



## Notice of Confidential Information Cover Letter

**This cover letter notifies MassCEC as to the confidentiality of information submitted by the applicant for support indicated below. If this cover letter is not included with information submitted to MassCEC when the information is received by MassCEC, then such information may be made publicly available without further notice to you. All confidentiality claims are subject to verification by MassCEC.**

**POLICY:** As a public entity, MassCEC is subject to Massachusetts' Public Records Law, Codified at Chapter 66 of the Massachusetts General Laws. Thus, any documentary material, data, or other information received by MassCEC, or created by MassCEC, is a public record subject to disclosure. Materials that fall under certain categories, however, may be exempt from public disclosure under a statutory or common law exemption, including the limited exemption at Massachusetts General Laws Chapter 23J, Section 2(k) regarding confidential information submitted to MassCEC by an applicant for any form of assistance.

**PROCEDURE:** In order to make a claim of confidentiality for these categories of materials that may be exempt from disclosure, you must:

- (1) Complete **all** fields below;
- (2) Submit this cover letter with any information for which you are requesting confidential treatment. Please submit a separate cover letter with each separate submission;
- (3) Prominently mark each page containing confidential information "CONFIDENTIAL"; and
- (4) Submit a copy of all non-confidential information (including any redacted versions of partially confidential documents) separate from all materials for which you request confidential treatment.

<b>Name:</b>	<b>Address:</b>
<b>Category (check all that apply):</b>	
<input type="checkbox"/> Information, documents, or data that consist of <b>trade secrets</b>	
<input type="checkbox"/> Information, documents, or data that consist of <b>commercial or financial information regarding the operation of the business conducted</b>	
<input type="checkbox"/> Information, documents, or data regarding the applicant's <b>competitive position in a particular field or endeavor</b>	
<b>If substantial harm would result from disclosure, state what those harmful effects would be and their causal connection to disclosure of the information:</b>	
<b>Period of time for which confidential treatment is desired (e.g., until a certain date, until the occurrence of a specific event, or permanently):</b>	
<b>Date:</b>	<b>Signature:</b>
<b>Application Number (if applicable):</b>	<b>Printed Name (and title, if applicable):</b>