

NEBRASKA  
ACCOUNTABILITY AND  
DISCLOSURE COMMISSION  
1225 L St., Suite 400  
P.O. Box 95086  
Lincoln, NE 68509  
(402) 471-2522  
<https://nadc.nebraska.gov>

BEFORE COMPLETING  
READ FILING REQUIREMENTS

# STATEMENT OF FINANCIAL INTERESTS

**Calendar Year 2024**

NADC FORM C-1

POSTMARK  
DATE

1-28-25

OFFICE USE ONLY

RECEIVED

JAN 30 2025

NEBRASKA ACCOUNTABILITY  
AND DISCLOSURE COMMISSION

- This statement must cover all financial interests for the entire "calendar year" as noted above and not just as of year-end.
- 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 \$5,000.

**ITEM 1 YOUR NAME, ADDRESS AND PHONE NUMBER**

Name Gray Jr. Robert L. Telephone No. 402-741-0209  
LAST FIRST MIDDLE

E-mail gray\_butch@yahoo.com

Address 2317 State HWY 14 Albion NE 68620  
STREET ADDRESS OR RURAL ROUTE CITY STATE ZIP CODE

**ITEM 2 OCCASION FOR FILING (Check Appropriate Box)**

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

**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.

Office or Position: Director Term: 2020-2026

Name of City, County, District, or State Agency: Cornhusker Public Power District  
BEGINS ENDS

**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**

This statement must cover all financial interests for the entire "preceding calendar year" and not just as of year-end.

This statement covers the preceding calendar year January 1 through December 31, 2024

**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 whom 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.

- 1.) Gray's Trucks & Farm Inc  
2305 230th Ave  
Albion, Ne. 68620
- 2.) Brent Friebow  
P.O. Box 141  
Cedar, Rapids, Ne
- 3.) Cornhusker P.P.P.  
P.O. Box 9  
Columbus, Ne. 68602-009
- 4.) \_\_\_\_\_

- 1a.) Rent  
Wages
- 2a.) Rent
- 3a.) Director's Comp.
- 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 (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 |
|----------------------------------------------|-----------------------|
| 1.) _____                                    | 1a.) _____            |
| _____                                        | _____                 |
| _____                                        | _____                 |
| 2.) _____                                    | 2a.) _____            |
| _____                                        | _____                 |
| _____                                        | _____                 |
| 3.) _____                                    | 3a.) _____            |
| _____                                        | _____                 |
| _____                                        | _____                 |
| 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 not be reported.)**

List all real property 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 estate 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<br>(Description or Address) | Nature of Property<br>(such as: agricultural, commercial, industrial, residential-rental) |
|--------------------------------------------------|-------------------------------------------------------------------------------------------|
| own 1/2 2317 State Hwy 14<br>Albion, Ne 68620    | 240 Acres                                                                                 |

**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                                                                                                                                                    |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| NEFCU Credit Union<br>Cornerstone Bank<br>Boone Co. Bank<br>Mutual of Omaha | 1414 15th St. Columbus, Ne 68601<br>240 S 3rd St. Albion, Ne. 68620<br>P.O. Box 109 Albion, Ne. 68620<br>3300 Mutual of Omaha Plaza<br>Omaha, Ne.<br>68175 |

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

|                                                         |                                                        |
|---------------------------------------------------------|--------------------------------------------------------|
| Alliance Bernstein Bond A<br>Franklin Templeton Class B | Cornerstone Bank<br>240 S 3rd St.<br>Albion, Ne. 68620 |
|---------------------------------------------------------|--------------------------------------------------------|

(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.

