

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

Name of Elected Official: Leslie Leerman

Title: Commissioner

Governmental Entity Served: M Argall

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

Duckhaven

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

8/2/14 Party

Name of each individual or entity that promoted the solicitation, if any:

None

Signature of Elected Official: Leslie Leerman

Date: 7/7/15