

BROWARD COUNTY ELECTED OFFICIAL CODE OF ETHICS CHARITABLE CONTRIBUTION
FUNDRAISING DISCLOSURE FORM

Name of Elected Official: Lesa Peermay

Title: Commissioner

Governmental Entity Served: Margate

Name of the charitable organization for which you are soliciting funds:

Pony Jail + Ball Tomorrow Rainbow

Event (if any) for which the funds were solicited, including date of event:

Shared on face book 10/14/16

Name of each individual or entity that requested that you engage in the charitable solicitation, if any:

Nora Rupert

Signature of Elected Official: Lesa Peermay

Date: _____