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Contact Information

Name: BUSINESS OWNERS OF CHILD CARE ASSOCIATION
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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 Contributions

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

Reported Anything of Value

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

Reported Subjects

Children and Families

RICHARD M MCAULIFFE via MAYFORTH GROUP on behalf of BUSINESS OWNERS OF CHILD CARE ASSOCIATION
JEFFREY M TAYLOR via MAYFORTH GROUP on behalf of BUSINESS OWNERS OF CHILD CARE ASSOCIATION

Reported Bills

No bills reported.

Reported Public Bodies

Health and Human Services, Rhode Island Executive Office of

RICHARD M MCAULIFFE via MAYFORTH GROUP on behalf of BUSINESS OWNERS OF CHILD CARE ASSOCIATION

JEFFREY M TAYLOR via MAYFORTH GROUP on behalf of BUSINESS OWNERS OF CHILD CARE ASSOCIATION

Reported Executive Officials

No executive officials reported.