



# 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 23/24

LOBBYIST:

Monaco Anthony  
Last Name First Name Middle

14 Graversham Drive, Marlboro NJ 07746  
Mailing Address

amonaco@kpmg.com  
Email Address

( ) 718-344-1241 ( ) 718-344-1241  
Office Number 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.**

[Signature]  
Original Signature of Lobbyist

MARA D RIOS COLLAZO  
Notary Public  
State of New Jersey  
My Commission Expires July 22, 2026  
I.D.# 5016972

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

KPMG LLP - Anthony Monaco

PRINCIPAL #1 Anthony Monaco  
Principal Name  
227 N Bronough Street STE 7500, Tallahassee FL, 32301  
Principal Mailing Address

( ) 718.344.1241 Meetins to discuss services  
Principal Telephone Number to assist NBHD

\_\_\_\_\_  
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~~ New Jersey  
COUNTY OF MONMOUTH

Sworn to (or affirmed) and subscribed before me this 6 day of Sept, 2023 by Anthony Monaco

\_\_\_\_\_  
(Signature of Notary Public - State of ~~Florida~~ New Jersey)

Maria D. Rios Collazo  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known \_\_\_\_\_ OR Produced Identification   
Type of Identification Produced NDL

## 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](http://www.browardhealth.org)

KONG - LLC

Principal Name

hereby authorizes

Anthony morales

Lobbyist's Name

Professional Services

Description of Principal's Main Business

Anthony morales

Signature of Principal or Principal's Representative

Anthony morales

Print Principal Name / Principal's Representative

Partner

Print Title of Principal / Principal's Representative

September 6, 2023

Date

Attach this authorization to your registration form.