



Rhode Island Owner's Manual Online Update Form

The information asked below is to update the information for your **office**.
To view current listings please follow this link to search your listing: <http://www.sos.ri.gov/govdirectory/>
To make a correction please complete the fields with the necessary changes.

Municipal Contact Information

Municipality Name: _____

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ TTY: _____

Email: _____ Website: _____

City or Town: _____ Hall Hours: _____

Police phone: _____ Fire Phone: _____

Form of government: _____ Election date: _____

Fiscal year begins: _____

Council meetings: _____ Financial meetings: _____

Date of incorporation: _____ Date established: _____

Census: _____ Census year: _____

Municipal Staff

Title: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Title: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Title: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Title: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Title: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

City/Town Council

Name: _____

Email: _____

Phone: _____

List Order: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

School Committee

Name: _____

Email: _____

Phone: _____

List Order: _____

Name: _____

Email: _____

Phone: _____

List Order: _____

Name: _____

Email: _____

Phone: _____

List Order: _____