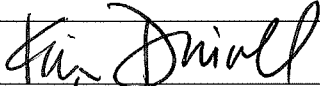


**DISCLOSURE BY ELECTED PUBLIC EMPLOYEE
OF EXPENSES RELATED TO ATTENDANCE AT AN EVENT
SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(3)(b)**

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of elected public employee:	Kim Driscoll
Title/ Position	Lieutenant Governor
Office:	Office of the Lieutenant Governor
Office address:	Massachusetts State House, Room 360, Boston, MA 02133
Office phone:	617-894-5240
Office E-mail:	Kim.Driscoll@mass.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p><input checked="" type="checkbox"/> My attendance at an event will serve a legitimate public purpose, i.e., it will 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 pay or waive expenses worth \$50 or more related to the event.</p>
	EVENT ATTENDED
Describe the event that you will attend.	10 Years Stronger Benefit Concert
Describe your participation in the event.	The Lieutenant Governor will attend the 10 Years Stronger Benefit Concert, which supports, honors and remembers the Boston Marathon Bombing Survivors.
Date, time and location of event.	April 16, 2023 – 8:15 PM – MGM Music Hall at Fenway
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	The Greg Hill Foundation

Address of person or organization.	800 West Cummings Park Suite 3700 Woburn, MA 01801
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation:	<i>Air, train, bus, and taxi fare and rental car hire, etc.</i>
Meals:	<i>Breakfast, lunch, dinner, special events.</i>
Admission:	<i>Admission, tickets, etc.</i> Waived ticket fee of \$1,000
Other (please list):	<i>Refreshment, entertainment, etc.</i>
Total:	\$1,000
For the exemption to apply, check off both statements.	<p>Having disclosed the facts above, I determine that:</p> <p><input checked="" type="checkbox"/> 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</p> <p><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.</p>
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	The presence of the Lieutenant Governor has been requested at this event which supports, honors and remembers the Boston Marathon Bombing victims and survivors. The Lieutenant Governor's presence will showcase the Administration's continued support for victims and survivors of the bombings, and for the amazing acts of courage, action and support that immediately followed the bombings.
Employee signature:	
Date:	4/13/23

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.

Elected municipal employee – file with the City Clerk or Town Clerk.