



# NIRB Hospitality Expense



**Reference Number: H-2023-P3-Nothing to Report**

**Disclosure Group:**

**Title:**

**Name:**

**Organization:**

**Location:**

**Total:**

**Description:**

**Start Date:**

**End Date:**

**Attendees (NIRB Board and Employees):**

**Attendees (Guests):**

**Name of commercial establishment or vendor involved in the hospitality activity:**