DISCLOSURE BY ELECTED PUBLIC EMPLOYEE OF EXPENSES RELATED TO ATTENDANCE AT AN EVENT SERVING A LEGITIMATE PUBLIC PURPOSE AS REQUIRED BY 930 CMR 5.08(3)(b) RECEIVED SETATE ETHICS COMMISSION

2016	NOV	17	PH	2:1	12

	ELECTED PUBLIC EMPLOYEE INFORMATION		
Name of elected public employee:	Joan B. Lovely		
Title/ Position	State Senator		
Office:	Massachusetts State Senate		
Office address:	Massachusetts State House, Room 413A Boston, MA 02133		
Office phone:	617-722-1410		
Office E-mail:	Joan.lovely@masenate.gov		
Write an X to confirm each statement.	I am filing this disclosure because: X		
	EVENT ATTENDED		
Describe the event that you will attend.	The event is a dinner to support the YMCA of the North Shore, which is a nonprofit, located in my district. According to the organization's website, proceeds from the event support the YMCA's financial assistance program, providing essential Y services and programs to more than 13,000 children and families.		
Describe your participation in the event.	I participated as an attendee at this event.		
Date, time and location of event.	Saturday, October 29, 2016 6pm to midnight DoubleTree by Hilton Danvers, MA		
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY		
Identify the person or organization that offered to reimburse, pay or waive expenses.	Betsy Merry, a constituent and Board member of the Salem YMCA and the YMCA of the North Shore		

Address of person or organization.	413 Lafayette Street
	Salem, MA 01970
Provide information	Itemization and explanation of amounts offered:
in as much detail as possible:	
Transportation:	Air, train, bus, and taxi fare and rental car hire, etc.
Meals:	Breakfast, lunch, dinner, special events.
Admission:	Admission, tickets, etc.
2	\$225
Other (please list):	Refreshment, entertainment, etc.
Total:	\$225
	Having disclosed the facts above, I determine that:
For the exemption to apply, check off	X Acceptance of the reimbursement, waiver or payment of travel expenses will serve a legitimate public purpose i.e., will promote the interests of the Commonwealth, a county or a municipality; AND
<u>both</u> <u>statements</u> .	X Such public purpose outweighs any special non-work related benefit to me or to the person providing the reimbursement, waiver or payment.
Please explain how the activity will promote the interests of the Commonwealth, a county	According to the YMCA of the North Shore website, their mission is as follows: "Our Y welcomes all. We strengthen communities, educate and nurture children, and promote healthy living in spirit, mind and body"
or a municipality.	Through YMCA's various fitness and wellness programs they create a healthier and happier community. The Y's youth development programs give kids and teens a chance to learn and grow, while making long lasting friendships. Being a socially responsible organization, the YMCA of the North Shore made it their mission to provide services to all regardless of their ability to pay.
	The YMCA of the North Shore plays a vital role in assisting and enriching the lives of children and families in my district and across the Commonwealth. This activity will contribute to and promote the Commonwealth's continued effort to serve at-risk children and families. Fromote healthy living and support youth development.
Employee signature:	Aund Kons
Date:	16/16/14

Attach additional pages if necessary.

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.

Form revised February, 2012