

DISCLOSURE COMMISSION

1225 L St., Suite 400
P.O. Box 95086
Lincoln, NE 68509
(402) 471-2522
www.nadc.nebraska.gov

BEFORE COMPLETING
READ FILING REQUIREMENTS

STATEMENT OF FINANCIAL INTERESTS *AMEND* NADC FORM C-1

MICROFILM
NUMBER

OFFICE USE ONLY

- Candidates for designated offices and holders of designated offices and positions must file this statement with the Commission. See Sections 1A and 1B of the instructions.
- Candidates (including incumbents) subject to this filing requirement must file this statement in order to have their names appear on the ballot. (See Instructions).
- Designated officeholders and holders of designated positions must file this statement with the Commission annually.
- Dollar values need not be reported for any item, except Item 11.
- Persons who fail to file as required are subject to a civil penalty of up to \$2,000.

ITEM 1 YOUR NAME, ADDRESS AND PHONE NUMBER

Name Murdoch Daane Keith Telephone No. 402-227-5008
LAST FIRST MIDDLE
Address 10014-545t Murray 68404
STREET ADDRESS OR RURAL ROUTE CITY STATE ZIP CODE

ITEM 2 OCCASION FOR FILING (Check Appropriate Box)

- ☒ A candidate for elective office ☐ Left office or position
☐ Annual officeholder's or state employee's report ☐ Newly appointed to office or position

ITEM 3 OFFICE HELD & TERM OF OFFICE (Incumbent elected/appointed officials and state employees. See 1B of instructions)

List the office or position you currently hold which requires this filing. If you have left office, list the office you held.

Office or Position: County Commissioner Term: 2021 2025
BEGINS ENDS

Name of City, County, District, or State Agency: Pleasant Township, Cass County

ITEM 4 OFFICE SOUGHT (Candidates only. See 1A of instructions)

List the office sought which requires this filing.

Office: County Commissioner

Name of City, County, District, or State Office: Cass

ITEM 5 PERIOD COVERED BY THIS STATEMENT

This statement must cover all financial interests for the entire "preceding calendar year" and not just as of year-end. If you have left office, this statement must cover all financial interests from the end of the calendar year for which you previously filed up to and including the date you left office.

- ☒ This statement covers the preceding calendar year January 1 through December 31, 2020 2021
☐ Left office, this statement covers the period January 1, _____ to _____
(DATE YOU LEFT OFFICE OR POSITION)

Income includes money or any other form of recompense constituting income under the Internal Revenue Code. (See definitions)

Name and address of any source* (including an individual, business, body of government, political subdivision or body corporate) from which income of over \$1,000 was received.

List the nature of the source's business and the nature of the services you rendered or the circumstances under which income was received. NOTE: Do not list the amount of the income.

List your Government position if you were paid more than \$1,000.

1.) Cass County
Plattsburgh NE

1a.) Commissioner

2.) 2a.)

3.) 3a.)

4.) 4a.)

*NOTE: IF INCOME RESULTED FROM EMPLOYMENT BY, OPERATION OF OR PARTICIPATION IN A PROPRIETORSHIP, PARTNERSHIP CORPORATION OR OTHER PERSON, LIST THE SAME AS THE SOURCE OF INCOME, BUT NOT THE PATRONS, CUSTOMERS, PATIENTS, OF CLIENTS THEREOF.

ITEM 7 BUSINESSES WITH WHICH YOU ARE ASSOCIATED Including Non Profits (See definitions)

Name and address of all businesses, organizations, or associations (profit and non-profit) with which you held a position of officer, director, limited liability company member, partner, or stockholder and any entity in which you held a position of trustee. Such reporting is required based on the position held, no on whether income was received. You need not report business associations which are otherwise listed under Item 6.

Name and Address of Business or Organization.

Nature of Association

If you have nothing to report, write NONE

1.) Cecil Murdock Sons Inc

1a.) President

Duane and Eileen Murdoch
10014 54th Street
Murray, NE 68409

2.) Duane and Eileen Murdoch

2a.) President

Duane and Eileen Murdoch
10014 54th Street
Murray, NE 68409

3.) 3a.)

4.) 4a.)

5.) 5a.)

6.) 6a.)

7.) 7a.)

List all real property in Nebraska in your name or in which you have a direct ownership interest. The description required must be sufficient to identify the location of the property. Exceptions: You need **not** report real property owned by a business listed in Item 6 or 7, your personal residence or real property valued at less than \$1,000. Personal residence refers to your principal dwelling-house and adjacent land used for house-hold purposes, such as lawns and gardens.

Location of Property (Description or Address)	Nature of Property (such as: agricultural, commercial, industrial, residential-rental)
If you have nothing to report, write NONE	
Sec 13-6-10 Johnson Co 13-7-11 OTCE Co 21-7-11 OTCE Co 27-12-13 Cass Co 7-10-14 Cass Co 6-10-13 Cass Co 36-6-10 Johnson Co	Ag land " " " " " "

ITEM 9 OTHER FINANCIAL INTERESTS AND PROPERTY HELD DURING THE PERIOD OF THIS STATEMENT WHICH EXCEEDED A FAIR MARKET VALUE OF \$1,000 AT ANY TIME DURING THE REPORTING PERIOD

(a) List the names and addresses of the institutions in which you had checking and savings accounts and certificates of deposit.

