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Contact Information

Name: RHODE ISLAND BEVERAGE ASSOCIATION Phone: 4013832424

Address: 1 W Exchange St Ste 302

Email: thunt@coca-cola.com Providence,RI

thunt@coca-cola.com Providence,RI 02903

Reported Compensation:

Date Type Value Paid To

No Compensation reported.

Reported Expenditures:

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

Reported Anything of Value:

| Date | Туре | Value | Paid To | Beneficiary | Title | Office | Location |
|--------------------------------|------|-------|---------|-------------|-------|--------|----------|
| No Anything Of Value reported. | | | | | | | |

Reported Contributions:

| Date | Amount | Paid To | Beneficiary | Office | Contribution Type |
|-------------|------------------|---------|-------------|--------|-------------------|
| No Contribu | utions reported. | | | | |

Reported Subjects:

Taxation

CAROLYN MURRAY via F/S CAPITOL CONSULTING, LLC on behalf of RHODE ISLAND BEVERAGE ASSOCIATION

MARGARET HOGAN SWEENEY via F/S CAPITOL CONSULTING, LLC on behalf of RHODE ISLAND BEVERAGE ASSOCIATION

THOMAS PAPA via F/S CAPITOL CONSULTING, LLC on behalf of RHODE ISLAND BEVERAGE ASSOCIATION

Reported Bills:

No bills reported.

Reported Public Bodies:

No public_bodies reported.

Reported Executive Officials:

No executive_officials reported.