

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 LOBBYIST: Richardson Kentaura Last Name First Name Middle 8680 Baymeadows Rd E Apt 312 Mailing Address	Provide the names, business address, telephone number and area of interest of each principal represented. IQVIA CSMS US Inc
kentaura.richardson@iqvia.com Email Address ()	Principal Telephone Number Areas of Interest/General & Specific Subject Matter PRINCIPAL #2 Principal Name Principal Mailing Address
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	Principal Vialing Address (
the same household with or are related to any Broward Health Board Member, Board Committee Member, employee, or agent? Yes. State with whom and explain:	Principal Mailing Address (
Have you ever been an employee of Broward Health? Italian	STATE OF FLORIDA COUNTY OF DUVA Sworn to (or affirmed) and subscribed before me this 3 day of 2023 by Kentaura Trichards (Signature of Notary Public State of Florida) ALA BOES (Signature of Notary Public State of Florida) ALA BOES Notary Public State of Florida Commission# GG 915320 Commission# Expres Dec. 8, 2023
I do solemnly swear that all the foregoing facts are true and correct. Solution of Lobbyist	(Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known OR Produced Identification VIIII