|                                                                       |                                       |
|-----------------------------------------------------------------------|---------------------------------------|
| Modern Woodman of America IRA<br>Life Ins                             | Hammer Ins<br>Orchard, Ne.            |
| Alliance Bernstein Growth In<br>Alliance Bernstein Glow Gov Inc Trust | Cornerstone Bank<br>Albion, Ne. 68620 |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <b>ITEM 8 REAL PROPERTY OF THE FILER IN NEBRASKA (Real property valued at less than \$1,000 and your personal residence need not be reported.)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                  |
| List all real property in Nebraska or in which you have a direct ownership interest. The description required must be sufficient to identify the location of the property. <b>Exception:</b> You need not report real estate 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.                                                                                                                                                              |                                                                                                  |
| <b>Location of Property</b><br>(County, State, Address)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Nature of Property</b><br>(such as agricultural, commercial, industrial, residential, rental) |
| [Faint handwritten text in the Location of Property column]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | [Faint handwritten text in the Nature of Property column]                                        |
| <b>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</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                  |
| (a) List the names and addresses of the institutions in which you had checking and savings accounts and certificates of deposit.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                  |
| <b>Financial Institution</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Address</b>                                                                                   |
| [Faint handwritten text in the Financial Institution column]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | [Faint handwritten text in the Address column]                                                   |
| (b) List the names of the issuers of all stocks, bonds, and government securities, not otherwise listed under Item 6 or 7.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                  |
| [Faint handwritten text in the Item 9(b) section]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                  |
| (c) Describe other property owned or held for the production of income not otherwise disclosed in Item 6, 7, 8 or 9(a)(b). Include joint tenancy 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. <b>Exception:</b> Do not include accounts receivable, inventory, fixtures and equipment owned or used by a business listed in Item 6 & 7 or household goods, personal automobiles and other tangible personal property unless such property was held primarily for sale or exchange. |                                                                                                  |
| [Faint handwritten text in the Item 9(c) section]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                  |

**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 |
|------|---------|
| None |         |

**ITEM 11 SOURCES OF GIFTS OF A VALUE OF MORE THAN \$100 RECEIVED EXCEPT GIFTS FROM RELATIVES. (See definitions)**

| 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 |
|---------------------------|-------------------------------------------|-------------------------------|------------------------------------------------------------|
| None                      |                                           | Choose Value:                 |                                                            |
|                           |                                           | 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.

|                      |         |
|----------------------|---------|
| Robert L. Dray Jr    | 1-24-25 |
| (Signature of Filer) | (Date)  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            |                               |                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------|------------------------------------------------------------|
| <b>ITEM 10</b> CREDITORS TO WHOM \$1,000 OR MORE WAS OWED OR GUARANTEED BY YOU OR A MEMBER OF YOUR IMMEDIATE FAMILY.<br>Exception: Loans from a relative and fund transfers which have been recorded with the County Clerk or Register of Deeds need not be reported. Accounts payable, bills owing out of retail installment transactions or loans made by a financial institution in the ordinary course of business need not be reported. |                                            |                               |                                                            |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                         | Address                                    |                               |                                                            |
| ITEM 11 NUMBER OF DEBTS OF \$1,000 OR MORE DURING YEAR PREVIOUS TO FILING OF THIS STATE FROM RELATIVES (See Definition)                                                                                                                                                                                                                                                                                                                      |                                            |                               |                                                            |
| Name and address of donor                                                                                                                                                                                                                                                                                                                                                                                                                    | Description of nature of business of donor | Value of gift (See Key Below) | Description of gift and circumstances or occasion for gift |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Choose Value:                 |                                                            |
| The amount for each of the above gifts shall be reported based on the donor's fair market value of the gift. Gifts received by the filer shall be reported as such.                                                                                                                                                                                                                                                                          |                                            |                               |                                                            |
| A) \$100.01 to \$200.00 B) \$200.01 to \$500.00 C) \$500.01 to \$1,000.00 D) \$1,000.01 or more                                                                                                                                                                                                                                                                                                                                              |                                            |                               |                                                            |
| <b>ITEM 12 SIGNATURE OF FILER AND DATE.</b><br>I hereby state that I have read all instructions relating to this Statement and that to the best of my knowledge it is true and complete.                                                                                                                                                                                                                                                     |                                            |                               |                                                            |
| (Signature of Filer) _____<br>(Date) _____                                                                                                                                                                                                                                                                                                                                                                                                   |                                            |                               |                                                            |