## COMMITTEE ON NATURAL RESOURCES 118<sup>th</sup> Congress Disclosure Form As required by and provided for in House Rule XI, clause 2(g)(5)

Indian and Insular Affairs Hearing on 6 Bills 06/07/2023

For Individuals: N/A
Name: Address: Email Address: Phone Number:
* * * * *
For Witnesses Representing Organizations:
Name: Francys Crevier Name of Organization(s) You are Representing at the Hearing: The National Council of Urban Indian Health Business Address: 1 Massachusetts Ave NW, Suite 800-D, Washington, D.C. 20001 Business Email Address: policy@ncuih.org Business Phone Number: 202.544.0344
* * * *
For Nongovernment Witnesses ONLY:
1. Please attach/include current curriculum vitae or resume.
See attached
2. Please list any federal grants or contracts (including subgrants or subcontracts) related to the subject matter of the hearing that were received in the current year and previous two calendar years by you or the organization(s) you represent at this hearing, including the source and amount of each grant or contract.
See attached.
3. Please list any contracts or payments originating with a foreign government related to the subject matter of the hearing that were received in the current year and previous two calendar years by you or the organization(s) you represent at this hearing, including the amount and country of origin of each contract or payment.
See attached.

4. Please disclose whether you are a fiduciary (including, but not limited to, a director, officer, advisor, or resident agent) of any organization or entity that has an interest in the subject matter of the hearing.
CEO of the National Council of Urban Indian Health.

5. Please list any current or pending litigation against the Federal government to which you or your organization is a party. Please disclose as applicable case name, docket number, the court, and subject matter of the litigation.

N/A.