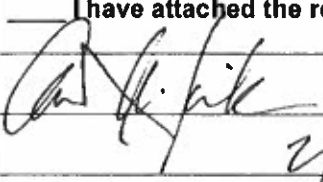


**DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)1.**

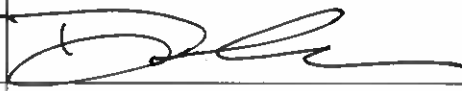
	NON-ELECTED PUBLIC EMPLOYEE INFORMATION
Name of non-elected public employee:	Carolyn Kirk
Title/ Position	Executive Director
Agency/ Department	Massachusetts Technology Collaborative
Agency address:	2 Center Plaza, Suite 200, Boston, MA, 02108
Office phone:	617-371-3999 ext 205
Office e-mail:	kirk@masstech.org
Write an X to confirm each statement.	I am filing this disclosure because: ☐ 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 ☒ 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 attend the TEDMED Conference in Boston, MA from March 2 nd to March 3 rd 2020. TEDMED's annual event brings the world together to focus on what's new and important in health and medicine. Attending TEDMED 2020 not only means experiencing inspiring TEDMED Talk live and in-person, but also becoming part of a unique and engaging community of public health leaders, clinicians, researchers, scientists, creators, innovators, and influencers.
Describe your participation in the activity.	I will attend the conference and network with national leaders in healthcare policy and digital health.
Date, time and location of activity.	5PM March 2, 2020- 11pm March 3 rd , 2020 Westin Boston Waterfront Hotel 425 Summer Street Boston, MA, 02210
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	As the lead state agency for the Governor's Digital Health Initiative, MassTech supports the work of the Initiative to grow and promote the digital health ecosystem in the Commonwealth. As the Executive Director at MassTech, I will attend this high level thought leadership event to network with national leaders in healthcare policy and digital health and to promote the benefits of working with the Massachusetts digital health ecosystem. Among the priorities of the Governor's Digital Health Council are "bringing a world-class digital health conference to Massachusetts." TEDMED is a world-class digital

	health conference and by participating and working with the organizers and participants, we can further the goals of the Governor's Digital Health Council.
	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	TEDMED
Address of person or organization.	2 High Ridge Park Stamford, CT 06905
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i>
Lodging:	<i>Overnight accommodations.</i>
Meals:	<i>Breakfast, lunch, dinner, special events.</i>
Admission:	<i>Registration, admission, tickets, etc.</i> \$4950 (registration fee includes breakfast, lunch, dinner, coffee, and snacks)
Other (please list):	<i>Refreshment, instruction, materials, entertainment, etc.</i>
Total:	\$4950
Write an X beside any statement that applies.	☐ I have attached the relevant itinerary. ☒ I have attached the relevant agenda.
Employee signature:	
Date:	2/20/2020

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:	Damon Cox
Agency and Title/Position:	Massachusetts Technology Collaborative Board of Directors, Chair of the Board
Agency address:	75 North Drive Westborough, MA 01581
Office phone:	(617) 788-3610
Employee who filed the disclosure:	Carolyn Kirk, Executive Director
DETERMINATION	
To give approval, check <u>both</u> statements.	Upon consideration of the facts disclosed by the employee above, I find that: ☒ 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 ☒ 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 participating in this conference, we are helping to meet and build relationships with national leaders in healthcare policy and digital health and to discuss opportunities for collaboration to strengthen the Massachusetts digital health ecosystem.
Appointing Authority signature:	
Date:	2/26/20

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.