



For: JR103629 Inspector General

RESKF.docx

Phone Composite Header Grouping Icon Phone
Email Composite Header Grouping Icon Email
Location Header Grouping Icon Location
Jobs Applied to 1
Documents with Check Header Grouping Icon Documents with Check

Attachments

Attachments

Resume / Cover Letter

Attachment	
RESKF.docx	

Other Documents

Attachment	Category	

Candidate

Job Application Details Card

Job Application Details

Job Requisition JR103629 Inspector General (Open)
Location Providence
Date Applied 08/18/2026 03:02:01 PM
Source Internal -> Internal Application

Thomas A Verdi
Hiring Manager
Colleen Halloran-Villandr
Recruiter

In Progress



	Step	Awaiting Me	Awaiting
Screen: Katharine Flaherty (Internal) - JR103629 Inspector General (C121944)	Referred	Screen Candidate	1

Active Job Applications

Active Job Applications (1)

Job Application for Active Job Applications

Task	Katharine Flaherty (Internal) - JR103629 Inspector General (C121944)
Stage Label	Referred
	Location: Providence Date Applied: 08/18/2026

Education

Education	School for Conversion
	BA
	Psychology
	From 2000
	To 2004

Work History

Work History	
Experience	none entered

Credentials

Languages	none entered
Websites	none entered
Skills	none entered

Katharine Flaherty



August 21, 2026

Rhode Island Department of State
RI Secretary of State, Gregg M. Amore

Greetings,

This application is in response to the posting for Inspector General. I am very interested in pursuing this opportunity and have enclosed my resume for your review.

This position is one that I have wanted for a long time. I have the appropriate abilities and personality to be of service to the great State of Rhode Island and all its people. I would relish the opportunity to help my State to the best of my ability. I have had various positions within the State that have given me an incredible "on-the-job education" as well as a strong desire to see Justice within this State; I have a passion for serving the people of the State of Rhode Island to ensure a strong future for the State itself and everyone who loves Rhode Island as much as I do.

I am a thoughtful listener and communicate well. I do what I can to be understood and make sure that all information is as clear as possible. I also have the education, professional experience, and skills needed for the position. My organizational, analytical, and communication skills are superior and I am skilled with computers. I am a very fast learner and enjoy the challenge of adding to my skill set. I multitask well so I manage multiple projects simultaneously. I am especially detail oriented and have a strong interest in seeing projects done well. I enjoy interacting with others and I can thrive in a team environment just as easily as I take initiative and work well independently. I am used to working with a high level of integrity and maintaining a professional demeanor at all times. I would love the opportunity to contribute more meaningfully to the State of Rhode Island and truly make a difference.

I have received various vocational trainings that would make me an asset to the State. I have taken courses in technical writing, business math, customer service, Spanish, Adobe Acrobat, MadCap Flare, Microsoft Word, Microsoft Excel, and Lotus Notes.

I would be happy to discuss the position with you and I am available at your convenience. Thank you for your time and consideration.

Warm Regards,

Katharine Flaherty

Katharine Flaherty

Professional Experience

Rhode Island Workers' Compensation Court

Administrative Assistant

2018-present time

Administrative assistant duties for the Medical Advisory Board. Maintain files for the Impartial Medical Examiners and preparing meeting minutes and agendas for the Board. Processing the incoming mail. Maintain the Court's Law Library. Provide administrative support to the Court's Administrator.

Rhode Island Department of Children, Youth, and Families

Child Protective Investigator

2017-2018

Conducting interviews in the field and on the phone to determine if children are safe or at risk. Setting families up with services to maintain family units and monitoring compliance with those services. Writing reports and petitions for the court system as required.

Rhode Island Department of Attorney General

District Court Paralegal

2013-2017

Preparing the prosecution files for the District Court daily calendar. Preparing discovery and defendant motions for the prosecution. Managing the fugitive cases and arranging for fugitive pick up with the respective rendition state or agency. Reviewing criminal dockets and BCI reports to prepare criminal violation packages based on new information gathered from police reports and criminal complaints. Providing information to the public and local police departments. Completing dating entry and scheduling for cases files.

United States Bankruptcy Court, District of Rhode Island

Case Administrator

2008-2012

Quality control and data entry pertaining to newly filed pleadings and cases. Provided professional, effective service and assistance to both internal and external customers with general inquiries, form information, and procedural information. Administrative assistant duties for the Clerk of court; assisting with HR responsibilities; serving on several committees and received various vocational training opportunities offered by the court.

Rhode Island Superior Court

General Operations Assistant

2004-2008

Responsible for pleadings involving the *Rhode Island Lead Paint* case and carried out administrative responsibilities including preparing calendars and case files for court dates, use of computer system to research case history, add case information, put new cases in system, scheduling calendars, relating case information to the public, researching warrant information, processing payments.

Education

University of Rhode Island

Bachelor's Degree in Psychology



RHODE ISLAND ETHICS COMMISSION

40 Fountain Street
Providence, RI 02903
(401) 222-3790

2025 YEARLY FINANCIAL STATEMENT

To complete and file online visit: <https://www.ri.gov/ethics>

ALL QUESTIONS REFER TO THE 2025 CALENDAR YEAR UNLESS OTHERWISE SPECIFIED.

