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:	Nurys Camargo
Title/ Position	Commissioner
Agency/ Department	Cannabis Control Commission
Agency address:	Union Station 2 Washington Street Worcester, Ma 01604
Office phone:	[redacted]
Office e-mail:	Nurys.camargo@cccmass.com
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 have been invited to attend and participate in a panel discussion **titled CannEvolution**. This event will be acquiring on May 4th, 2023, in New York City.
Describe your participation in the activity.	As a Massachusetts regulator, I will be a guest panelist and will focus on the important lessons learned, and what steps Massachusetts has taken to provide resources on cannabis education (steps we took to create educational and preventive materials through our public awareness campaign) the regulatory framework, and the challenges we have faced. My fellow participants include Chair of NYS Cannabis Control Board Tremaine Wright (representing New York state) and Commissioner Nash or Chair Houenou (representing New Jersey). Below are sample questions the host has provided: 1. Can you explain the process by which regulatory decisions are made? 2. Can you describe the organizational structure of the OCM/NJ CRC/CCC (staff/how decisions are made etc.) 3. What have been the biggest challenges to creating a regulatory framework or working within a regulatory framework that you

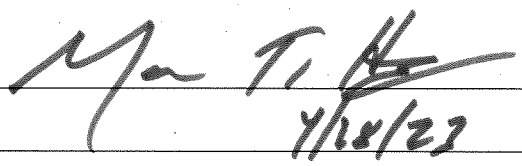
	have come across. What has surprised you? 4. What do you see as challenges that you are working on solving in response to the economics of the cannabis industry? 5. How do the regulators work in the industry to understand the unique aspects of the industry that business owners face? 6. What mechanisms do you have in place to communicate or answer questions of applicants or licensees?
Date, time and location of activity.	This event takes place on May 4th, from 12.00 pm to 5.30 pm. The keynote speakers will begin at 1.00 pm until 2.30 pm. Followed by an academia discussion until 3.30-4.00 pm.
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	As a panelist I will have the honor and privilege to present Massachusetts among other regulators to promote the Cannabis Control Commission's mission, and its evolution in a maturing industry.
	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	Renata Serban, Manager, Cannabis Advisory Services
Address of person or organization.	Citrincooperman 290 West Mount Pleasant Ave, Suite 3310, Livingston, NJ, 07039
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.* Air "presumed $100"
Lodging:	*Overnight accommodations.* Hotel "presumed $250"
Meals:	*Breakfast, lunch, dinner, special events.* Breakfast and Lunch "presumed $50"
Admission:	*Registration, admission, tickets, etc.* n/a

Other (please list):	*Refreshment, instruction, materials, entertainment, etc.* n/a
Total:	$400.00 "presumed to exceed" estimates for the airfare, hotel, and meals.
Write an X beside any statement that applies.	__X__ **I have attached the relevant itinerary (request form).** **____ I have attached the relevant agenda.**
Employee signature:	Nuria Camargo
Date:	April 18th, 2023

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:	Governor's Office, Attorney General's Office, Office of State Treasurer
Agency and Title/Position:	Governor (signing with authority for all appointing authorities)
Agency address:	State House, 24 Beacon St., Room 360, Boston MA 02133
Office phone:	617-725-4000
Employee who filed the disclosure:	Nurys Camargo
	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:	By attending the panel discussion, a legitimate speaking engagement, Nurys will establish and develop important relationships with regulators from other states and participate in a solutions-oriented conversation about cannabis education and the Massachusetts regulatory framework.
Appointing Authority signature:	
Date:	4/18/23

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.