



RECEIVED  
STATE ETHICS COMMISSION

DISCLOSURE BY NON-ELECTED STATE EMPLOYEE OF FINANCIAL INTEREST  
AND DETERMINATION BY APPOINTING AUTHORITY  
AS REQUIRED BY G. L. c. 268A, § 6

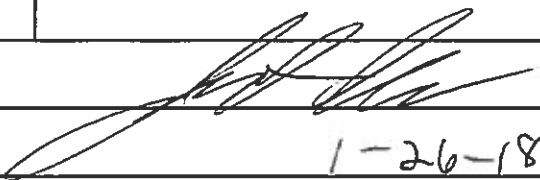
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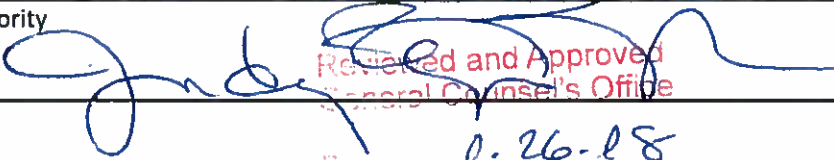
Name:	Jonathan Sclarsic
Title or Position:	AAG/Director
State Agency:	Office of the Attorney General (AGO)
Agency Address:	One Ashburton Place Boston, MA 02108
Office Phone:	c/o General Counsel's Office 617.963.2018
Office E-mail:	c/o <a href="mailto:Judy.Zeprun@state.ma.us">Judy.Zeprun@state.ma.us</a>

<b>PARTICULAR MATTER</b>	
Particular matter E.g., a judicial or other proceeding, application, submission, request for a ruling or other determination, contract, claim, controversy, charge, accusation, arrest, decision, determination, or finding.	Please describe the particular matter: I am investigating the decision of the Group Insurance Commission to eliminate three insurance providers during its January 28, 2018 meeting.
Your required participation in the particular matter: E.g., approval, disapproval, decision, recommendation, rendering advice, investigation, other.	Please describe the task you are required to perform with respect to the particular matter: I am being asked to determine whether the GIC's decision violated the Open Meeting Law.

<b>FINANCIAL INTEREST IN THE PARTICULAR MATTER</b>	
Write an X by all that apply.	<input checked="" type="checkbox"/> I have a financial interest in the matter. <input type="checkbox"/> My immediate family member has a financial interest in the matter. <input type="checkbox"/> My business partner has a financial interest in the matter. <input type="checkbox"/> I am an officer, director, trustee, partner or employee of a business organization, and the business organization has a financial interest in the matter. <input type="checkbox"/> I am negotiating or have made an arrangement concerning future employment with a person or organization, and the person or organization has a financial interest in the matter.

Financial interest	
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in the matter	My financial interest is that I receive my health insurance through a provider that is subject to elimination by the GIC's decision.
Employee signature:	
Date:	1-26-18

<b>DETERMINATION BY APPOINTING OFFICIAL APPOINTING AUTHORITY INFORMATION</b>	
Name of Appointing Authority:	Maura Healey, Attorney General By: Judy Zeprun Kalman
Title or Position:	General Counsel
Agency/Department:	Office of the Attorney General
Agency Address:	One Ashburton Place Boston, MA 02108
Office Phone:	617.963.2018
Office E-mail:	Judy.zeprun@state.ma.us
<b>DETERMINATION</b>	
Determination by appointing authority: <b>Write an X by your selection.</b>	As appointing official, as required by G.L. c. 268A, § 6, I have reviewed the particular matter and the financial interest identified above by a state employee. <input type="radio"/> I am assigning the particular matter to another employee, or <input type="radio"/> I am assuming responsibility for the particular matter, or <input checked="" type="radio"/> I have determined that the financial interest is not so substantial as to be deemed likely to affect the integrity of the services which the Commonwealth may expect from the employee.
Appointing Authority signature:	 Reviewed and Approved General Counsel's Office
Date:	1.26.18
Comment:	Date: _____

Attach additional pages if necessary. Send to General Counsel's Office for Determination.  
GCO will send a copy of this disclosure to:  
State Ethics Commission, One Ashburton Place, Room 619, Boston, MA 02108