PLEASE ANSWER **ALL QUESTIONS** AND WHERE YOUR ANSWER IS "NONE" OR "NOT APPLICABLE" SO STATE. WE WILL NOT ACCEPT A STATEMENT IF ANY QUESTIONS ARE LEFT BLANK.

ANSWERS SHOULD BE PRINTED OR TYPED. Additional sheets may be used if more space is needed. For clarification of any question, refer to the Instruction Sheet or contact the Ethics Commission.

Note: If you are a state, municipal or regional official or employee, or a candidate for elected office, who is required to file a Yearly Financial Statement, failure to file accurately and on time may subject you to a substantial monetary fine. If you dispute your status as a required filer, you must contact the Ethics Commission prior to the filing deadline. **Upon filing of this form, it will become a public document available for review.**

1. Flaherty Katharine A.
LAST NAME FIRST NAME MIDDLE INITIAL SUFFIX

2. [REDACTED] R.I. [REDACTED]
CURRENT MAILING ADDRESS: (STREET OR PO BOX) (CITY/TOWN) (STATE) (ZIP CODE)

3. List any Public Position(s) you held for any length of time in calendar years 2025 or 2026.

<u>Asst. Administrator</u>	<u>R.I. W.C.C.</u>	<u>7/8/2009</u>	<u>N/A</u>
PUBLIC POSITION	MUNICIPALITY, STATE OR REGIONAL ENTITY	DATE ELECTED, APPOINTED OR HIRED	TERMINATION OR RESIGNATION DATE (IF APPLICABLE)

PUBLIC POSITION	MUNICIPALITY, STATE OR REGIONAL ENTITY	DATE ELECTED, APPOINTED OR HIRED	TERMINATION OR RESIGNATION DATE (IF APPLICABLE)
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4. List any elected office (state, municipal or regional) for which you were/are a candidate in either calendar year 2025 or 2026.

<u>N/A</u>		
ELECTED OFFICE	MUNICIPALITY, STATE OR REGIONAL ENTITY	DATE CANDIDACY DECLARED

5. List full name of spouse if you were married or were a party to a civil union for any part of 2025.

<u>N/A</u>

6. This question has **two parts**, each referring to occupational income received during calendar year 2025.

PART I: Provide a separate answer for each instance in which you, your spouse or dependent child received either \$1,000 or more gross income from an employer during 2025; or \$1,000 or more gross income through self-employment. Income received from public employment or service, including any stipend received for serving as an elected or appointed official, must be disclosed. List the following:

PERSON WHO RECEIVED INCOME	NAME & ADDRESS OF EMPLOYER OR SELF-EMPLOYMENT ENTITY	DATES AND NATURE OF OCCUPATION OR PROFESSION
(Self only) Katherine A. Flaherty	One Dorrance Plaza Prov., RI 02903	Clerical work

PART II: If you, your spouse or dependent child were self-employed and received more than \$250 in gross income for services rendered to a state or municipal agency, list the following:

PERSON WHO RECEIVED INCOME	NAME & ADDRESS OF AGENCY RECEIVING SERVICES	DATES AND NATURE OF SERVICES RENDERED
N/A		

7. List any real estate, wherever located, other than real estate that is used **exclusively** (see instructions) as your principal residence, in which you, your spouse or dependent child had a financial interest during any part of calendar year 2025. If no street address exists, use legal description.

PERSON WITH INTEREST	NATURE OF INTEREST	ADDRESS OR LEGAL DESCRIPTION
N/A		

8. If you, your spouse or dependent child received **any** income as a beneficiary of any trust, list the following:

NAME OF PERSON RECEIVING TRUST INCOME: N/A

NAME OF TRUST: _____

TRUSTEE NAME AND ADDRESS: _____

LIST EACH TRUST ASSET, IF KNOWN, FROM WHICH MORE THAN \$1,000 IN GROSS INCOME WAS RECEIVED (ASSET VALUE NEED NOT BE DISCLOSED): _____

9. If you, your spouse or dependent child held a management position or were a director, officer, partner, or trustee of any business, organization or other entity (for profit or non-profit), whether paid or unpaid for such service, list the following:

NAME OF FAMILY MEMBER	NAME & ADDRESS OF ENTITY	POSITION
N/A		

10. If during the 2025 calendar year any person or entity provided you with out-of-state travel valued at over \$250, AND you would not have been provided with such travel but for the fact that you held a public office or position, you must list the source, value and description of the travel and related expenses below. Attach additional sheets if necessary.

Out-of-state travel includes all related expenses such as transportation, lodging, meals and entertainment. All of these expenses are considered together when determining whether the \$250 limit has been reached.

Exceptions: You do not have to disclose out-of-state travel that is provided to you either by your regular private employer or by the state or municipal agency of which you are a member or by which you are employed.

