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Contact Information

Name:	RHODE ISLAND MEDICAL TRANSPORTATION ASSOCIATION	Phone:	4017262000
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Reported Compensation:

Date	Type	Value	Paid To
May 01, 2019	Fee	\$4,000.00	TRUE NORTH COMMUNICATIONS

Reported Expenditures:

Date	Amount	Beneficiary	Paid To	Reason	On Behalf Of
No Expenditures reported.					

Reported Anything of Value:

Date	Type	Value	Paid To	Beneficiary	Title	Office	Location
No Anything Of Value reported.							

Reported Contributions:

Date	Amount	Paid To	Beneficiary	Office	Contribution Type
No Contributions reported.					

Reported Subjects:

Medicare

BILL FISCHER via TRUE NORTH COMMUNICATIONS on behalf of **RHODE ISLAND MEDICAL TRANSPORTATION ASSOCIATION**

Reported Bills:

H5913

H5913

Promote

BILL FISCHER via TRUE NORTH COMMUNICATIONS on behalf of **RHODE ISLAND
MEDICAL TRANSPORTATION ASSOCIATION**

Reported Public Bodies:

Health and Human Services, Rhode Island Executive Office of

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Reported Executive Officials:

Executive Office of Health and Human Services

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Office of the Governor

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