



HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, HONOLULU, HAWAII 96813
 or P.O. BOX 616, HONOLULU, HAWAII 96809
 TEL: (808) 587-0460 FAX: (808) 587-0470
 email: ethics@hawaiiethics.org
 Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY
 16 FEB 25 AM 11:14
 STATE OF HAWAII
 STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Mejia	Manuel	Nepomuceno	808-537-4508
MAILING ADDRESS (Street)			FAX 808-545-2019
923 Nuuanu Ave.			EMAIL stangonan@tnc.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	
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
The Nature Conservancy			808-537-4508
MAILING ADDRESS (Street)			FAX 808-545-2019
923 Nuuanu Ave.			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Enrico Gomez			808-587-6212
MAILING ADDRESS (Street)			FAX 808-545-2019
923 Nuuanu Ave.			EMAIL rgomez@tnc.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input 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 type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" 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.

Manuel Mejia 2/8/16
 (Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Mark R. Fox		Director of External Affairs	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
The Nature Conservancy		808-587-6234	
MAILING ADDRESS (Street)		FAX 808-545-2019	
923 Nuuanu Ave.		EMAIL mfox@tnc.org	
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	

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

Mark R. Fox 2/8/16
 (Signature of Authorizing Officer or Person Represented) (Date)