


**RECONCILIATION STATEMENT
AS REQUIRED BY 930 CMR 5.08(2)(d)3.**

	PUBLIC EMPLOYEE INFORMATION
Name of employee:	John Velis
Title/ Position	Senator
Agency/ Department	Massachusetts Senate
Agency address:	State House, Room 519 Boston, MA 02133
Office Phone:	617-722-1415
Office E-mail:	John.Velis@masenate.gov
	<p>I previously filed a disclosure explaining that I accepted reimbursement, waiver or payment by a non-public entity (but not a lobbyist) of travel expenses related to an activity or speaking engagement that served a legitimate public purpose. I am filing this Reconciliation Statement because the actual amount of the travel expenses differed by more than \$50 from the amount I originally disclosed.</p> <p>I HAVE ATTACHED A COPY OF MY PREVIOUS DISCLOSURE.</p>
	ADDITIONAL EXPENSES
Date of activity or speaking engagement:	The National Conference of State Legislatures' Behavioral Health Training Institute took place on Saturday, April 9, 2022 and Sunday, April 10, 2022 at the Gaylord National Resort & Convention Center, 201 Waterfront St., National Harbor, MD 20745.
Reason that the actual amount differs from the previously disclosed amount by \$50 or more:	At the time of my original disclosure regarding this travel, I only had information related to the cost of airfare to and from for the event, which was \$466.19 roundtrip. I am submitting this reconciliation form now that I have received the final amount of the reimbursement from the National Conference of State Legislatures.

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PLEASE INCLUDE DETAILED INFORMATION
ONLY ABOUT AMOUNTS THAT DIFFER FROM THE AMOUNTS ORIGINALLY DISCLOSED.

	<u>Previously disclosed amount</u>	<u>Actual amount</u>
Transportation:	\$466.19 for airfare	In addition to the \$466.19 for airfare, I was reimbursed \$14.16 for cab fare from and to the airport
Lodging:	N/A	\$684.40 total for 2 nights stay at the Gaylord National Resort & Convention Center
Meals:	N/A	\$119.20
Admission:	N/A	N/A
Other (please list):	N/A	\$60.00 for luggage fees
Total:	\$466.19	\$1,343.95

Employee signature	
Date	May 5, 2022

Attach additional pages if necessary.

Non-elected public employees - file with your appointing authority.

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

**Members of the General Court -
file with the Senate or House Clerk or the State Ethics Commission.**

Elected municipal employee - file with the city or town clerk.

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

Tentative Agenda | Behavioral Health Training Institute
Saturday, April 9 – Sunday, April 10, 2022
Gaylord National Resort & Convention Center, 201 Waterfront St., National Harbor, MD 20745

Meeting Purpose

- To provide an intensive training focused on behavioral and public health system interconnections and the related challenges and opportunities facing jurisdictions across the country;
- To facilitate peer learning, collaborative conversations and planning between public health officials, behavioral health officials, and state legislators and legislative staff;
- To identify opportunities for meaningful collaboration and integration of behavioral health into health systems transformation efforts.
- To provide training on an evidence-based model (Mental Health First Aid training) and the way it can be implemented in public health systems to build strong behavioral health supports

Behavioral Health Training Institute, Day 1 Tentative Agenda
Saturday, April 9, 9 a.m. – 5:30 p.m. ET

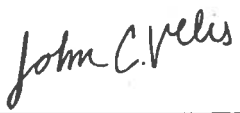
9 – 9:30 a.m.	Welcome, Opening Comments and Setting the Stage for Day 1
9:30a – 10:30a	Organizer & Attendee Introductions <i>National Council for Mental Wellbeing</i> <i>National Conference of State Legislatures</i> <i>Center for State, Tribal, Local & Territorial Support (CSTLTS), Centers for Disease Control & Prevention (CDC)</i>
9:00-11:30a	Trauma-Informed, Resilience-Oriented Leadership In-Person Training, Lessons Learned and 6-Month Debrief
11:30a-11:45a	Lunch & Breakout Rooms
12:00p – 4:30p	Mental Health First Aid (MHFA) Welcome & Executive MHFA Trainings
4:35p – 5:30p	MHFA Reflections Panel
5:30pm	Adjourn
5:30p – 6:30p	Networking Reception

