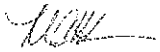
DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE AS REQUIRED BY 930 CMR 5.08(2)(d)1.

	NON-ELECTED PUBLIC EMPLOYEE INFORMATION
Name of **non-elected** public employee:	Melissa Hoffer
Title/ Position	Climate Chief
Agency/ Department	Office of Climate Innovation and Resilience Office of Governor Maura Healey
Agency address:	1 Ashburton Place, Boston MA 16th Floor, Suite 1619
Office phone:	[redacted]
Office e-mail:	Melissa.Hoffer@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.	I will be travelling to attend a climate resiliency summit in Nairobi, Kenya. This is one in a series of global follow-ups in regions within the US and across the world to last year's Vatican Climate Summit.
Describe your participation in the activity.	I will attend the conference and will give remarks and participate in a structured dialogue on the first day of the conference.
Date, time and location of activity.	June 30th – July 1st (full day conference) World Agroforestry Center (United Nations Avenue, Gigiri PO Box 30677, Nairobi, 00100, Kenya)
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	Attending this conference will strengthen the Commonwealth's regional and global ties to other sub-national governments who are tackling the climate crisis. This will facilitate idea sharing and relationship building across regional and national boundaries, particularly focused on building resilience to the impacts of climate change.
	TRAVEL EXPENSES

Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	UMass Boston The MacArthur Foundation
Address of person or organization.	UMass Boston 100 Morrissey Blvd. Boston, MA 02125 The MacArthur Foundation 140 S Dearborn St #1200, Chicago, IL 60603
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.* Approximately $1537 (Flights)
Lodging:	*Overnight accommodations.* $414 (3 nights, hotel)
Meals:	*Breakfast, lunch, dinner, special events.* Assumed to be greater than $50 (general refreshments, etc.)
Admission:	*Registration, admission, tickets, etc.* N/A
Other (please list):	*Refreshment, instruction, materials, entertainment, etc.* N/A
Total:	Approximately $2000 - $2500
Write an X beside any statement that applies.	**____ I have attached the relevant itinerary.** **____ I have attached the relevant agenda.**
Employee signature:	
Date:	6/18/25

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, Office of the Governor
Agency address:	State House, Room 360, Boston, MA
Office phone:	(617) 724-4000
Employee who filed the disclosure:	Melissa Hoffer
	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:	6/24/25

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.