



Filed date: Mar 03, 2021 11:59 AM

Contact Information

Name:	THUNDERMIST	Phone:	4012356812
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Reported Compensation:

Date	Type	Value	Paid To
Feb 22, 2021	Fee	\$2,500.00	MAYFORTH GROUP

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:

Health & Safety

JEFFREY M TAYLOR via MAYFORTH GROUP on behalf of **THUNDERMIST**

RICHARD M MCAULIFFE via MAYFORTH GROUP on behalf of **THUNDERMIST**

Health Care Plans/Services

BENJAMIN G SHUMATE via MAYFORTH GROUP on behalf of **THUNDERMIST**

Reported Bills:

No bills reported.

Reported Public Bodies:

Health and Human Services, Rhode Island Executive Office of

BENJAMIN G SHUMATE via MAYFORTH GROUP on behalf of **THUNDERMIST**

RICHARD M MCAULIFFE via MAYFORTH GROUP on behalf of **THUNDERMIST**

Reported Executive Officials:

EOHHS

BENJAMIN G SHUMATE via MAYFORTH GROUP on behalf of **THUNDERMIST**

JEFFREY M TAYLOR via MAYFORTH GROUP on behalf of **THUNDERMIST**

RICHARD M MCAULIFFE via MAYFORTH GROUP on behalf of **THUNDERMIST**