

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813
 or P.O. BOX 616, HONOLULU, HAWAII 96809
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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM STATE OF HAWAII
 STATE ETHICS COMMISSION
 (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Noe,	Nancy	Fay	(510) 248-2362
MAILING ADDRESS (Street)			FAX (510) 248-2366
6500 Paseo Padre Parkway			EMAIL
			nnoe@its.jnj.com
(City)	(State)	(Zip Code)	
Fremont	CA	94555	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Johnson & Johnson			(732) 524 3066
MAILING ADDRESS (Street)			FAX (732) 524 3005
One Johnson & Johnson Plaza			EMAIL
(City)	(State)	(Zip Code)	
New Brunswick	NJ	08933	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Nancy Noe			(510) 248-2362
MAILING ADDRESS (Street)			FAX (510) 248-2366
6500 Paseo Padre Parkway			EMAIL
			nnoe@its.jnj.com
(City)	(State)	(Zip Code)	
Fremont	CA	94555	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input checked="" type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Nancy Roe

(Signature of Lobbyist)

1/22/13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Katherine Procida, Executive Director

NAME OF ORGANIZATION (if applicable)

Johnson & Johnson

TELEPHONE

(916) 443-0104

MAILING ADDRESS (Street)

1215 K Street

FAX (916) 443-0318

EMAIL

kprocida@its.jnj.com

(City)

Sacramento

(State)

CA

(Zip Code)

95814

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Katherine Procida

(Signature of Authorizing Officer or Person Represented)

1/22/13

(Date)