



**State of Rhode Island  
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
001028373	Veterans Inc.	Certificate of Good Standing

**Filer's Contact Information**

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

Contact Name: Amanda Mehaffey

Business Name: VETERANS INC

No. and Street: 69 GROVE ST

City or Town: WORCESTER

State: MA

Zip: 01605-2600 Country: USA

Contact Phone: 5087911213 ext: 1145

Contact Email: amandamehaffey@veteransinc.org