

**DISCLOSURE BY SPECIAL STATE EMPLOYEE  
OF FINANCIAL INTEREST IN A STATE CONTRACT  
AS REQUIRED BY G. L. c. 268A, § 7(d)**

<b>SPECIAL STATE EMPLOYEE INFORMATION</b>	
Name of special state employee:	Gabriel Balzano-Brookes
Put an X beside one statement.	<p>I am a <b>special state employee</b> because:</p> <p><input type="checkbox"/> I serve in a state position for which <b>no compensation</b> is provided.</p> <p><input checked="" type="checkbox"/> I am not an elected official, and I earned <b>compensation for fewer than 800 hours</b> in the preceding 365-day period.</p> <p><input type="checkbox"/> By the classification of my position by my state agency or by the terms of a contract or my conditions of employment, I am <b>permitted to have personal or private employment during normal business hours</b>.</p> <p><input type="checkbox"/> I work for a company or organization which has a contract with a state agency, and I am a <b>"key employee"</b> because the contract identifies me by name or it is otherwise clear that the state is contracting for my services in particular, and the <b>contract states that I am a special state employee or indicates that I meet one of the three requirements listed above</b>.</p>
Title/ Position	Associate at Krokidas & Bluestein, representing state agencies listed on Attachment A.
Fill in this box if it applies to you.	<p>If you are a special state employee because a state agency has contracted with your company or organization, please provide the name and address of the company or organization.</p> <p>Krokidas &amp; Bluestein, 600 Atlantic Avenue, Boston, MA 02210</p>
State Agency/ Department:	<p><b>This is "my State Agency."</b></p> <p>See Attachment A</p>
Agency Address:	See Attachment A
Office phone:	617-482-7211
Office e-mail:	gbalzano-brookes@kb-law.com
	Check one: <input type="checkbox"/> Elected      or <input checked="" type="checkbox"/> Non-elected
Starting date as a special state employee.	See Attachment A
BOX # 1  N/A  Select either <b>STATEMENT #1 or STATEMENT #2.</b>	<p><b>ELECTED SPECIAL STATE EMPLOYEE</b></p> <p>I am an <b>elected special state employee</b>.</p> <p><input type="checkbox"/> <b>STATEMENT #1:</b> I had a financial interest in a contract made by a state agency <b>before</b> I was elected to a compensated special state employee position. I will continue to have this financial interest in a state contract.</p> <p><input type="checkbox"/> <b>STATEMENT #2:</b> I will have a <b>new</b> financial interest in a contract made by a state agency.</p>

<p><b>Write an X by your financial interest.</b></p>	<p><b>My financial interest in a contract made by a state agency is:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A compensated, non-elected position with a state agency.</li> <li><input type="checkbox"/> A contract between a state agency and myself.</li> <li><input type="checkbox"/> A financial benefit or obligation because of a contract that a state agency has with another person or with a company or organization.</li> <li><input type="checkbox"/> Other work because a state agency has a contract with my company or organization and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state is contracting for my services in particular.</li> </ul>
<p><b>BOX #2</b></p> <p><b>Select either STATEMENT #1 or STATEMENT #2.</b></p> <p><b>Write an X by your financial interest.</b></p>	<p><b>NON-ELECTED SPECIAL STATE EMPLOYEE</b></p> <p>I am a <b>non-elected special state employee</b> (compensated or uncompensated).</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>STATEMENT #1:</b> I had a financial interest in a contract made by a state agency, other than an employment contract, <b>before</b> I took a non-elected, compensated special state employee position. I will continue to have this financial interest in a state contract.</li> </ul> <p><b>My financial interest in a contract made by a state agency is:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A contract between a state agency and myself, but not an employment contract.</li> <li><input type="checkbox"/> A financial benefit or obligation because of a contract that a state agency has with another person or with a company or organization.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> <b>STATEMENT #2:</b> I will have a <b>new</b> financial interest in a contract made by a state agency.</li> </ul> <p><b>My financial interest in a contract made by a state agency is:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A compensated, non-elected position with a state agency.</li> <li><input type="checkbox"/> A contract between a state agency and myself.</li> <li><input type="checkbox"/> A financial benefit or obligation because of a contract that a state agency has with another person or with a company or organization.</li> <li><input checked="" type="checkbox"/> Other work because a state agency has a contract with my company or organization and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the state is contracting for my services in particular.</li> </ul>
	<p><b>FINANCIAL INTEREST IN A STATE CONTRACT</b></p> <p>This is the "contracting agency."</p> <p>See Attachment A and B</p>
<p><b>Write an X to confirm this statement.</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> In my work as a special state employee for my State Agency, I <b>do not participate in or have official responsibility for any of the activities of the contracting agency.</b></li> </ul>
<p><b>FILL IN THIS BOX OR THE NEXT BOX</b></p> <p><b>N/A</b></p>	<p><b>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE STATE AGENCY AND YOU.</b></p> <ul style="list-style-type: none"> <li>- Please explain what the contract is for.</li> </ul>

	<p><b>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE STATE AGENCY AND ANOTHER PERSON OR ENTITY</b></p> <ul style="list-style-type: none"> <li>- Please identify the person or entity that has the contract with the state agency. Krokidas &amp; Bluestein LLP</li> <li>- What is your relationship to the person or entity? Associate</li> <li>- What is the contract for? See Attachment A and B</li> </ul>
What is your financial interest in the state contract?	<ul style="list-style-type: none"> <li>- Please explain the financial interest and include the dollar amount if you know it. See Attachment A and B</li> </ul>
Date when you acquired the financial interest	See Attachment A and B
What is the financial interest of your immediate family?	<ul style="list-style-type: none"> <li>- Please explain the financial interest and include the dollar amount if you know it. N/A</li> </ul>
Date when your immediate family acquired the financial interest	N/A
Employee signature:	
Date:	April 22, 2024

**Attach additional pages if necessary.**

**File your completed, signed Disclosure with:  
State Ethics Commission, One Ashburton Place, Room 619, Boston, MA 02108**