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:	Patrick Tutwiler
Title/ Position	Secretary of Education
Agency/ Department	Executive Offices of Education [EOE]
Agency address:	1 Ashburton Place #1403 Boston MA 02108
Office phone:	[redacted]
Office e-mail:	patrick.tutwiler@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.	Hunt-Kean Leadership Fellows Conference
Describe your participation in the activity.	Joining with elected officials and senior-level policymakers from other states for a series of roundtables and presentations on education policy and smart and effective education agendas.
Date, time and location of activity.	Four Seasons Hotel 2800 Pennsylvania Avenue NW Washington, DC 12.11.2024 – 12.13.2024
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	Attending the Conference allowed me to connect and facilitate relationships with other senior staffers and state leaders from across the country and participate in a series of productive conversations around education policy.

	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	The Hunt Institute
Address of person or organization.	4000 Centregreen Way Suite 301 Cary, NC 27513
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.* $296.58
Lodging:	*Overnight accommodations.* $1,410.00
Meals:	*Breakfast, lunch, dinner, special events.*
Admission:	*Registration, admission, tickets, etc.*
Other (please list):	*Refreshment, instruction, materials, entertainment, etc.*
Total:	$1,706.58
Write an X beside any statement that applies.	**_X___ I have attached the relevant itinerary.** **_X___ I have attached the relevant agenda.**
Employee signature:	
Date:	11-12-24

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:	State House, Room 360, Boston, MA
Office phone:	(617) 724-4000
Employee who filed the disclosure:	Patrick Tutwiler
	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:	/s/Kate Cook
Date:	12/9/2024

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.