



Filed date: Jul 11, 2019 02:49 PM

Contact Information

Name:	ROGER WILLIAMS RADIATION THERAPY, LLC	Phone:	4014504465
Email:	sarah.flaherty@21co.com	Address:	50 Mauds Street Providence, RI 02908

Reported Compensation:

Date	Type	Value	Paid To
Jun 25, 2019	Fee	\$5,000.00	CAPITOL CITY GROUP, LTD.

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:

Business & Professions, Licenses

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

STEPHANIE L. FEDERICO via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

Health & Safety, Hospitals, Licenses, Medical

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

STEPHANIE L. FEDERICO via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

Health Care Plans/Services

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

STEPHANIE L. FEDERICO via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

Reported Bills:

No bills reported.

Reported Public Bodies:

No public_bodies reported.

Reported Executive Officials:

General Assembly

CHRISTOPHER VITALE via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**

STEPHANIE L. FEDERICO via CAPITOL CITY GROUP, LTD. on behalf of **ROGER WILLIAMS RADIATION THERAPY, LLC**