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

Name of Elected Official: Ronald Jacobs
Calendar year covered by disclosure form: 2,018

<table>
<thead>
<tr>
<th>Name of outside or concurrent employer</th>
<th>Remuneration received during covered year</th>
<th>Direct employer contributions to retirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td>☐ Under $1,000</td>
<td>Did you receive any direct employer contribution to retirement from this employer during the reporting period?</td>
</tr>
<tr>
<td></td>
<td>☐ $1,000 - $5,000</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td></td>
<td>☐ $5,001 - $10,000</td>
<td>If yes, was this amount included in the exact remuneration amount or range disclosed in the prior column?</td>
</tr>
<tr>
<td></td>
<td>☐ $10,001 - $25,000</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td></td>
<td>☐ $25,001 - $50,000</td>
<td>If yes, was this amount included in the exact remuneration amount or range disclosed in the prior column?</td>
</tr>
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<td></td>
<td>☐ $50,001 - $100,000</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td></td>
<td>☐ Over $100,000</td>
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<td>☐ Exact Amount</td>
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Signature of Elected Official: ____________________________ Date: 11/05/2019

If this form amends a previously filled form, please check this box ☐