


**DISCLOSURE BY NON-ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)1.**

	NON-ELECTED PUBLIC EMPLOYEE INFORMATION
Name of non-elected public employee:	Andrea Campbell
Title/ Position	Attorney General
Agency/ Department	Attorney General's Office
Agency address:	One Ashburton Place Boston, MA 02118
Office phone:	617-727-2200
Office e-mail:	Andrea.j.campbell@mass.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p><input type="checkbox"/> <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.	To attend the Attorney General Alliance Annual Meeting which brought together state Attorneys General interested in progressive and practical public policy solutions and various stakeholders to discuss important issues facing state Attorneys General and to collaborate and network with other Attorneys General and their senior staffers.
Describe your participation in the activity.	Attendee at the AGA International Delegation.
Date, time and location of activity.	December 2-7, 2024 Fairmont Mayakoba Playa del Carmen, Solidaridad Quintana Roo CP. 77710. México
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	By hearing from and collaborating with other state Attorneys General on issues regarding public safety, environmental protection, election protection, workplace fairness, digital safety and elder justice, antitrust litigation, missing and murdered indigenous women and people. On these issues, I bring strategies and information back to the Attorney General's Office to support and further develop ongoing AGO work.

	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	Attorney General Alliance
Address of person or organization.	5050 Laguna Blvd. Suite 112-323 Elk Grov, CA
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> \$635.11
Lodging:	<i>Overnight accommodations.</i> \$1800.00
Meals:	<i>Breakfast, lunch, dinner, special events.</i> Meals included in lodging
Admission:	<i>Registration, admission, tickets, etc.</i>
Other (please list):	<i>Refreshment, instruction, materials, entertainment, etc.</i>
Total:	\$2435.11
Write an X beside any statement that applies.	<input type="checkbox"/> I have attached the relevant itinerary. <input checked="" type="checkbox"/> I have attached the relevant agenda.
Employee signature:	
Date:	3/10/2025

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