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

(SEE BACK FOR INSTRUCTIONS)

For what purpose are you using this form?

☐ New Registration ☐ Change to Profile ☑ Renewal

To which fiscal year does this form apply? 20 22

LOBBYIST:

McCoy — Last Name
Martha — First Name
Middle

2701 NE 30th Street, Fort Lauderdale, FL, 33306
Mailing Address

martha_mccoy@baxter.com
Email Address

( ) Office Number
(954) 610-4659 Cell Number

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.

Martha McCoy
Original Signature of Lobbyist

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

PRINCIPAL #1

Baxter Healthcare Corporation
Principal Name

One Baxter Parkway
Principal Mailing Address

Deerfield, IL, 60015

( ) 404-217-7618
Principal Telephone Number

Baxter Healthcare 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 Broward

Sworn to (or affirmed) and subscribed before me this 16th day of June, 2022 by Martha McCoy.

Mitchell H. Bloom
(Signature of Notary Public--State of Florida)

Mitchell H. Bloom
(Print, Type, or Stamp Commissioned Name of Notary Public)

Mitchell H Bloom
Notary Public
State of Florida
My Commission Expires 11/05/2025
Commission No. HH 194126

Personally Known ____ OR Produced Identification ✓

Type of Identification Produced FL Driv Licnse