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

Name of Elected Official: Pamela Beasley-Pittman

Calendar year covered by disclosure form: 2,025

Name of outside or concurrent employer	Remuneration received during covered year Please state exact amount or check applicable box	Direct employer contributions to retirement
N/A	☐ 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 ______	Did you receive any direct employer contribution to retirement from this employer during the reporting period? ☐ Yes ☐ No If yes, was this amount incuded in the exact remuneration amount or range disclosed in the prior column? ☐ Yes ☐ No
N/A	☐ 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 ______	Did you receive any direct employer contribution to retirement from this employer during the reporting period? ☐ Yes ☐ No If yes, was this amount incuded in the exact remuneration amount or range disclosed in the prior column? ☐ Yes ☐ No
N/A	☐ 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 ______	Did you receive any direct employer contribution to retirement from this employer during the reporting period? ☐ Yes ☐ No If yes, was this amount incuded in the exact remuneration amount or range disclosed in the prior column? ☐ Yes ☐ No

Signature of Elected Official: [signature] Date: 07/02/2026

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