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

	DUDI IO ENDI OVEE INFORMATION	RECEI	VFF)
Name of public	PUBLIC EMPLOYEE INFORMATION	ATT ETHICS	COMMISSIE
Name of public employee:	Vinny deMacedo	11 NAL 8105	81:11KA
Title or Position:	State Senator		
Agency/Department:	Massachusetts Senate		
Agency address:	State House Boston, MA 02133		
Office Phone:	617-722-1330		
Office E-mail:	Vinny.deMacedo@masenate.gov		
	In my capacity as a state, county or municipal employee, I am experformance of my official duties. Under the circumstances, a resthat a person or organization could unduly enjoy my favor or impressform my official duties, or that I am likely to act or fail to act as or undue influence of a party or person. I am filing this disclosure to disclose the facts about this relationshappearance of a conflict of interest.	asonable person could co operly influence me whe a result of kinship, rank,	onclude n I position
	APPEARANCE OF FAVORITISM OR INFLUENCE		
Describe the issue that is coming before you for action or decision.	S. 104, "An act providing consumers with equal protection	for all real estate appra	aisals."
What responsibility do you have for taking action or making a decision?	As Senator, I will consider, debate and vote on amendments, engrossment and enactment of this legislation.		
Explain your relationship or affiliation to the person or organization.	I am a licensed realtor		
How do your official actions or decision matter to the person or organization?	By requiring that all appraisals of real estate in the Commonwealth be conducted by certified or licensed appraisers, the bill could reduce the number of people who are permitted to perform this type of work. This could have an impact on my work as a realtor.		
Optional: Additional facts – e.g., why there is a low risk of undue favoritism or	I do not perform real estate appraisals.		

improper influence.		
	MOTE AN VIO CONFIDM THE OTATEMENT DELOW	
If 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.	
Employee signature:	Out doll,	
Date:	1/11/18	

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.

Form revised July, 2012