

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

Name of Elected Official: Tommy Ruzzano

Title: Commissioner

Governmental Entity Served: Mangate

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

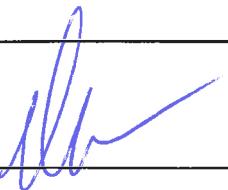
Mangate All Stars

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

Baseball All Star Tournament in ~~July~~^{Th.} 2018-
August 2018

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

Self

Signature of Elected Official: 

Date: 6/18/18