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

	PUBLIC EMPLOYEE INFORMATION
Name of public	
employee:	Barbara A. Dortch-Okara
Title or Position:	Chair
Agency/Department:	State Ethics Commission
Agency address:	1 Ashburton Place, Rm 619, Boston MA 02108
Office Phone:	(617) 371-9500
Office E-mail:	n/a
	In my capacity as a state, county or municipal employee, I am expected to take certain actions in the performance of my official duties. Under the circumstances, a reasonable person could conclude that a person or organization could unduly enjoy my favor or improperly influence me when I perform my official duties, or that I am likely to act or fail to act as a result of kinship, rank, position or undue influence of a party or person.  I am filing this disclosure to disclose the facts about this relationship or affiliation and to dispel the appearance of a conflict of interest.
	APPEARANCE OF FAVORITISM OR INFLUENCE
Describe the issue that is coming before you for action or decision.	Matter No. 10-13-0208
What responsibility do you have for taking action or making a decision?	Discuss and vote on whether to permit Enforcement Division to amend preliminary inquiry
Explain your relationship or affiliation to the person or organization.	I know the respondent in this matter professionally, but the respondent is not a friend or social acquaintance.
How do your official actions or decision matter to the person or organization?	The affected person is the respondent in an Enforcement matter.
Optional: Additional facts – e.g., why there is a low risk of undue favoritism or improper influence.	
f you cannot confirm this statement, you should recuse yourself.	WRITE AN X TO CONFIRM THE STATEMENT BELOW.  X Taking into account the facts that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
mployee signature:	Smille
Date:	January 16, 2014