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

BROWARD HEALTH

(SEE BACK FOR INSTRUCTIONS)

For what purpose are you using this form?

[X] New Registration [ ] Change to Profile [ ] Renewal

To which fiscal year does this form apply? 20 _____

LOBBYIST:

Slayter — Last Name
Jade — First Name
D — Middle

200 Pier 4 Blvd, Boston, MA 02210 — Mailing Address

Jade.slayter@servier.com — Email Address

(888) 788 1735 — Office Number
(305) 793-5615 — Cell Number

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

200 Pier 4 Blvd, 7th Fl Boston MA 02210 — Lobbying Firm's Mailing Address

(888) 788 1735 — 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?

[X] No [ ] Yes. State with whom and explain: _____

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

Title _____ Date of Employment _____ Date of Separation _____

Have you ever served as an NBHD Commissioner or on a Commission Sub-Committee?

[X] No [ ] Yes, Date of Service _____ Date of Separation _____

OATH

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

Original Signature of Lobbyist

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

PRINCIPAL #1

Servier Pharmaceuticals — Principal Name

200 Pier 4 Blvd, 7th Fl — Principal Mailing Address

Boston, MA 02210

(888) 788-1735 — Principal Telephone Number

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 MIAMI-DADE

Sworn to (or affirmed) and subscribed before me this 4th day of January, 2022 by JADE SLAYTER

(Signature of Notary Public--State of Florida)

C. RODRIGUEZ

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

CLARISSA A. RODRIGUEZ
MY COMMISSION # HH 053232
EXPIRES: December 30, 2024
Bonded Thru Notary Public Underwriters

Personally Known X OR Produced Identification _____

Type of Identification Produced _____

NORTH BROWARD
HOSPITAL DISTRICT

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

Cindy Anne Kurak hereby authorizes Jade Stuyler

Principal Name — Lobbyist's Name

Sales - Servier Pharmaceuticals

Description of Principal's Main Business

Kurak

Signature of Principal or Principal's Representative

Cindy Anne Kurak

Print Principal Name / Principal's Representative

Sales Director

Print Title of Principal / Principal's Representative

2-1-2022

Date

Attach this authorization to your registration form.