ALLEGED VIOLATION

Sexual Orientation

DATE:	TYPED NAME/TITLE OF AUTHORIZED NMHRD OFFICIAL: Francie Cordova, Director	SIGNATURE:
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I hereby certify that I mailed/served the original of this Notice to the addressee above.

DATE: 1/8/07 **NMHRD EMPLOYEE (SIGNATURE):** 

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

06-12-20-0685

New Mexico Dept of Labor, Human Rights Division

and EEOC

State or local Agency, if any

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

Ms. Vanessa Willock

Home Phone (Incl. Area Code)

(505) 463-2374

Date of Birth

03-17-1967

Street Address

City, State and ZIP Code

3039 Prenda De Plata N.W., Albuquerque, NM 87120

Named is 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

ELANE PHOTOGRAPHY

No Employees, Members

Under 15

Phone No. (Include Area Code)

(505) 850-2313

Street Address

City, State and ZIP Code

2912 CUERVO DR. NE, Albuquerque, NM 87110

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)
Public Accommodations **Sexual Orientation**

DATE(S) DISCRIMINATION TOOK PLACE

Earliest

Latest

11-21-2006

11-28-2006

CONTINUING ACTION

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

I. STATEMENT OF HARM: On or about ^{September} ~~November~~ 21, 2006 I contacted Elane Photography to inquire about their services for my upcoming commitment ceremony. I received an email back which stated that the company only photographs traditional weddings. On November 28, 2006 I wrote back to ask for clarification on what they meant, and I received an email back on November 28, 2006 which stated "we do not photograph same sex weddings."

II. RESPONDENT'S REASON FOR ADVERSE ACTION: I was not given a reason for the harm as alleged.

STATEMENT OF DISCRIMINATION: I BELIEVE I HAVE BEEN DISCRIMINATED AGAINST BECAUSE OF MY SEXUAL ORIENTATION IN VIOLATION OF THE NEW MEXICO HUMAN RIGHTS ACT.

JP

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.

NOTARY - When necessary for State and Local Agency Requirements

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

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

12/18/06
 Date

Vanessa Willock
 Charging Party Signature

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
 (month, day, year)

RESPONDENT'S ACCEPTANCE / REJECTION OF MEDIATION

CHARGE NUMBER: HRD #06-12-20-0685

CHARGING PARTY: Vanessa Willock

RESPONDENT: Elane Photography

_____ NO I DO NOT WANT THIS CHARGE CONSIDERED FOR MEDIATION

_____ YES I WANT THIS CHARGE CONSIDERED FOR MEDIATION. THESE ARE THE DATES I AM AVAILABLE FOR MEDIATION DURING THE NEXT 45 DAYS _____ I WILL BE CONTACTED WHEN A MEDIATION DATE HAS BEEN CONFIRMED IF THE COMPLAINANT AGREES TO PARTICIPATE IN THIS PROGRAM.

RESPONDENT'S SIGNATURE

DATE

TELEPHONE NUMBER

CONTACT PERSON FOR RESPONDENT

Jordan Lorence
NAME (PRINT)

Attorney
TITLE (PRINT)

Alliance Defense Fund
COMPANY (PRINT)

15333 N. Pima Rd. Suite 165
ADDRESS (PRINT)

Scottsdale, AZ 85260
CITY, STATE AND ZIP CODE

480-388-8053
TELEPHONE NUMBER

480-444-0024
FAX NUMBER

****Please return within 10 days of receipt either by mail or Fax to (505) 827-6878****

THE MEDIATION SESSION IS NOT TO DETERMINE THE MERITS OF THE COMPLAINT OR TO DETERMINE FAULT

HRD MEDIATION FACT SHEET

WHAT IS MEDIATION

Mediation is a Process of alternative dispute resolution used by many agencies and courts in a manner to resolve disputes without going through lengthy hearings or investigations.

Mediation is strictly voluntary. If either party declines to mediate, the case is then referred to investigation.

Refusing to mediate does not change the state of the charge nor does it imply non-cooperation.

ADVANTAGES TO MEDIATION

Mediation is quick. Mediations can be scheduled within a matter of weeks rather than months for an investigation to be completed. Because mediation can resolve a dispute rather quickly, the harm, if any, is diminished.

The Mediation conference is strictly confidential. Information shares by the parties may not be used in the investigation nor divulged for any other purposes. Additionally, the contract is also confidential. Contrary, after an investigation and a determination have been made, the record becomes public.

You control the mediation outcome. If you do not agree with the resolution purposed, you can decline it. Contrary, after an investigation, the director makes a determination. You have no say as to the outcome!

Mediation is free. Because the Human Rights Division utilizes its own mediators. There is no cost to either party.

Mediation gives each party a chance to describe his or her perception of the situation and to present options for resolution of the dispute.

YOUR RESPONSIBILITIES

Both Parties are asked to suggest reasonable solutions to the matter. The Complainant will be asked to make a reasonable offer and the Respondent will be asked to make a good-faith counter offer.

You must be ready and willing to make a decision to resolve the issue and you must have the authority to make a decision and sign a Settlement Agreement.

You may bring an attorney, if you so desire. Mediation sessions are informal and legal representation is not required. If you wish legal representation, have your attorney contact the mediator prior to the session with an Entry of Appearance or other letter of representation.

ROLE OF MEDIATOR

The mediator's job is to facilitate the process by helping both parties reach a resolution. The mediator is not an advocate for the Complainant or for the Respondent and will remain neutral in the process.

The mediator may suggest ideas for resolution, however, the parties, themselves, make the final decision.

The mediator may help in drafting the Settlement Agreement.

RESULTS OF MEDIATION

When a mediation session results in an agreement, a Settlement Agreement is filed with the division. After the division is convinced that the terms of the Settlement Agreement have been met, the case is then closed.

If either party violates the Settlement Agreement, the division may continue with its investigation or it may ask that the Attorney General enforce the agreement.

The Human Rights Division has been promoting mediation as a viable and cost-effective alternative to lengthy investigation and litigation. It is worth your while to attempt mediation. If you have any questions or concerns about the process, you may call the Human Rights Division at 1-800-566-9471 (in state only) or (505) 827-5351.