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 20

LOBBYIST:

Scocchera Jason Michael
Last Name First Name Middle

10350 SW 50th Ct Cooper City, Florida 33328
Mailing Address

Email Address: jason.m.scocchera@medtronic.com

Office Number 962-5398

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

Lobbying Firm's Mailing Address

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.

Jason Michael Scocchera
Original Signature of Lobbyist

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

PRINCIPAL #1 Medtronic, Inc.
Principal Name

710 Medtronic Parkway, LC370
Principal Mailing Address

Minneapolis, Minnesota 55432-5604
Principal Telephone Number

All matters affecting the healthcare industry and Medtronic products
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

Sworn to (or affirmed) and subscribed before me this 4th day of July, 20 20

by

Meredith Ennis

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known  ☐ OR Produced Identification

Type of Identification Produced

MEREDITH ENNIS
Notary Public State of Florida
Bondsman Public Notary Public Underwriters