CITY OF CORAL SPRINGS

BROWARD COUNTY CODE OF ETHICS DISCLOSURE FORM

City of Coral Springs Commissioner CLAUDETTE BALCK

CAMPAIGN FUNDRAISING FOR OTHER CANDIDATES

Name of the candidate for which you are soliciting campaign contributions:
JOY CARTER

Location and date of any and all associated campaign events:
6/25/14 10100 N. Sample Rd. Coral Springs, FL 33065
7/30/14 2758 N. UNIVERSITY DR. Coral Springs, FL 33065
I ATTENDED these 2 EVENTS I SPOKE ON behalf of the Candidate.

Name(s) and contribution amount(s) of any individual(s) who provided contributions to you, either directly or indirectly, for delivery to the candidate:

Name of Contributor	Amount Contributed
UNKNOWN	