



Chief Executive Officer (Senior Officer): Riendeau, Serge

Reporting period : November 2020

TRAVEL EXPENSES											
Reference Number	Travel Details				Amounts						Comments
	Purpose of travel	Departure	Return	Destinations	Airfare	Other transportation	Lodging	Meals & incidentals	Other	Total	
<i>Nothing to report</i>											

**The CEO holds a part-time position and does not reside in Ottawa, therefore a large portion of these expenses reflect travel between the CEO's residence and the CDC office in Ottawa.*

HOSPITALITY EXPENSES							
Reference Number	Hospitality Details		Location		Attendee(s)		Amount of the expense
	Purpose of hospitality activity	Date	City	Establishment or Vendor	GOC Officials	Guests	
<i>Nothing to report</i>							



Chairman (Senior Officer): Ingratta, Robert

Reporting period : November 2020

TRAVEL EXPENSES											
Reference Number	Travel Details				Amounts						Comments
	Purpose of travel	Departure	Return	Destinations	Airfare	Other transportation	Lodging	Meals & incidentals	Other	Total	
<i>Nothing to report</i>											

**The CHAIR holds a part-time position and does not reside in Ottawa, therefore a large portion of these expenses reflect travel between the CHAIR's residence and the CDC office in Ottawa.*

HOSPITALITY EXPENSES							
Reference Number	Hospitality Details		Location		Attendee(s)		Amount of the expense
	Purpose of hospitality activity	Date	City	Establishment or Vendor	GOC Officials	Guests	
<i>Nothing to report</i>							



Commissioner (Senior Officer): Hayes, Jennifer

Reporting period : November 2020

TRAVEL EXPENSES											
Reference Number	Travel Details				Amounts						Comments
	Purpose of travel	Departure	Return	Destinations	Airfare	Other transportation	Lodging	Meals & incidentals	Other	Total	
<i>Nothing to report</i>											

*The COMM holds a part-time position and does not reside in Ottawa, therefore a large portion of these expenses reflect travel between the COMM's residence and the CDC office in Ottawa.

HOSPITALITY EXPENSES							
Reference Number	Hospitality Details		Location		Attendee(s)		Amount of the expense
	Purpose of hospitality activity	Date	City	Establishment or Vendor	GOC Officials	Guests	
<i>Nothing to report</i>							