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Contact Information

Name: PETER HOLLMANN
Email: phollmann@brownhealth.org

Phone: 1 (401) 331-3207
Address: 225 Dyer Street
Providence, RI
02903

Reported Compensation

Date	Type	Value	Paid By
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

Business & Professions,Health & Safety,Medical,Physicians

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Food and Drugs

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Health & Safety,Health Care Plans/Services

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Health & Safety,Health Care Plans/Services,Health Insurance

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Health & Safety,Medical

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Health Care Plans/Services,Health Insurance,Insurance,Physicians

PETER A. HOLLMANN on behalf of RI MEDICAL SOCIETY

Reported Bills

No bills reported.

Reported Public Bodies

No public bodies reported.

Reported Executive Officials

No executive officials reported.