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## Contact Information

**Name:** PROVIDENCE COMMUNITY HEALTH CENTERS  
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02905

## Reported Compensation:

Date	Type	Value	Paid To
Mar 31, 2021	N/A	\$2,000.00	THE BRADFORD 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:

### Budget

CHRIS REILLY via THE BRADFORD GROUP on behalf of **PROVIDENCE COMMUNITY HEALTH CENTERS**

WALLACE B. GERNT via THE BRADFORD GROUP on behalf of **PROVIDENCE COMMUNITY HEALTH CENTERS**

### Health Care Affordability

CHRIS REILLY via THE BRADFORD GROUP on behalf of **PROVIDENCE COMMUNITY HEALTH CENTERS**

## Reported Bills:

No bills reported.

## Reported Public Bodies:

No public\_bodies reported.

## Reported Executive Officials:

No executive\_officials reported.