BROWARD COUNTY ELECTED OFFICIAL CODE OF ETHICS OUTSIDE/CONCURRENT EMPLOYMENT DISCLOSURE FORM FOR MUNICIPAL ELECTED OFFICIALS

If this form amends a previously filled form, please check this box	Signature of Elected Official:		St. Thomas Adminas School	American Hewitale School	Name of Elected Official: \(\lambda \cdot
	Solo	Under \$1,000 \$1,000 - \$5,000 \$5,001 - \$10,000 \$10,001 - \$25,000 \$25,001 - \$50,000 \$50,001 - \$100,000 Over \$100,000 Exact Amount	\$1,000 - \$5,000 \$5,001 - \$10,000 \$10,001 - \$25,000 \$25,001 - \$50,000 \$50,001 - \$100,000 Over \$100,000 Exact Amount	Wnder \$1,000 \$1,000 - \$5,000 \$5,001 - \$10,000 \$10,001 - \$25,000 \$25,001 - \$50,000 \$50,001 - \$100,000 Over \$100,000 Exact Amount	1: Sorty C Remuneration received during covered year Please state exact amount or check applicable box
	Date: 7-11-19	Did you receive any direct employer contribution to retirement from this employer during the reporting period? Yes INO If yes, was this amount incuded in the exact remuneration amount or range disclosed in the prior column? Yes INO	contribution to retirement from this employer during the reporting period? Yes KNO If yes, was this amount incuded in the exact remuneration amount or range disclosed in the prior column?	you receive any direct inbution to retirement for including the reporting perfect to the tribution of the reporting perfect to the tribution of the prior column? The prior column?	Direct employer contributions to retirement