



State of Rhode Island

Providence, S.C.

Workers' Compensation Court

V.

W.C.C. No.

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, 20____, I caused to be mailed a copy of the petition and a copy of the notice of pretrial conference to the entities selected below at the addresses listed on the petition and/or the cover sheet.

- Employee
- Employer
- Insurance Company
- Third Party Administrator
- Employer's Agent For Service

Signature of Attorney

Petitioner's/ Attorney's Name and Registration No.

Address

Telephone