Financial Institution	Address
If you have nothing to report, write NONE	
Pinnacle Bank First Bank	Louisville NE Nebraska

(b) List the names of the issuers of all stocks, bonds, and government securities, not otherwise listed under Items 6 or 7.

If you have nothing to report, write NONE

None

(c) Describe other property owned or held for the production of income not otherwise disclosed in Items 6, 7, 8 or 9(a)(b). Include leaseholds and other interests in real estate, promissory notes and other obligations owed to you, beneficial interests in trusts and estates, cash value life insurance, IRAs, deferred income and retirement plans. Exception: Do **not** include accounts receivable, inventory, fixtures and equipment owned or used by a business listed in Items 6 & 7 or household goods, personal automobiles and other tangible personal property unless such property was held **primarily** for sale or exchange.

If you have nothing to report, write NONE

None

YOUR IMMEDIATE FAMILY.

Exception: Loans from a relative and land contracts which have been recorded with the County Clerk or Register of Deeds need **not** be reported. Accounts payable, debts arising out of retail installment transactions or loans made by a financial institution in the ordinary course of business need **not** be reported.

Name	Address
If you have nothing to report, write NONE	
Farm Credit Services First Bank	Box 2409 Omaha NE Nebraska NE

ITEM 11
SOURCES OF GIFTS OF A VALUE OF MORE THAN \$100 RECEIVED EXCEPT GIFTS FROM RELATIVES.
 (See definitions) If you have nothing to report, write NONE

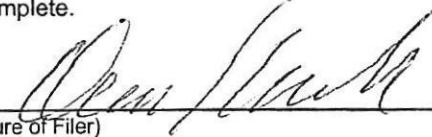
Name and address of Donor	Occupation or nature of business of Donor	Value of Gift (See Key Below)	Description of Gift and Circumstances or Occasion for Gift
If you have nothing to report, write NONE			
	None	Choose Value:	None
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	

The monetary value of each gift shall be categorized based on the good faith estimate of the filer. For each reported gift insert in the Value column the letter which corresponds to the value category of the gift. The value categories are:

A) \$100.01 to \$200; B) \$200.01 to \$500; C) \$500.01 to \$1,000; D) \$1,000.01 or more.

ITEM 12**SIGNATURE OF FILER AND DATE.**

I hereby state that I have used all reasonable diligence in the preparation of this Statement and that to the best of my knowledge it is true and complete.


 (Signature of Filer)

1-
 (Date)

1-28-21

Criminal Penalties: Any person who files a statement knowing that information is false shall be guilty of a Class IV Felony, See §49-14,134, Nebraska Revised Statutes.

State of Nebraska

Accountability and Disclosure Commission

P.O. BOX 95086
Lincoln, Nebraska 68509
www.nadc.nebraska.gov



Centre Terrace, 1225 L St. #400
Phone (402) 471-2522
Fax (402) 471-6599

February 23, 2021

Duane Murdoch
10014 54 Street
Murray, NE 68409

Dear Mr. Murdoch:

Your Statement of Financial Interests filed with this office contains an error or an omission.

Your Position: Cass County Board of Commissioners

Date of Filing: February 23, 2021

Error or Omission: 1) Item 5 of your statement shows that it covers 2021. Your statement should cover 2020, the preceding calendar year; 2) Item 9c and 11 were left blank.

Action Required: a) Fill in the correct calendar year at Item 5 on the enclosed copy of your statement and return it to this office; b) Complete Items 9c and 11. If you have nothing to report enter None.

If your statement as filed does not accurately reflect your financial interests during 2020, you should file a new statement disclosing the correct information.

If you have any questions, please feel free to contact me.

Sincerely,


Frank J. Daley, Jr.
Executive Director

DISCLOSURE COMMISSION

1225 L St., Suite 400

P.O. Box 95086

Lincoln, NE 68509

(402) 471-2522

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STATEMENT OF FINANCIAL INTERESTS

NADC FORM C-1

MICROFILM
NUMBER

2/19/24

OFFICE USE ONLY

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Name Murdock Deane Keith Telephone No. 402-227-5008
LAST FIRST MIDDLE
Address 10014-5451 Murray 68409
STREET ADDRESS OR RURAL ROUTE CITY STATE ZIP CODE

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Office or Position: County Commissioner Term: 2021 2025
BEGINS ENDS
Name of City, County, District, or State Agency: Plattesmouth, Cass County

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1.)	<i>Cass County Plattsmouth NE</i>	1a.)	<i>Commissioner</i>
2.)		2a.)	
3.)		3a.)	
4.)		4a.)	

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Name and Address of Business or Organization.		Nature of Association	
If you have nothing to report, write NONE			
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2.)	Duane and Eileen Murdoch 10014 54th Street Murray, NE 68409	2a.)	<i>President</i>
3.)	Duane and Eileen Murdoch 10014 54th Street Murray, NE 68409	3a.)	
4.)		4a.)	
5.)		5a.)	
6.)		6a.)	
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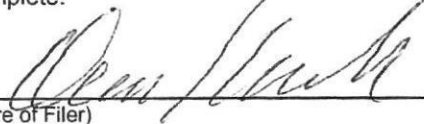
Name and address of Donor	Occupation or nature of business of Donor	Value of Gift (See Key Below)	Description of Gift and Circumstances or Occasion for Gift
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		Choose Value:	
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 (Signature of Filer)

1-
 (Date)

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