AND CERTIFICATION BY HEAD OF CONTRACTING AGENCY RECEIVED AS REQUIRED BY G. L. c. 268A, § 7(b) SITATE ETHICS COMMISSION

	STATE EMPLOYEE INFORMATION 2012 AUG -2 AM 9:
Name of state employee:	Jeffrey A Simon
Title/ Position	Director
Fill in this box if it applies to you.	If you are a state employee because a state agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Massachusetts Recovery and Reinvestment Office
Agency Address	1 Ashburton Place Boston MA
Office phone:	617-979-8380
Office e-mail:	Jeffrey.simon@state.ma.us
	Check one: Elected orxx Non-elected
Starting date as a state employee.	February 2009
BOX # 1	ELECTED, COMPENSATED STATE EMPLOYEE I am an elected, compensated state employee, other than a state Senator or a state Representative.
Select either STATEMENT #1 or STATEMENT #2.	<u>STATEMENT #1</u> : I had one of the following financial interests in a contract made by a state agency before I was elected to my compensated state employee position. I will continue to have this financial interest in a state contract. OR
	STATEMENT #2: I will have a new financial interest in a contract made by a state agency.
Write an X beside your	My financial interest in a state contract is:
financial interest.	I have a non-elected, compensated state employee position A state agency has a contract with me.
	I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.
	I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.
DOV # 2	NON-ELECTED, COMPENSATED STATE EMPLOYEE
BOX # 2	I am a non-elected, compensated state employee.
Select either STATEMENT #1 or STATEMENT #2.	STATEMENT # 1: I had one of the following financial interests in a contract made by a state agency before I took a position as a non-elected state employee. I will continue to have this financial interest in a state contract.

Vrite an X	My financial interest in a state contract is:
beside your financial interest.	A state agency has a contract with me, but not an employment contract.
	I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.
	OR
	STATEMENT # 2: I will have a new financial interest in a contract made by a state agency.
	My financial interest in a state contract is:
	I have a non-elected, compensated state employee position.
	_xx A state agency has a contract with me.
	I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.
	I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.
	FINANCIAL INTEREST IN A STATE CONTRACT
Name and address of state agency that made the contract	State Treasurer
Please put in an X to confirm these facts.	"My State Agency" is the state agency that I serve as a state employee.
	The "contracting agency" is the state agency that made the contract.
	_x My State Agency is not the contracting agency.
	x_ My State Agency does not regulate the activities of the contracting agency.
	_x In my work for my State Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.
	x The contract was made after public notice or through competitive bidding.
FILL IN THIS BOX	ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE STATE AND YOU.
	- Please explain what the contract is for.
	This is a Massachusetts General Obligation bond issue date of 11/25/2008, due
OR THE BOX	9/01/20132. Coupon rate is 5%.
BELOW	
	ANSWER THE QUESTIONS IN THIS BOX
	IF THE CONTRACT IS BETWEEN THE STATE AND ANOTHER PERSON OR ENTITY.
	- Please identify the person or entity that has the contract with the state agency.
FILL IN	- What is your relationship to the person or entity?
FILL IN THIS BOX OR THE BOX	

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- 3 To 6	
What is your financial interest In the state contract?	- Please explain the financial interest and include the dollar amount if you know it. Owner
Date when you acquired a financial interest	July 19, 2012
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it. None
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	FOR A CONTRACT FOR PERSONAL SERVICES — Answer the questions in this box ONLY if you will have a contract for personal services with a state agency (i.e., you will do work directly for the contracting agency). I will have a contract with a state agency to provide personal services. The services will be provided outside my normal working hours as a state employee. The services are not required as part of my regular duties as a state employee. For these services, I will be compensated for not more than 500 hours during a calendar year.
Employee signature:	AM A.d.
Date:	1111 August 2.1012

Attach additional pages if necessary.

NOT A PERSONAL SERVICES CONTRACT -- File disclosure with:

State Ethics Commission One Ashburton Place, Room 619 Boston, MA 02108

SEE CERTIFICATION REQUIRED FOR PERSONAL SERVICES POSITIONS, BELOW.