Public Sector Authorization to attend event

Authorization to attend the Hyland Healthcare Customer Appreciation Reception located at Topgolf Las Vegas, 4627 Koval Lane, Las Vegas, NV 89109, on Wednesday, August 11, 2021 from 6:30 – 9:30 p.m. (the “event”) during the HIMSS21 conference.

There is no charge for attendance. At the event, Hyland is offering food, refreshments and TopGolf games at no expense for the attendees. The food, refreshments and to play TopGolf have an estimated fair market value (“FMV”) of $45.00 per attendee. You understand and agree that your attendee is NOT eligible to win any prizes for playing TopGolf. This does not include travel, lodging, or any other incidental expenses your attendee(s) may incur in order to attend the event. Hyland will not pay for or reimburse any of such expenses. Hyland offers this benefit to the Organization and not to any attendee or any other official, employee or representative personally.

This authorization form confirms that the Organization identified below has approved the attendee(s) listed below to partake in the event and that the attendance by such attendee(s) named below is permittted under your Organization’s applicable gifts and ethics rules and any statute, law, or regulation related to gifts, meals, entertainment and ethics, and is authorized by the ethics officer, designated executive/officer/department head, or responsible attorney of the Organization. Please return a copy of the form to amy.oliver@hyland.com.

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approver Name & Title (Print)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approver Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designated Attendees(s) Name and Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*\*The attendee(s) should not be the “Approver”, but should be an individual for the Organization with authority to approve.*