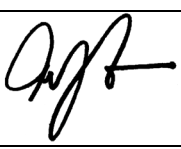


**DISCLOSURE BY ELECTED PUBLIC EMPLOYEE
OF EXPENSES RELATED TO ATTENDANCE AT AN EVENT
SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(3)(b)**

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of elected public employee:	Andrea Joy Campbell
Title/ Position	Attorney General
Office:	Office of the Attorney General
Office address:	One Ashburton Place, 20 th Floor, Boston, MA 02108
Office phone:	(617)963-2099
Office E-mail:	Andrea.Joy.Campbell@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 type="checkbox"/> A non-public entity (but not a lobbyist) has offered to pay or waive expenses worth more than \$50 related to the event.</p>
	EVENT ATTENDED
Describe the event that you will attend.	The Massachusetts Housing Partnership's 18 th Housing Institute
Describe your participation in the event.	AG Campbell will participate in a fireside chat to talk about the Office's work in the housing space.
Date, time and location of event.	June 4 th , 2025 9AM – 10:30AM
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	MHP

Address of person or organization.	MHP, 160 Federal Street, Boston, MA 02110
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> NA
Meals:	<i>Breakfast, lunch, dinner, special events.</i> NA
Admission:	<i>Admission, tickets, etc.</i> Admission – Tickets for one day of the conference are at \$100 value.
Other (please list):	<i>Refreshment, entertainment, etc.</i> NA
Total:	\$100
For the exemption to apply, check off <u>both statements</u>.	<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.	It will educate the audience on the Attorney General's Office work to promote and preserve housing in the Commonwealth.
Employee signature:	
Date:	Friday, May 23 rd , 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.