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| NEBRASKA  ACCOUNTABILITY AND  DISCLOSURE COMMISSION  P.O. Box 95086  Lincoln, NE 68509  (402) 471-2522  https://nadc.nebraska.gov  BEFORE COMPLETING THIS FORM READ THE FILING REQUIREMENTS ON PAGE 3 | | | | | | | | | | |  | | | | | | | | | | | | | | | POSTMARK  DATE | | | | |  | | | |
| POTENTIAL CONFLICT OF INTEREST STATEMENT  NADC FORM C-2A | | | | | | | | | | | | | | |  | | | | |  | | | |
| OFFICE USE ONLY | | | | | | | | |
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| * Any public official of any political subdivision must file this form if he or she has a potential conflict of interest.   Additionally, any employee of a political subdivision whose annual salary and benefits exceed $150,000 must file this form if he or she has a potential conflict of interest.  **Exception:** Public officials required to file a Statement of Financial Interests (Form C-1) should file Form C-2.   * This form should be filed with the person who normally keeps records for the political subdivision. The form may be filed with the Nebraska Accountability and Disclosure Commission to request an opinion from the NADC. * Persons who fail to disclose a potential conflict of interest or who otherwise do not comply with the law are subject to penalties. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ITEM 1** | | | | | | **NAME, ADDRESS AND TELEPHONE NUMBER** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | |  | | | | | | |  | | | |  | | | | | Telephone No. | | | | | | |  | | | | | | | | | |
|  | Last | | | | | | | First | | | | Middle | | | | | | | |  | | | | | | | | | |  | | | | |
| Address | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | |  |
|  | | | | | STREET ADDRESS OR RURAL ROUTE | | | | | | | | | | | | | | City | | | |  | | | | | | STATE | | | ZIP CODE | | |
| **ITEM 2** | | | | | **TITLE, AGENCY, ADDRESS AND PHONE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | |  | | | | | | |  | | | | | | | | | | | | |
| Your Title | | | |  | | | | | | | | | | | Agency | | | | | | |  | | | | | | | | | | | | |
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| Agency Address | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Agency Phone | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ITEM 3** | | | **DESCRIBE POTENTIAL CONFLICT OF INTEREST IN DETAIL (Use Item 6 Continuation, if necessary)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Date action is to be taken or decision is to be made: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | |
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| Description of Potential Conflict: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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Revised July 2024

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| **ITEM 4** | **PERSONS WHO MAY RECEIVE FINANCIAL BENEFIT OR DETRIMENT** | | | | | | | | | | |
|  | | | | | | |  | | |  | |
| You | | | | | | |  | | |  | |
| Member of your Immediate Family: | | | | | |  | | | | | |
|  | | | |  |  | | NAME | | | | |
| Business With Which You | | | | |  | |  | | | | |
| Are Associated (See Definitions) | | | | |  | | | | | | |
|  | | | |  |  | | NAME OF BUSINESS | | | | |
|  | | | | | | | | | | | |
| **ITEM 5** | | **NATURE OF FINANCIAL BENEFIT OR DETRIMENT** | | | | | | | | | |
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| **ITEM 6** | **CONTINUATION** | | | | | | | | | |
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| (SIGNATURE) | | | | | | |  | | (DATE) | | |

**General Information - Filing Requirements**

**I. What is a Potential Conflict of Interest? -** A public official has a potential conflict of interest if he or she is faced with taking an official action or making an official decision which may result in a financial benefit or a financial detriment to the public official; a member of his or her immediate family; or a business with which he or she is associated. The financial effect of the action or decision must be distinguishable from the financial effect on the general public or a broad segment of it.

**II. Who Must File:**

1. Any public official of any political subdivision, who is not required to file a Statement of Financial Interests (Form C-1), must file this form if he or she has a potential conflict of interest. Public officials who are required to file a Form C-1 should instead use Form C-2 if they have a potential conflict of interest.
2. Any employee of a political subdivision whose annual salary and benefits exceed $150,000 must file this form if he or she has a conflict of interest.

**III. When and Where to File and Abstention:**

1. This form should be filed as soon as the person holding elective office is aware that he or she may have a potential conflict of interest and prior to the time that the action is to be taken or the decision is to be made.
2. This form should be filed with the person who normally keeps records for the governing body of the political subdivision. For example, the person who keeps records for a city or village may be the city clerk or village clerk. **This form is not required to be filed with the Nebraska Accountability and Disclosure Commission**. However, if the person wants an opinion from the Commission as to whether he or she has an actual conflict of interest, he or she may send a copy of the form to the Commission along with a request for an opinion.
3. The person filing the form should abstain from participating in or voting on the matter in which he or she has a potential conflict of interest or until he or she has been notified by our office that there is no conflict.

**IV. Enforcement** - If a person required to file this form fails to do so, the NADC may find a violation of the Nebraska Political Accountability and Disclosure Act and assess a civil penalty.

**Disclosure of Contractual Interests by Local Officers.** If you are a local elected official disclosing an interest in a contract or an open account in which a local governing body on which you serve is a party, use NADC Form C-3, Contractual Interest Statement.

**Disclosure of the Employment of Immediate Family Members.** If you are disclosing the employment of an immediate family member, use NADC Form C-4, Employment of Immediate Family Members Disclosure Statement.

**Definitions**

Immediate family shall mean a child residing in your household, your spouse or an individual claimed by you or your spouse as a dependent for federal income tax purposes.

Business shall mean any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, organization, self-employed individual, holding company, joint-stock company, receivership, trust, activity, or entity. NOTE: The definition includes for profit and non-profit entities.

Business with which you are associated shall mean a business: (1) of which you are the sole proprietor; (2) or in which you are a partner, director, or officer; (3) or in which you

or a member of your immediate family is a stockholder of closed corporation stock worth $1,000 or more at fair market value or which represents more than a 5 percent equity interest, or is a stockholder of publicly traded stock worth $10,000 or more at fair market value or which represents more than a 10 percent equity interest.

Elective office shall mean a public office filled by an election, except for federal offices. A person who is appointed to fill a vacancy in a public office which is ordinarily elective holds an elective office.

Person means a business, individual, proprietorship, firm partnership, joint venture, syndicate, business trust, labor organization, company, corporation, association, committee, or any other organization or group of persons acting jointly.

Statutory Authority: Section 49-1499.03 Revised Statutes of Nebraska.