

NEBRASKA
ACCOUNTABILITY AND
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

- Amended -
NADC FORM C-1

POSTMARK
DATE

EM 4/01/2021
9:54 AM

MICROFILM
NUMBER

OFFICE USE ONLY

AMENDMENT

- * 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 report 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 Wishart Anna D Telephone No. (402) 314-5688
LAST FIRST MIDDLE
Address 911 E Street Lincoln NE 68508
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: Legislative Term: N/A
BEGINS ENDS

Name of City, County, District, or State Agency: District 27

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

List the office sought which requires this filing.

Office:

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

ITEM 5 PERIOD COVERED BY THIS STATEMENT

ITEM 6

SOURCES OF INCOME OF OVER \$1,000

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.) Beyond School Bells

215 Centennial Mall Suite 200

Lincoln, NE 68508

1a.) Director of Partnerships

Nonprofit agency that supports afterschool and summerschool programming for NE Youth.

2.)

Nebraska State Legislature

1445 K St.

Lincoln, NE 68508

2a.)

State Senator

3.) (Husband job) Goodrich Middle School

4600 Lewis Ave

Lincoln, NE 68521

3a.) Front office employee as a registrar

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, OR 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, not 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.) Beyond School Bells

215 Centennial Mall Suite 200

Lincoln, NE 68508

1a.) Director of Partnerships

Nonprofit agency that supports afterschool and summerschool programming for NE Youth

2.)

2a.)

3.)

3a.)