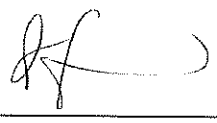
DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)1.

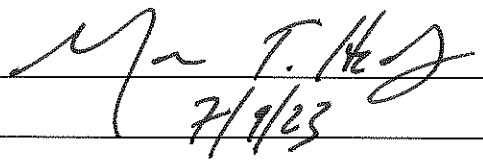
	NON-ELECTED PUBLIC EMPLOYEE INFORMATION
Name of **non-elected** public employee:	Patrick Tutwiler
Title/ Position	Secretary of Education
Agency/ Department	Executive Office of Education
Agency address:	1 Ashburton Place, Room 1403 Boston, MA 02108
Office phone:	[redacted]
Office e-mail:	Patrick.Tutwiler@mass.gov
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.	Education Commission of the States National Forum on Education Policy.
Describe your participation in the activity.	I will attend presentations and sessions over the course of this multi-day event and will network with education leaders from other states.
Date, time and location of activity.	July 12, 2023 11:30 a.m. - 5:30 p.m. July 13, 2023 8:30 a.m. – 5:30 p.m. July 14, 2023 8:30 a.m. – 11:00 a.m.
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	This event will provide an opportunity for thought leaders in the education space to connect and collaborate on solutions and innovations that address the most pressing issues in state education policy. Insights from these discussions may shape policy that will benefit the students of Massachusetts.

	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	Joel Moore Assistant Director Education Commission of the States
Address of person or organization.	700 Broadway Ste 810, Denver, CO 80203
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 accommodations.*
Meals:	*Breakfast, lunch, dinner, special events.*
Admission:	*Registration, admission, tickets, etc.* $950 registration fee has been waived for Secretary Tutwiler
Other (please list):	*Refreshment, instruction, materials, entertainment, etc.*
Total:	$950
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:	2023-6-27

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
Agency and Title/Position:	Governor
Agency address:	State House 24 Beacon Street Boston, MA 02108
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:	
Date:	7/9/23

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.