



**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
000091769	Campus Compact	Certificate of Good Standing

Filer's Contact Information

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

Contact Name: Maria Gregory

Business Name: Campus Compact

No. and Street: 45 Temple Place

City or Town: Boston

State: MA

Zip: 02111

Country: USA

Contact Phone: ext:

Contact Email: mgregory@compact.org