



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Certificate Request Form**

**Request Information**

ID	ENTITY NAME	CERTIFICATE TYPE
000039318	Rhode Island Inter-Local Risk Management Trust, Inc.	Certificate of Good Standing

**Filer's Contact Information**

*(Enter a contact name, mailing address and email.)*

Contact Name: Debra P. Maynard

Business Name: Rhode Island Interlocal Risk Management Trust

No. and Street: 501 Wampanoag Trail  
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City or Town: East Providence

State: RI Zip: 02915 Country: USA

Contact Phone: 401-438-6511 ext: 541

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**Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.**