**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: | Corey Welford |
| Title/ Position | Senior Strategist |
| Agency/ Department | Office of the Governor |
| Agency address: | 24 Beacon Street, Boston, MA 02133 |
| Office phone: | (617) 725-4000 |
| Office e-mail: | Corey.Welford@mass.gov |
| **Write an X to confirm each statement**. | I am filing this disclosure because:<br><br>_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<br><br>_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 am traveling to the Democratic Governors Association's Senior Staff Retreat to connect with my senior staff counterparts from other states and discuss current policy issues. |
| Describe your participation in the activity. | I will attend networking receptions and panel discussions with other senior staff. |
| Date, time and location of activity. | Friday, March 7, 2025 – Sunday, March 9, 2025<br>New Orleans, LA |
| Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality. | While at the retreat, I will build relationships with senior staffers from other state governments from across the country. I will also participate in a series of solution-driven policy conversations. |
| | **TRAVEL EXPENSES** |

| | |
|---|---|
| Identify the person or organization that offered to reimburse, waive or pay your travel expenses. | Democratic Governors Association |
| Address of person or organization. | Democratic Governors Association<br>7920 Sunset Boulevard<br>Los Angeles, CA 90046 |
| **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.*<br><br>$498.59 |
| Lodging: | *Overnight accommodations.*<br><br>Hotel: $508 (2 nights) |
| Meals: | *Breakfast, lunch, dinner, special events.* |
| Admission: | *Registration, admission, tickets, etc.* |
| Other (please list): | *Refreshment, instruction, materials, entertainment, etc.* |
| Total: | $1,006.59 |
| **Write an X beside any statement that applies.** | **____ I have attached the relevant itinerary.**<br><br>**____ I have attached the relevant agenda.** |
| Employee signature: | /s/ Corey Welford |
| Date: | 03/07/2025 |

**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: | Office of the Governor/Governor |
| Agency address: | 24 Beacon Street, Boston, MA 02133 |
| Office phone: | (617) 725-4000 |
| Employee who filed the disclosure: | Corey Welford |
| | **DETERMINATION** |
| **To give approval, check <u>both</u> statements.** | Upon consideration of the facts disclosed by the employee above, I find that:<br><br>_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<br><br>_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: | Corey will represent Massachusetts and demonstrate the Administration's commitment to connecting and collaborating with various state leaders on current issues. Corey will participate in a series of solution-driven policy conversations with counterparts from other states. |
| Appointing Authority signature: | /s/ Kate Cook |
| Date: | 03/07/2025 |

**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.**