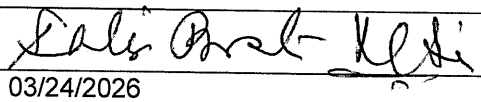
DISCLOSURE BY ELECTED PUBLIC EMPLOYEE OF EXPENSES RELATED TO ATTENDANCE AT AN EVENT SERVING A LEGITIMATE PUBLIC PURPOSE AS REQUIRED BY 930 CMR 5.08(3)(b)

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of **elected** public employee:	Satya Mitra
Title/ Position	City Councilor-At-Large
Office:	City Council
Office address:	455 Main St Room 206 Worcester, MA 01605
Office phone:	508-799-1049
Office E-mail:	Council@worcesterma.gov
Write an X to confirm each statement.	I am filing this disclosure because: _X_ 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 _X_ A non-public entity (but not a lobbyist) has offered to pay or waive expenses worth $50 or more related to the event.
	EVENT ATTENDED
Describe the event that you will attend.	Worcester Red Sox Opening Day Friday, March 27- Pre-Game reception from 1pm – 3pm.
Describe your participation in the event.	Participating in the Worcester Red Sox Opening Day celebration
Date, time and location of event.	Polar Park on March 27, 2026 1pm
	EXPENSES RELATED TO INCIDENTAL HOSPITALITY
Identify the person or organization that offered to reimburse, pay or waive expenses.	Worcester Red Sox

Address of person or organization.	Worcester Red Sox - Polar Park - 100 Madison Street Worcester, Massachusetts 01608
Provide information in as much detail as possible:	***Itemization and explanation of amounts offered:***
Transportation:	N/A
Meals:	*Breakfast, lunch, dinner, special events.* Complimentary food and beverage $25.00
Admission:	*Admission, tickets, etc.* Polar Park ticket at $9
Other (please list):	*Refreshment, entertainment, etc.* N/A
Total:	Total gift value $34
For the exemption to apply, check off both statements.	**Having disclosed the facts above, I determine that:** _X_ 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 _X_ Such public purpose outweighs any special non-work related benefit to me or to the person providing the reimbursement, waiver or payment.
Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	My attendance at an event will serve a legitimate public purpose for promoting tourism and economic development.
Employee signature:	
Date:	03/24/2026

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.