NAME AND ADDRESS OF TRAVEL PROVIDER	TRAVEL PURPOSE AND DESTINATION	DESCRIPTION AND COST OR FAIR MARKET VALUE OF EXPENSE (TRANSPORTATION, LODGING, MEALS & ENTERTAINMENT)
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N/A

11. If at any point during calendar year 2025, you, your spouse, or dependent child individually or collectively held a 10% or greater ownership interest, or a \$5,000 or greater ownership or investment interest in any business (including holding publicly traded stock in a company), you must list the following (attaching additional sheets if necessary):

NAME OF FAMILY MEMBER	NATURE OF INTEREST	NAME & ADDRESS OF BUSINESS (NO ADDRESS NEEDED FOR PUBLICLY TRADED STOCK HOLDINGS)
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N/A

12. If, during calendar year 2025, any business you listed in Question #11 had one or more business transactions with a Rhode Island state or municipal agency that, collectively, exceeded \$250, list the following:

NAME OF BUSINESS	WAS INTEREST IN BUSINESS HELD ALL YEAR? IF NOT, LIST DATE INTEREST ACQUIRED OR DIVESTED	NAME OF STATE OR MUNICIPAL AGENCY TRANSACTING BUSINESS	DATE AND NATURE OF TRANSACTION
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N/A

13. If, during calendar year 2025, any business listed in Question #11 was subject to direct regulation by a Rhode Island state or municipal agency (see instructions for examples of direct regulation), list the following:

NAME OF BUSINESS	WAS INTEREST IN BUSINESS HELD ALL YEAR? IF NOT, LIST DATE INTEREST ACQUIRED OR DIVESTED	NAME OF STATE OR MUNICIPAL AGENCY REGULATING BUSINESS	MANNER IN WHICH BUSINESS IS REGULATED
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N/A

14. This question relates to business interests, acquired or divested AFTER calendar year 2025, **that are regulated by a public agency**. Answer below regarding any businesses in which you, your spouse, or dependent child individually or collectively ACQUIRED or DIVESTED a 10% or greater ownership interest or a \$5,000 or greater ownership or investment interest (including holdings of publicly traded stock) AFTER JANUARY 1, 2026 but prior to filing this statement, IF said business was subject to direct regulation by a Rhode Island state or municipal agency. (See instructions for examples of direct regulation.)

NAME OF BUSINESS	NATURE OF INTEREST AND DATE ACQUIRED OR DIVESTED	NAME OF STATE OR MUNICIPAL AGENCY REGULATING BUSINESS	MANNER IN WHICH BUSINESS IS REGULATED
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N/A

15. This question relates to business interests, acquired or divested AFTER calendar year 2025, **that did business with a public agency**. Answer below regarding any business in which you, your spouse, or dependent child individually or collectively ACQUIRED or DIVESTED a 10% or greater ownership interest or a \$5,000 or greater ownership or investment interest (including holdings of publicly traded stock) AFTER JANUARY 1, 2026 but prior to filing this statement, IF said business had one or more business transactions with a Rhode Island state or municipal agency that, collectively, exceeded \$250.

NAME OF BUSINESS	NATURE OF INTEREST AND DATE ACQUIRED OR DIVESTED	NAME OF STATE OR MUNICIPAL AGENCY TRANSACTING BUSINESS	DATE AND NATURE OF TRANSACTION
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N/A

16. If you, your spouse, or dependent child were indebted in an amount exceeding \$1,000 to any person, business, financial institution, or other organization, list the name and address of the lender or creditor. This does NOT include, and you should not list, the following types of debt: (a) debt owed to a family member within the third degree of consanguinity or affinity (see instructions); (b) debt that is secured solely by a mortgage of record on real property that is used exclusively as a principal residence, if the debt is held by a financial institution regulated by any state or by the United States; or (c) debt owed to a credit card company, unless the collection of such credit card debt resulted in court proceedings and the issuance of a default judgment that was not fully satisfied/paid by the start of the relevant filing year.

NAME OF DEBTOR

NAME AND ADDRESS OF LENDER OR CREDITOR

N/A

I certify under penalty of perjury that this Financial Statement is a complete and accurate response to the questions presented as to the financial information and interests of myself, my spouse, and my dependent children. I understand that a failure to provide complete and accurate responses to each question is a violation of the law that may result in the imposition of substantial penalties, including fines. I understand that I am subject to the statutory and regulatory provisions of the Rhode Island Code of Ethics (available at <https://ethics.ri.gov> or by contacting the Ethics Commission) and that I may seek assistance and guidance from the Ethics Commission as to any issues or questions I have relative to my conduct under the Code of Ethics or as to the information that must be disclosed on this Financial Statement.

Katharine Flaherty
SIGNATURE

State of

Rhode Island

County of

Providence

Subscribed and sworn to before me at

3:30

this 20th day of August 2026.

My Commission expires

7-1-26

ID #

752266

SIGNATURE OF NOTARY PUBLIC

THIS STATEMENT WILL BE RETURNED IF IT IS NOT SIGNED AND NOTARIZED OR IF ANY QUESTION IS NOT ANSWERED. (USE "N/A" OR "NONE" WHERE APPROPRIATE.)

