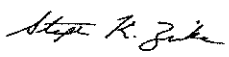
DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)1.

	NON-ELECTED PUBLIC EMPLOYEE INFORMATION
Name of **non-elected** public employee:	Stephen Zrike
Title/ Position	Secretary of Education
Agency/ Department	Executive Office of Education [EOE]
Agency address:	1 Ashburton Place #1403 Boston MA 02108
Office phone:	[redacted]
Office e-mail:	Stephen.K.Zrike@mass.gov
Write an X to confirm each statement.	I am filing this disclosure because: _X__ I am going to engage in an activity that serves a legitimate public purpose, i.e., it is intended to promote the interests of the Commonwealth, a county or a municipality; and _X__ A non-public entity (but not a lobbyist) has offered to reimburse, waive or pay travel expenses and costs worth more than $50.
	ACTIVITY THAT SERVES A LEGITIMATE PUBLIC PURPOSE
Describe the activity which is the reason for traveling.	Dinner event for superintendents as part of the Harvard Public Education Leadership Project (PELP) Institute
Describe your participation in the activity.	Opportunity for the Secretary to connect with Superintendents, as well as the chair of the Public Education Leadership Project
Date, time and location of activity.	Harvest 44 Brattle St. Cambridge, MA 02138 7/29/26 – 7pm
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	Attending the Event will allow me to connect and facilitate relationships with superintendents from across the State and engage with them on issues affecting their districts and communities.

	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	Jennifer Cheatham Senior Lecturer on Education Faculty Chair, Field Engagement Co-Chair of the Public Education Leadership Project
Address of person or organization.	Harvard Graduate School of Education 13 Appian Way, Office 415 Cambridge, MA 02138
Provide information in as much detail as possible:	***Itemization and explanation of amounts offered:***
Transportation:	*Air, train, bus, and taxi fare and rental car hire, etc.*
Lodging:	*Overnight accommodation.*
Meals:	*Breakfast, lunch, dinner, special events.* $100
Admission:	*Registration, admission, tickets, etc.*
Other (please list):	*Refreshment, instruction, materials, entertainment, etc.*
Total:	$100
Write an X beside any statement that applies.	**____ I have attached the relevant itinerary.** **____ I have attached the relevant agenda.**
Employee signature:	
Date:	7.23.2026

Attach additional pages if necessary.

Complete the disclosure and submit it to your appointing authority.

DETERMINATION BY APPOINTING AUTHORITY

	APPOINTING AUTHORITY INFORMATION
Name of Appointing Authority:	Maura Healey (by Chief of Staff Kate Cook)
Agency and Title/Position:	Governor
Agency address:	Office of the Governor
Office phone:	(617)724-4000
Employee who filed the disclosure:	Stephen Zrike
	DETERMINATION
To give approval, check <u>both</u> statements.	Upon consideration of the facts disclosed by the employee above, I find that: _x_ Acceptance of the reimbursement, waiver or payment of travel expenses will serve a legitimate public purpose, i.e., it will promote the interests of the Commonwealth, a county or a municipality; AND _x_ Such public purpose outweighs any special non-work related benefit to the employee or the person providing the reimbursement, waiver or payment.
Reason that the employee's travel or attendance will serve a legitimate public purpose:	As stated in the disclosure.
Appointing Authority signature:	Kate Cook
Date:	7/24/24

Attach additional pages if necessary.

The appointing authority should maintain the disclosure as a public record and give a copy of any signed determination to the employee.