


**DISCLOSURE OF APPEARANCE OF CONFLICT OF INTEREST
AS REQUIRED BY G. L. c. 268A, § 23(b)(3)**

	PUBLIC EMPLOYEE INFORMATION
Name of public employee:	Arthur Xia
Title or Position:	Senior Program Coordinator
Agency/Department:	State Ethics Commission
Agency address:	One Ashburton Place, Room 619 Boston, MA 02108
Office Phone:	(617) 371-9525
Office E-mail:	arthur.s.xia@mass.gov
	<p>In my capacity as a state, county or municipal employee, I am expected to take certain actions in the performance of my official duties. Under the circumstances, a reasonable person could conclude that a person or organization could unduly enjoy my favor or improperly influence me when I perform my official duties, or that I am likely to act or fail to act as a result of kinship, rank, position or undue influence of a party or person.</p> <p>I am filing this disclosure to disclose the facts about this relationship or affiliation and to dispel the appearance of a conflict of interest.</p>
	APPEARANCE OF FAVORITISM OR INFLUENCE
Describe the issue that is coming before you for action or decision.	I have been asked to participate in the screening of job applications for the open position of Public Education and Communications Division Chief.
What responsibility do you have for taking action or making a decision?	I am responsible for reviewing job applications and providing input on applicants' qualifications for the hiring process.
Explain your relationship or affiliation to the person or organization.	One of the applicants is a current colleague with whom I work with at the Commission.
How do your official actions or decision matter to the person or organization?	My assessment may influence the advancement of this individual's candidacy to the interview stage and may contribute to hiring decisions for a supervisory position that would directly oversee my role.

REDACTED

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STATE ETHICS COMMISSION
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Optional: Additional facts – e.g., why there is a low risk of undue favoritism or improper influence.	
If you cannot confirm this statement, you should recuse yourself.	WRITE AN X TO CONFIRM THE STATEMENT BELOW. <input checked="checked" type="checkbox"/> Taking into account the facts that I have disclosed above, I feel that I can perform my official duties objectively and fairly.
Employee signature:	
Date:	5/22/2025

Attach additional pages if necessary.

Not elected to your public position – file with your appointing authority.

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.