

**RECONCILIATION STATEMENT
AS REQUIRED BY 930 CMR 5.08(2)(d)3.**

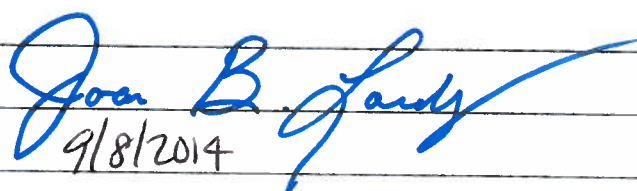
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STATE ETHICS COMMISSION

2014 SEP -8 PM 2:49

	PUBLIC EMPLOYEE INFORMATION
Name of employee:	State Senator Joan B. Lovely
Title/ Position	State Senator, 2nd Essex District
Agency/ Department	Massachusetts State Senate
Agency address:	State House, Rm. 215 Boston, MA 02133
Office Phone:	617-722-1410
Office E-mail:	joan.lovely@masenate.gov
	I previously filed a disclosure explaining that I accepted reimbursement, waiver or payment by a non-public entity (but not a lobbyist) of travel expenses related to an activity or speaking engagement that served a legitimate public purpose. I am filing this Reconciliation Statement because the actual amount of the travel expenses differed by more than \$50 from the amount I originally disclosed. I HAVE ATTACHED A COPY OF MY PREVIOUS DISCLOSURE.
	ADDITIONAL EXPENSES
Date of activity or speaking engagement:	August 17-21
Reason that the actual amount differs from the previously disclosed amount by \$50 or more:	Itemized information for lodging and meals were not available at that time.

**PLEASE INCLUDE DETAILED INFORMATION
ONLY ABOUT AMOUNTS THAT DIFFER FROM THE AMOUNTS ORIGINALLY DISCLOSED.**

	Previously disclosed amount	Actual amount
Transportation:	N/A	N/A
Lodging:	—	\$209 room rate + tax per night (15.50%) 4 nights = \$836 + \$129.60 = \$965.60
Meals:	—	Buffet style meals: 3 Breakfasts 3 Dinners 3 Lunches
Admission:	N/A	N/A
Other (please list):	N/A	N/A
Total:	—	\$965.60

Employee signature	
Date	9/8/2014

Attach additional pages if necessary.

Non-elected public employees - file with your appointing authority.

Elected state or county employees - file with the State Ethics Commission.

Members of the General Court -
file with the Senate or House Clerk or the State Ethics Commission.

Elected municipal employee - file with the city or town clerk.

Elected regional school committee member -
file with the clerk or secretary of the committee.