

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

Name of Elected Official: Lesa Peerman

Title: Commissioner

Governmental Entity Served: M Argate

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

M Argate All Stars Boards

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

Face book fast 6 fund June & July 2015

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

None

Signature of Elected Official: Lesa Peerman

Date: 7/7/15