Behavioral Health Training Institute, Day 2 Tentative Agenda
Sunday, April 10, 8:30 a.m. – 5 p.m. ET

8:00a – 8:30a	Breakfast/Sign In
8:30a – 8:45a	Welcoming Remarks <i>National Council for Mental Wellbeing</i> <i>National Conference of State Legislatures (NCSL)</i>
9:00a – 9:15a	Participant Reflections & Setting the Stage for Day 2
9:15-9:45a	Framing Behavioral Health, Public Health and Policy
9:45a – 10:45a	Panel #1
10:45a-11:00a	Break
11:00a-12:00p	Panel #2
12:00-1:30p	Lunch
1:30-2:30p	Panel #3
2:30-3:15p	Collaborative Reflection
3:15-4:15p	Panel #4 Emerging Topics
4:15-4:45p	Collaborative Reflection & Action Planning Time
4:45-5:00p	Report Outs, Group Discussion & Closing
5:00p	Adjourn

**DISCLOSURE BY ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)2.**

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of elected public employee:	John Velis
Title/ Position	Senator
Agency/ Department	Massachusetts Senate
Agency address:	State House Boston, MA 02133
Office phone:	617-722-1415
Office e-mail:	John.velis@masenate.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p><input checked="" type="checkbox"/> I am going to engage in an activity that serves a legitimate public purpose, i.e., it is intended to promote the interests of the Commonwealth, a county or a municipality; and</p> <p><input checked="" type="checkbox"/> A non-public entity (but not a lobbyist) has offered to reimburse, waive or pay travel expenses and costs worth more than \$50.</p>
	ACTIVITY THAT SERVES A LEGITIMATE PUBLIC PURPOSE
Describe the activity which is the reason for traveling.	I have been invited by the National Conference of State Legislatures to attend the Behavioral Health Training Institute.
Describe your participation in the activity.	I will be participating in trainings on mental and behavioral health and how to implement it in public health systems, attending expert panels and meeting with public health and behavioral health officials, other state legislators and staff.
Date, time and location of activity.	The Behavioral Health Training Institute will take place on Saturday, April 9, 2022 and Sunday, April 10, 2022 at the Gaylord National Resort & Convention Center, 201 Waterfront St., National Harbor, MD 20745
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	As a Senator, understanding evidence-based mental and behavioral health responses and working with experts to better implement these responses in the commonwealth's public health system is an important part of improving the commonwealth's health care infrastructure. Doing so will give me the tools to better draft health legislation and better support my constituents.

	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	The National Conference of State Legislatures
Address of person or organization.	7700 East First Place, Denver, CO 80230
Provide information in as much detail as possible:	Itemization and explanation of amounts offered:
Transportation:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i> Roundtrip airfare to the Institute and back home – \$466.19
Lodging:	<i>Overnight accommodations.</i> I do not have this information at this time but will submit a reconciliation form once I have the final amount.
Meals:	<i>Breakfast, lunch, dinner, special events.</i> I do not have this information at this time but will submit a reconciliation form once I have the final amount.
Admission:	<i>Registration, admission, tickets, etc.</i> I do not have this information at this time but will submit a reconciliation form once I have the final amount.
Other (please list):	<i>Refreshment, instruction, materials, entertainment, etc.</i> I do not have this information at this time but will submit a reconciliation form once I have the final amount.
Total:	\$466.19 for airfare, other amounts will be added in a reconciliation form that I will submit once I have the final amount
Write an X beside any relevant statement.	<input type="checkbox"/> I have attached the relevant itinerary. <input checked="" type="checkbox"/> I have attached the relevant agenda.
For the exemption to apply, check off <u>both</u> statements.	Having disclosed the facts above, I determine that: <input checked="" type="checkbox"/> Acceptance of the reimbursement, waiver or payment of travel expenses will serve a legitimate public purpose i.e., it will promote the interests of the Commonwealth, a county or a municipality; AND <input checked="" type="checkbox"/> Such public purpose outweighs any special non-work related benefit to me or to the person providing the reimbursement, waiver or payment.
Employee signature:	

Date:	4-8-2022
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Attach additional pages if necessary.

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.

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