NORTH BROWARD HOSPITAL DISTRICT (NBHD) DBA BROWARD HEALTH LOBBYING REGISTRATION FORM

For what purpose are you using this form?
- [ ] New Registration
- [ ] Change to Profile
- [ ] Renewal

To which fiscal year does this form apply? 20 21

LOYBIST:

Kiefer Nathan A
Last Name First Name Middle
425 Wild Oak Circle, Largo, FL 32777
Mailing Address

Nathan.Kiefer@Regeneron.com
Email Address

(407) 848-7091 (407) 848-7091
Office Number Cell Number

Regeneron
Lobbying Firm on behalf of which lobbyist is representing principal (if any)

1 Rockwood Rd, Sleepy Hollow, NY 10591
Lobbying Firm's Mailing Address

914 847-7000
Telephone Number

Do you have any direct or indirect business association, partnership, or financial relationship or live in the same household with or are related to any Broward Health Board Member, Board Committee Member, employee, or agent?
- [ ] No
- [ ] Yes. State with whom and explain:

Have you ever been an employee of Broward Health?  
- [ ] No
- [ ] Yes,

Title
Date of Employment Date of Separation

Have you ever served as an NBHD Commissioner or on a Commission Sub-Committee?
- [ ] No
- [ ] Yes,

Date of Service Date of Separation

OATH

I do solemnly swear that all the foregoing facts are true and correct.

Nathan Kiefer
Original Signature of Lobbyist

Provide the names, business address, telephone number and area of interest of each principal represented.

PRINCIPAL #1

Principal Name

1 Rockwood Rd, Sleepy Hollow, NY 10591
Principal Mailing Address

914 847-7000
Principal Telephone Number

Healthcare/Acute Dermatological Areas of Interest/General & Specific Subject Matter

PRINCIPAL #2

Principal Name

Principal Mailing Address

Principal Telephone Number

Areas of Interest/General & Specific Subject Matter

PRINCIPAL #3

Principal Name

Principal Mailing Address

Principal Telephone Number

Areas of Interest/General & Specific Subject Matter

STATE OF FLORIDA
COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me this 30 day of
November, 20 20 by Nathan Kiefer

(Signature of Notary Public - State of Florida)

(Designation of Notary Public - State of Florida)

Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known OR Produced Identification

Type of Identification Produced FILED IN PERSON
Principal Authorization Form

Authorization to Represent the Principal

Type or print the principal represented and name of lobbyist as they are shown on the registration form, also, describe the main business. This authorization to represent the principal before the North Broward Hospital District dba Broward Health for this lobbyist will be carried forward each calendar year if the renewal form submitted by this lobbyist indicates "yes" to renew for the next year. Cancellation of a lobbyist's registration by the principal must be provided by written notice. Cancellation forms can be found at www.browardhealth.org.

Regeneron Healthcare Solutions hereby authorizes Nathan Kieper
Principal Name

Biopharmaceutical production and sales

Description of Principal's Main Business

Signature of Principal / Principal's Representative
Katherine Danvers

Print Principal Name / Principal's Representative
Sr. Manager, HR Compliance

Print Title of Principal / Principal's Representative
November 20, 2020

Date

Attach this authorization to your registration form.