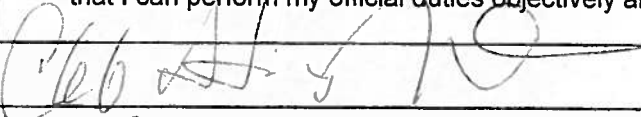


**REDACTED DISCLOSURE OF APPEARANCE OF CONFLICT OF INTEREST
AS REQUIRED BY G. L. c. 268A, § 23(b)(3)**

Name:	Charles B. Swartwood III
Title or Position:	Chairman
Agency/Department:	State Ethics Commission
Agency address:	1 Ashburton Place, Rm 619, Boston MA 02108
Office Phone:	(617) 371-9500
Office E-mail:	
	I am expected to perform my official duties as a state employee, and I have a relationship or affiliation with a person or organization involved. I am filing this disclosure to dispel the appearance that the person or organization could unduly enjoy my favor or improperly influence me when I perform my official duties, or that I would be likely to act or fail to act as a result of kinship, rank, position or undue influence of any party or person.
Describe the issue that is coming before you for decision or action.	Decision whether to terminate PI # 2013-18
What responsibility do you have for taking action or making a decision?	Participate in deciding whether to terminate a preliminary inquiry
Describe your relationship or affiliation with someone involved.	I believe that the subject of this inquiry, an elected official, represented me.
Optional: Facts indicating there is no need for concern about undue favoritism or improper influence.	
Write an X to confirm this statement.	☒ Taking into account the relationship or affiliation that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
Employee signature:	
Date:	12-20-12