

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

Name of Elected Official: Joy Lynn Carter

Title: City Commissioner, Seat 5

Governmental Entity Served: City of Coral Springs

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

- The Friendship Initiative

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

Dinner With Friends - February 22nd 5-9 pm Pizza Time Cafe, Parkland

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

Jeb Neiwood

Signature of Elected Official: _____

Date: February 24, 2017

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

- His House Children's Home and Mutli-Care Services

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

Women Empowerment Seminar - February 23rd 5-8 pm Colony West Country Club

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

Kim Slapikis - Kids of Love

Signature of Elected Official: _____

Date: February 24, 2017