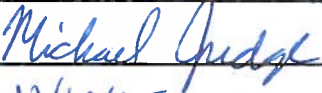



**DISCLOSURE OF APPEARANCE OF CONFLICT OF INTEREST
AS REQUIRED BY G. L. c. 268A, § 23(b)(3)**

	PUBLIC EMPLOYEE INFORMATION
Name of public employee:	Michael Judge
Title or Position:	Director, Renewable & Alternative Energy Division
Agency/Department:	Department of Energy Resources
Agency address:	100 Cambridge Street, Suite 1020 Boston, MA 02114
Office Phone:	617-626-7368
Office E-mail:	Michael.judge@state.ma.us
	<p>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.</p> <p>I am filing this disclosure to disclose the facts about this relationship or affiliation and to dispel the appearance of a conflict of interest.</p>
	APPEARANCE OF FAVORITISM OR INFLUENCE
Describe the issue that is coming before you for action or decision.	In my capacity as Director of the Renewable and Alternative Energy Division I have broad authority to make decisions and recommendations that can impact the Solar Energy Industries Association and its member organizations.
What responsibility do you have for taking action or making a decision?	I have the responsibility for implementing regulations that govern the eligibility of solar projects to qualify under the state's renewable portfolio standard programs. I also provide considerable input into the design of other programs and initiatives that impact solar projects.
Explain your relationship or affiliation to the person or organization.	I was recently offered and declined a position as Director of Northeast State Affairs with the Solar Energy Industries Association, which broadly represents the policy interests of the solar industry.
How do your official actions or decision matter to the person or organization?	My actions, decisions, and recommendations may have a direct financial impact on the association and its members.

Optional: Additional facts – e.g., why there is a low risk of undue favoritism or improper influence.	As I did not accept the position that was offered, there should be little to no risk of undue favoritism or improper influence.
If you cannot confirm this statement, you should recuse yourself.	WRITE AN X TO CONFIRM THE STATEMENT BELOW. <input checked="checked" type="checkbox"/> Taking into account the facts that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
Employee signature:	
Date:	

Attach additional pages if necessary.

Not elected to your public position – file with your appointing authority.

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

Members of the General Court – file with the House or Senate clerk or the State Ethics Commission.

Elected municipal employee – file with the City Clerk or Town Clerk.

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