

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L St., Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 www.nadc.nebraska.gov	STATEMENT OF FINANCIAL INTERESTS NADC FORM C-1	POSTMARK DATE	1/10/22
		MICROFILM NUMBER	
BEFORE COMPLETING READ FILING REQUIREMENTS		OFFICE USE ONLY RECEIVED JAN 13 2022 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION	

- 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	Kraci	Denise	J	Telephone No.	402-615-1020
	LAST	FIRST	MIDDLE		
Address	503 East 10 th Street			Schuyler	NE 68661
	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 Attorney Term: 01/2019-01/2022

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

BEGINS ENDS

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

List the office sought which requires this filing.

Office: County Attorney

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

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, 2021
- ☐ Left office, this statement covers the period January 1, _____ to _____
(DATE YOU LEFT OFFICE OR POSITION)

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.)	Colfax County 411 East 11 Street Schuyler, NE 68661	1a.) Salary/Wages for Legal Fees
2.)	Clty of Schuyler 1103 B Street Schuyler, NE 68661	2a.) Legal Fees
3.)	York County 510 North Lincoln Avenue York, NE 68467	3a.) Legal Fees
4.)	Platte County Title 2511 15 Street Columbus, NE 68601	4a.) Legal Fees
*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.)	Schuyler Food and Toy 412 East 11 Street Schuyler, NE 68661	1a.) Board President
2.)	Nebraska Mediation Center 435 North Park Avenue Fremont, NE 68025	2a.) Board Member
3.)	Colfax County Food Pantry 1213 Colfax Street Schuyler, NE 68661	3a.) Board Member
4.)		4a.)
5.)		5a.)
6.)		6a.)
7.)		7a.)
ITEM 8	REAL PROPERTY OF THE FILER IN NEBRASKA (Real property valued at less than \$1,000 and your personal residence need <i>not</i> be reported.)	

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	
None	

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	
Bank of the West	2714 23 Street, Columbus, NE 68601
Pinnacle Bank	301 East 11 Street, Schuyler, NE 68661
Homestead Bank	1123 B Street, Schuyler, NE 68661
TIAA/CREF	P. O. Box 5157, New York, NY 10163

(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
NSPERS, P. O. Box 94816, Lincoln, NE 68509 Franklin Templeton Investments, 3344 Quality Drive, Rancho Cordova, CA 95741 Nestle, 800 North Brand Blvd, Glendale, CA 91203 Conoco Phillips, 600 North Dairy Ashford, P. O. Box 2197, Houston, TX 77252-2197 CVS Health Corporation, One CVS Drive, Woonsocket, RI 02895 Deere & Company, One John Deere Place, Moline, IL 61265 Johnson & Johnson, P. O. Box 43069, Providence, RI 02940 McDonald's Corp, 2111 McDonald's Drive, Oak Brook, IL 60523 Walt Disney Corp., P. O. Box 1342, Brentwood, NY 11717 Edward Jones, 201 Progress Parkway, Maryland Heights, MO 63043-3042 American Funds, P. O. Box 7157, Indianapolis, IN 46207-7157 American Water Work, 1025 Laurel Oak Road, Voorhees, NJ 08043 Berkshire Hathaway, 3555 Farnam Street, Suite 1440, Omaha, NE 68131 Cummins, Inc., P. O. Box 3005, Columbus, IN 47202-3005 Union Pacific, 1400 Douglas Street, Omaha, NE 68179 Coca Cola, 1 Coca Cola Plaza NW, Atlanta, NE 30313

(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.

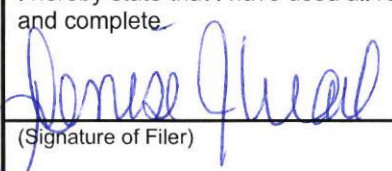
If you have nothing to report, write NONE
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None

ITEM 10	CREDITORS TO WHOM \$1,000 OR MORE WAS OWED OR GUARANTEED BY YOU OR A MEMBER OF 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			
Gateway Mortgage Group Central National Bank Citizen One Home Loans		P. O. Box 5013, Troy, MI 48007-5013 411 National Avenue, Superior, NE 68978 P. O. Box 42111, Providence, RI 02940-2111	

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:	
		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)	1-10-2022 (Date)

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.

Item 6 Continued:

Central Community College
4500 63rd Street
Columbus, NE 68601

Wages from Teaching

Platte County Title
2511 25 Street
Columbus, NE 68601

Legal Fees

10 County Title
2456 18 Avenue
Columbus, NE 68601

Legal Fees

Saunders County
433 North Chestnut
Wahoo, NE 68066

Legal Fees