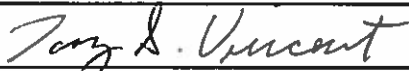


**DISCLOSURE BY STATE EMPLOYEE OF FINANCIAL INTEREST IN A STATE CONTRACT  
AND CERTIFICATION BY HEAD OF CONTRACTING AGENCY  
AS REQUIRED BY G. L. c. 268A, § 7(b)**

	<b>STATE EMPLOYEE INFORMATION</b>
Name of state employee:	Tony S. Vincent
Title/ Position	Graduate Student – Educational Leadership and Policy Studies PhD. Program
Fill in this box if it applies to you.	If you are a state employee because a state agency has contracted with your company or organization, please provide the name and address of the company or organization.  Not Applicable
Agency/ Department	
Agency Address	
Office phone:	
Office e-mail:	
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a state employee.	March 6, 2019 to May 11, 2019
<b>BOX # 1</b>  Select either <b>STATEMENT #1</b> or <b>STATEMENT #2</b> .  Write an X beside your financial interest.	<b>ELECTED, COMPENSATED STATE EMPLOYEE</b>  I am an elected, compensated state employee, other than a state Senator or a state Representative.  <input type="checkbox"/> <b>STATEMENT #1:</b> I had one of the following financial interests in a contract made by a state agency before I was elected to my compensated state employee position. I will continue to have this financial interest in a state contract. OR  <input type="checkbox"/> <b>STATEMENT #2:</b> I will have a new financial interest in a contract made by a state agency.  <b>My financial interest in a state contract is:</b>  <input type="checkbox"/> I have a non-elected, compensated state employee position.  <input type="checkbox"/> A state agency has a contract with me.  <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.  <input type="checkbox"/> I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.
<b>BOX # 2</b>  Select either <b>STATEMENT #1</b> or <b>STATEMENT #2</b> .	<b>NON-ELECTED, COMPENSATED STATE EMPLOYEE</b>  I am a non-elected, compensated state employee.  <input type="checkbox"/> <b>STATEMENT #1:</b> I had one of the following financial interests in a contract made by a state agency before I took a position as a non-elected state employee. I will continue to have this financial interest in a state contract.

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<p><b>Write an X beside your financial interest.</b></p>	<p><b>My financial interest in a state contract is:</b></p> <p><input type="checkbox"/> A state agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.</p> <p><b>-- OR --</b></p> <p><input type="checkbox"/> <b>STATEMENT # 2:</b> I will have a new financial interest in a contract made by a state agency.</p> <p><b>My financial interest in a state contract is:</b></p> <p><input type="checkbox"/> I have a non-elected, compensated state employee position.</p> <p><input checked="" type="checkbox"/> A state agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a state agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a state agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state has contracted for my services in particular.</p>
	<p><b>FINANCIAL INTEREST IN A STATE CONTRACT</b></p>
<p><b>Name and address of state agency that made the contract</b></p>	<p>University Massachusetts Dartmouth 285 Old Westport Road Dartmouth, MA 02747</p>
<p><b>Please put in an X to confirm these facts.</b></p>	<p><b>"My State Agency"</b> is the state agency that I serve as a state employee.</p> <p>The <b>"contracting agency"</b> is the state agency that made the contract.</p> <p><input type="checkbox"/> My State Agency is not the contracting agency.</p> <p><input type="checkbox"/> My State Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my State Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p><b>FILL IN THIS BOX OR THE BOX BELOW</b></p>	<p><b>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE STATE AND YOU.</b></p> <p>- Please explain what the contract is for.</p> <p>I am a graduate student at the University of Massachusetts Dartmouth and I was presented with a \$5,000.00 Dissertation Writing Support Award. The employment contract is a formality initiated as a method in order to pay out the award over my last semester.</p>
<p><b>FILL IN THIS BOX OR THE BOX ABOVE</b></p>	<p><b>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE STATE AND ANOTHER PERSON OR ENTITY.</b></p> <p>- Please identify the person or entity that has the contract with the state agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p> <p>Not Applicable</p>

What is your financial interest in the state contract?	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I am a graduate student at the University of Massachusetts Dartmouth and I was presented with a \$5,000.00 Dissertation Writing Support Award. All PhD. Graduate students may apply for this award in their last semester of the Educational Leadership and Policy Studies doctoral program. The employment contract is a formality initiated as a method in order to pay out the award over my last semester.</p>
Date when you acquired a financial interest	March 6, 2019
What is the financial interest of your immediate family?	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>Not Applicable</p>
Date when your immediate family acquired a financial interest	Not Applicable
Write an X to confirm each statement.	<p><b>FOR A CONTRACT FOR PERSONAL SERVICES –</b></p> <p><b>Answer the questions in this box ONLY if you will have a contract for personal services with a state agency (i.e., you will do work directly for the contracting agency).</b></p> <p>I will have a contract with a state agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a state employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a state employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	March 6, 2019

Attach additional pages if necessary.

NOT A PERSONAL SERVICES CONTRACT -- File disclosure with:


State Ethics Commission  
One Ashburton Place, Room 619  
Boston, MA 02108

SEE CERTIFICATION REQUIRED FOR PERSONAL SERVICES POSITIONS, BELOW.

**FOR CONTRACTS FOR PERSONAL SERVICES ONLY:**

If you are reporting a financial interest in a contract for personal services with a state agency, then in addition to completing the disclosure above, you also must file the certificate below signed by the head of the contracting agency.

**CERTIFICATION BY HEAD OF CONTRACTING AGENCY**

<b>INFORMATION ABOUT HEAD OF CONTRACTING AGENCY</b>	
Name:	Mohammed Karim
Title/ Position	Provost & Executive Vice Chancellor and Chief Operating Officer
State Agency:	University of Massachusetts Dartmouth
Agency Address:	285 Old Westport Road Dartmouth, MA 02747-8024
Office Phone:	508-999-8024
<b>CERTIFICATION</b>	
	I have received a disclosure under G.L. c. 268A, § 7(b) from a state employee who seeks to provide personal services to my state agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	03-21-2019

Attach additional pages if necessary.

File disclosure and certification with:

State Ethics Commission  
One Ashburton Place, Room 619  
Boston, MA 02108