



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 25

LOBBYIST:

Last Name: Wegman First Name: Trish Middle: _____
 Mailing Address: 4320 Hawthorn Ave PB6 FL 33410
 Email Address: trish.wegman@ipson.com
 Office Number: _____ Cell Number: 561 214 0051

Lobbying Firm on behalf of which lobbyist is representing principal (if any): Ipsen Biopharmaceuticals
 Lobbying Firm's Mailing Address: 1 Main St Cambridge MA 02142
 Telephone Number: 617 679 8500

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

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

Trish Wegman
 Original Signature of Lobbyist

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

PRINCIPAL #1 Ipsen Biopharmaceuticals
 Principal Name: Ipsen Biopharmaceuticals
 Principal Mailing Address: 1 Main St Cambridge MA 02142
 Principal Telephone Number: 617 679 8500
 Areas of Interest/General & Specific Subject Matter: Pharmaceuticals

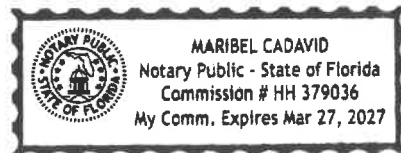
PRINCIPAL #2 _____
 Principal Name: _____
 Principal Mailing Address: _____
 Principal Telephone Number: _____
 Areas of Interest/General & Specific Subject Matter: _____

PRINCIPAL #3 _____
 Principal Name: _____
 Principal Mailing Address: _____
 Principal Telephone Number: _____
 Areas of Interest/General & Specific Subject Matter: _____

STATE OF FLORIDA
 COUNTY OF palm beach
 Sworn to (or affirmed) and subscribed before me this 19 day of August, 2024 by patricia M. Wegman

Maribel C
 (Signature of Notary Public—State of Florida)
Maribel Cadavid
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification
 Type of Identification Produced: Florida Driver License



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

Ipsen Biopharmaceuticals, Inc

Principal Name

hereby authorizes

Trish Wegman

Lobbyist's Name

Pharmaceuticals

Description of Principal's Main Business



Signature of Principal or Principal's Representative

Heather DeRue Biddle

Print Principal Name / Principal's Representative

Region Business Director

Print Title of Principal / Principal's Representative

August 19, 2024

Date

Attach this authorization to your registration form.