

**DISCLOSURE BY MUNICIPAL EMPLOYEE  
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT  
AS REQUIRED BY G. L. c. 268A, § 20(b)**

<b>MUNICIPAL EMPLOYEE INFORMATION</b>	
Name of municipal employee:	Angela Mass
Title/ Position	Teacher
<b>Fill in this box if it applies to you.</b>	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Greenfield Public Schools
Agency Address	195 Federal Street Suite 100 Greenfield, MA 01301
Office phone:	413.772.1300
Office e-mail:	Angmas1@gpsk12.org
	Check one: <input type="checkbox"/> Elected            or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	Aug 20, 2000 (Aprox)
<b>BOX # 1</b>  <b>Select either STATEMENT #1 or STATEMENT #2.</b>  <b>Write an X beside your financial interest.</b>	<p><b>ELECTED MUNICIPAL EMPLOYEE</b></p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> <b>STATEMENT #1:</b> I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. <b>OR</b></p> <p><input type="checkbox"/> <b>STATEMENT #2:</b> I will have a new financial interest in a contract made by a municipal agency.</p> <p><b>My financial interest in a municipal contract is:</b></p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<b>BOX # 2</b>  <b>Select either STATEMENT #1 or STATEMENT #2.</b>	<p><b>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</b></p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> <b>STATEMENT # 1:</b> I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

GREENFIELD, MASS  
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 CITY CLERK

<p><b>Write an X beside your financial interest.</b></p>	<p><b>My financial interest in a municipal contract is:</b></p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> <b>STATEMENT # 2:</b> I will have a new financial interest in a contract made by a municipal agency.</p> <p><b>My financial interest in a municipal contract is:</b></p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input checked="" type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p><b>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</b></p>	
<p>Name and address of municipal agency that made the contract</p>	<p>City of Greenfield, Department of Community and Economic Development, 14 Court Square Greenfield, MA 01301</p>
<p><b>Please put in an X to confirm these facts.</b></p>	<p><b>"My Municipal Agency"</b> is the municipal agency that I serve as a municipal employee.</p> <p>The <b>"contracting agency"</b> is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p><b>FILL IN THIS BOX OR THE BOX BELOW</b></p>	<p><b>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</b></p> <p>- Please explain what the contract is for.</p> <p>Sign replacement on a building for the tenants of Garden Block, LLC which I am a owner member with my husband Isaac J. Mass</p>
<p><b>FILL IN THIS BOX OR THE BOX ABOVE</b></p>	<p><b>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</b></p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p> <p>Garden Block, LLC</p>

	Member Sign replacement for tenants
What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. The forgiveness % of the award which changes over time. Undeterminable at this time.
Date when you acquired a financial interest	<b>2020 at formation</b>
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	The forgiveness % of the award which changes over time. Undeterminable at this time.
<b>Write an X to confirm each statement.</b>	<p><b>FOR A CONTRACT FOR PERSONAL SERVICES –</b></p> <p><b>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</b></p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	<i>Angela Mass</i>
Date:	July 12, 2021

Attach additional pages if necessary.

NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.

**FOR CONTRACTS FOR PERSONAL SERVICES ONLY:**

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

**CERTIFICATION BY HEAD OF CONTRACTING AGENCY**

	<b>INFORMATION ABOUT HEAD OF CONTRACTING AGENCY</b>
Name:	
Title/ Position	
Municipal Agency:	
Agency Address:	
Office Phone:	
	<b>CERTIFICATION</b>
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,  
BOARD OF SELECTMEN OR TOWN COUNCIL**

	<b>INFORMATION ABOUT APPROVING BODY</b>
Name:	
Title/ Position	
Agency Address:	
Office Phone:	
	<b>APPROVAL</b>
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval.
Date:	

Attach additional pages if necessary.  
File disclosure, Certification and Approval with the city or town clerk.