



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
DIVISION OF TAXATION
One Capitol Hill
Providence, RI 02908-5800

Tax # 454077

CERTIFICATE OF EXEMPTION

OCEAN STATE ASSISTED LIVING
D/B/A THE SEASONS EAST GREENWICH
5 SAINT ELIZABETH WAY
EAST GREENWICH, RI 02818

THIS IS TO CERTIFY THAT THE ABOVE NAMED INSTITUTION HAS QUALIFIED FOR EXEMPTION PURSUANT TO THE PROVISIONS OF THE RHODE ISLAND SALES AND USE TAX ACT, CHAPTER 18, TITLE 44, OF THE GENERAL LAWS OF 1956, AS AMENDED, AND IS ACCORDINGLY EXEMPT FROM THE PAYMENT OF THE SALES TAX ON SALES MADE TO IT AND FROM THE USE TAX ON THE STORAGE, USE OR OTHER CONSUMPTION OF TANGIBLE PERSONAL PROPERTY BY IT.

A COPY OF THIS CERTIFICATE SHOULD BE KEPT ON FILE BY A RHODE ISLAND SALES AND USE TAX PERMIT HOLDER TO COVER THE EXEMPT SALE(S) MADE TO THIS INSTITUTION. PAYMENT MUST BE MADE DIRECTLY BY THIS INSTITUTION. THIS CERTIFICATE DOES NOT EXPIRE AS LONG AS HOLDER IS IN EXISTENCE.

R. GARY CLARK
TAX ADMINISTRATOR

BY:

PETER J. MCVAY
CHIEF REVENUE AGENT
FIELD AUDIT SERVICE

CERTIFIED NUMBER: 8719

DATE ISSUED : March 14, 2001
DUPLICATE : November 17, 2005-name & address change



State of Rhode Island and Providence Plantations
DEPARTMENT OF HEALTH
CENTER FOR HEALTH FACILITIES REGULATION

This is to certify that THE SEASONS EAST GREENWICH
5 ST ELIZABETH WAY EAST GREENWICH RI 02818
License Number: ALR01419

is hereby authorized to conduct and maintain a Special Care Unit in conformity with Rhode Island General Law Chapter 23-17.4 and the standards, rules and regulations prescribed thereunder. This license is subject to annual renewal at the beginning of each calendar year unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please contact the Center for Health Facilities Regulation at (401) 222-2566 for more information.

Handwritten signature of Seema Dixit in black ink.

Seema Dixit, MS, MPH
Chief, Center for Health Facilities Regulations

Resident Capacity = 21

Expires: 12/31/2017

Handwritten signature of Nicole Alexander-Scott in black ink.

Nicole Alexander-Scott, MD, MPH
Director of Health

Issued: 01/01/2015



NATURAL GAS BILL

www.nationalgridus.com

CUSTOMER SERVICE
1-800-322-3223
CREDIT DEPARTMENT
1-888-211-1313
GAS EMERGENCIES
1-800-640-1595
POWER OUTAGE OR DOWNED LINE
1-800-465-1212
CORRESPONDENCE ADDRESS
PO Box 960
Northborough, MA 01532-0960

PAYMENT ADDRESS
PO Box 11739
Newark, NJ 07101-4739
DATE BILL ISSUED
Sep 5, 2017

SERVICE FOR
OCEAN STATE ASSISTED LIVING
5 SAINT ELIZABETH WAY
EAST GREENWICH RI 02818

BILLING PERIOD
Jul 31, 2017 to Aug 31, 2017

ACCOUNT NUMBER
39664-93008

PLEASE PAY BY
Sep 29, 2017

AMOUNT DUE
\$ 1,033.44

ACCOUNT BALANCE

Previous Balance 994.65
Payment Received on AUG 28 (Check) *THANK YOU* - 994.65
Current Charges + 1,033.44
Amount Due \$ 1,033.44

To avoid late payment charges of 1.25%, \$ 1,033.44 must be received by Sep 29 2017.

SUMMARY OF CURRENT CHARGES

DELIVERY SERVICES	SUPPLY SERVICES	OTHER CHARGES/ADJUSTMENTS	TOTAL
Gas Service	1,002.44	Billed by supplier	1,002.44
Other Charges/Adjustments		31.00	31.00
Total Current Charges	\$ 1,002.44	\$ 31.00	\$ 1,033.44

Save time and money! Sign up for paperless billing and receive a \$ 0.34 credit on your monthly bill. Visit our website to enroll today.

What is the Energy Efficiency Charge on my bill? This charge funds Energy Efficiency programs that can help consumers lower their energy usage and bills, improve comfort in their homes or businesses, and lower pollutants and carbon emissions in our communities. To learn how to take advantage of these programs and your eligibility, please call 1-866-903-2811 or visit www.ngrid.com/ri-ee.

WILL WE BE ABLE TO REACH YOU DURING A POWER OUTAGE?: During a power outage, phones with a direct link to a local phone line are able to operate. Phones that are not directly linked (for example, wireless phones with answering machines) need electricity to make/receive calls. If you would like to register another phone number, such as a cell phone, as your account's primary phone number, please go to www.nationalgrid.com/ri-ee to update your information so that we may be able to reach you with important information during power outages.

Gas Usage History

Month	Therms	Month	Therms
Sep 16	1020	Apr 17	6234
Oct 16	1603	May 17	3175
Nov 16	2789	Jun 17	2365
Dec 16	3941	Jul 17	1645
Jan 17	6258	Aug 17	1432
Feb 17	6254	Sep 17	1539
Mar 17	5380		

9/15/17
Check # 31722
Authorized [Signature]

Account #

KEEP THIS PORTION FOR YOUR RECORDS.



SERVICE FOR
 OCEAN STATE ASSISTED LIVING
 5 SAINT ELIZABETH WAY
 EAST GREENWICH RI 02818

BILLING PERIOD
 Jul 31, 2017 to Aug 31, 2017

ACCOUNT NUMBER 39664-93008
 PLEASE PAY BY Sep 29, 2017
 AMOUNT DUE \$ 1,033.44

Enrollment Information

To enroll with a supplier or change to another supplier, you will need the following information about your account:

Acct No: 39664-93008 Cycle: 3, OCEA

Enrollment Information

To enroll with a supplier or change to another supplier, you will need the following information about your account:

Acct No: 39664-93008 Cycle: 3, OCEA

DETAIL OF CURRENT CHARGES

Delivery Services

Service Period	No. of days	Current Reading	Previous Reading	Measured CCF	Therm Factor	Therms Used
Jul 31 - Aug 31	31	17389 Actual	15892 Actual	1497	1.028	1538.916

METER NUMBER 00473240 NEXT SCHEDULED READ DATE ON OR ABOUT Oct 2
 RATE C&I Large Low Load FT1

Customer Charge	175.00
LIHEAP Enhancement Chg	0.81
Distribution Charge	0.1727 x 1538.916 Therms
Distribution Adj Chg	0.1067 x 1538.916 Therms
Demand Charge	1.3 x 219.177 Therms
Energy Efficiency Prgms	0.0726 x 1538.916 Therms
Total Delivery Services	\$ 1,002.44

Other Charges/Adjustments

Gross Earnings Tax	0.0309278 x 1,002.44	31.00
Total Other Charges/Adjustments		\$ 31.00

