

Filer Information	GENERAL INFORMATION
First Name:	Mercedes
Middle Initial:	
Last Name:	Narcisse
Is Termination Report:	no
Termination Date:	

Profile: Mercedes Narcisse	GENERAL INFORMATION
Reasons For Filing	elected_official,
1. Did you have a paid or unpaid position during 2021 with a City agency other than your current/final City agency?	no
2. Did you have any non-City employment or engage in any business during 2021?	yes
3. Did you hold a position as an officer of any political party or political organization or as a member of any political party committee or as a political party district leader during 2021?	no
4. Did you hold any office, position, trusteeship, directorship, or partnership, whether compensated or not, including any honorary position, during 2021, other than a position with the City or State of New York or a political position?	no
5. Did you receive any income of \$1,000 or more from any source (e.g., bank interest) during 2021, other than from your City position and other than from non-City employment or a business?	no
6. In 2021, did you practice law or were you a licensed real estate broker or agent or did you practice a profession licensed by the State Department of Education?	yes
7. Did you earn any deferred income of \$1,000 or more during 2021, or any time before 2021, which was paid or was to be paid after the close of 2021?	no

<p>8. Did you have during 2021 any agreements with a former or current employer, other than the City of New York, for the continuation of payments or benefits of \$1,000 or more?</p>	<p>no</p>
<p>9. Did any non-governmental entity or person pay for travel- related expenses in an amount of \$1,000 or more during 2021 for activities related to your official duties with the City by either reimbursing you or paying the travel related expenses directly on your behalf?</p>	<p>no</p>
<p>10. Did you receive any gift or gifts from the same person, entity or donor or affiliated donors who had business dealings with the city, other than a relative, in the total amount or with a total value of \$50 or more during 2021?</p>	<p>no</p>
<p>11. Did you receive any gift or gifts from the same person, entity or donor or affiliated donors who had no business dealings with the City, other than a relative, in the total amount or with a total value of \$1,000 or more during 2021?</p>	<p>no</p>
<p>12. Was any loan, note, or account receivable owed to you during 2021 in the amount of \$1,000 or more by anyone other than a relative (i.e., did anyone owe you money)?</p>	<p>no</p>
<p>13. Did you owe any entity or person (other than a relative) \$5,000, excluding mortgages on your primary and secondary residences, or more for a period of 90 consecutive days during 2021 or on the date you file this report?</p>	<p>no</p>
<p>14. Did you hold any security at the close of 2021 having a market value of \$1,000 or more?</p>	<p>no</p>
<p>15. Did you have a vested or contingent interest valued at \$1,000 or more in any real property during 2021, aside from your primary or secondary personal residence (unless your primary or secondary residence is co-owned by someone who is not a relative)?</p>	<p>no</p>
<p>16. Did you have an investment of \$1,000 or more during 2021 in a business, other than an investment in securities or an interest in real property?</p>	<p>no</p>
<p>17. Did you, or any partnership of which you are a member or any corporation 10% or more of whose stock you own or control, have any interest of \$1,000 or more, excluding bonds and notes, in any contract made or executed by a State or local agency during 2021?</p>	<p>no</p>

18. Did you hold any trust, estate, or other beneficial interest of \$1,000 or more during 2021, including New York City or New York State deferred compensation plans but excluding membership in New York City or New York State retirement systems, and excluding any interest in a trust, estate, or other beneficial interest established by or for a relative or by or for the estate of a relative?	no
19. Did you assign income of \$1,000 or more to any person, including a relative, during 2021?	no
20. Did you transfer any interest having a value of \$1,000 or more in a trust, estate, other beneficial interest, securities, or real property to a non-relative for less than fair consideration during 2021?	no
21. Did you have any contract, promise, or agreement during 2021 with any person or entity with respect to your employment after leaving your City office or position?	no
22. Do you have any relative(s) holding a position, whether paid or unpaid, with the City?	no

Filer's Primary City Position	POSITIONS, INCOME AND REIMBURSEMENTS
CURRENT/FINAL AGENCY	City Council - 102
Address Line 1	250 broadway
Address Line 2	
City	New York
State	NY
Zip	10007
Telephone	212 7887100
Position Title	Council Member
Nature Of Income	148000
Income	\$100,000.00 - \$249,999.99
Comments	

List of Elected Positions	POSITIONS, INCOME AND REIMBURSEMENTS
Position 1	Council Member
Status	Currently in Office
Borough / County	Kings / Brooklyn
District	46
Comments	

Non-City Employment/Business Filer	POSITIONS, INCOME AND REIMBURSEMENTS
Position 1:	nurse supervisor
Name Of Employer/Business	renaissance home care
Nature Of Non-City Employment/Business	renaissance home care adult day
Position	nurse supervisor
Address Line 1	2425 bedford avenue
Address Line 2	
City	brooklyn
State/Province	new york
Zip/Postal Code	11226
Country	US
Income	\$60,000 - \$99,999.99
Nature Of Income	Salary and Wages (including Bonus/Overtime),
If Other, Describe	
Agency Interactions	yes
Comments	agency is closed post the height of the pandemic .
Agency Interactions For	renaissance home care
Interaction 1:	
Name Of State/Local Agency	NY

Type Of Interaction	Regulated,
Comments	
Position 2:	nurse marketing consultant
Name Of Employer/Business	MJC MEDICAL
Nature Of Non-City Employment/Business	MJC Medical
Position	nurse marketing consultant
Address Line 1	9602 avenue L
Address Line 2	
City	Brooklyn
State/Province	NY
Zip/Postal Code	11236
Country	US
Income	\$5,000.00 - \$49,999.99
Nature Of Income	Salary and Wages (including Bonus/Overtime),
If Other, Describe	
Agency Interactions	yes
Comments	DOCTORS' OFFICE
Agency Interactions For	MJC MEDICAL
Interaction 1:	
Name Of State/Local Agency	NY
Type Of Interaction	Regulated,
Comments	

**Regulated Profession: Filer**

**POSITIONS, INCOME AND REIMBURSEMENTS**

Profession 1	
Licensed Profession	nursing,

General Description	Assess client with medications,activities,maintain their activities log.
Partner Or Shareholder	No
Description Of Principal Subject	
Comments	