



Filed date: Apr 07, 2021 02:03 PM
Amended date: Apr 07, 2021 02:29 PM

Contact Information

Name: THE WOMXN PROJECT
Phone: 4014000061
Email: info@thewomxnproject.org
Address: P.O. Box 335
Wakefield, RI
02880

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	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

BARBARA COLT on behalf of THE WOMXN PROJECT

Reported Bills:

H5544

H5544	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

H5604

H5604	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

H5763

H5763	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

H5787

H5787	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

H5843

H5843	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

H6003

H6003	Promote	BARBARA COLT on behalf of THE WOMXN PROJECT
--------------	----------------	--

Reported Public Bodies:

No public_bodies reported.

Reported Executive Officials:

No executive_officials reported.