



Filed date: Feb 16, 2020 06:09 AM

Contact Information

Name:	MOBLEY PAIN MANAGEMENT (DE), LLC	Phone:	4014659830
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Reported Compensation:

Date	Type	Value	Paid To
Jan 31, 2020	Fee	\$1,500.00	ANDREW ANNALDO

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:

Medical Marijuana

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

Taxation

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

Reported Bills:

No bills reported.

Reported Public Bodies:

Business Regulation, Department of

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

Health, Department of

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

Reported Executive Officials:

Department of Administration

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

General Assembly

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**

Office of the Governor

ANDREW ANNALDO on behalf of **MOBLEY PAIN MANAGEMENT (DE), LLC**