

State of Nebraska

Accountability and Disclosure Commission

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



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

November 14, 2023

Cristy Joy
801 W. Rock Creek Rd.
Raymond, NE 68428

Re: C-2 Potential Conflict of Interest Statement

Dear Ms. Joy,

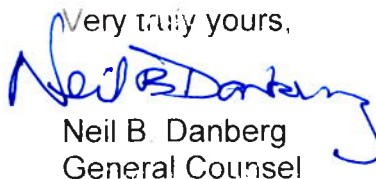
This will acknowledge receipt of a C-2, Potential Conflict of Interest Statement ("Statement"), which you filed with the Nebraska Accountability and Disclosure Commission ("NADC") on Friday, November 3, 2023.

We understand that you are a member of the Lincoln-Lancaster County Planning Commission ("Commission"). Your Statement concerns an action which was to have been taken on November 1, 2023.

Since the action in question has already occurred, an opinion with respect to the matter referenced by your Statement would be moot. It is the policy of the NADC not to issue responses and advice after the event in question has already occurred.

Please contact me directly if you have any questions concerning these matters.

Very truly yours,


Neil B. Danberg
General Counsel

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 11 th Floor, State Capitol P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522	POTENTIAL CONFLICT OF INTEREST STATEMENT NADC FORM C-2	POSTMARK DATE 11/3/23	MICROFILM NUMBER	OFFICE USE ONLY S
BEFORE COMPLETING THIS FORM READ THE FILING REQUIREMENTS ON PAGE 3				

- An official or employee of the executive branch of state government or any other official or employee required to file Statements of Financial Interests must file this form if he or she has a potential conflict of interest.
- Elected officials of school districts and elected officials of villages and cities (except Omaha and Lincoln) should not use this form. Use Potential Conflict of Interest Statement Form C-2A.
- File this Potential Conflict of Interest Statement with the Nebraska Accountability and Disclosure Commission and with your immediate superior (if any) whenever a potential conflict of interest situation arises.
- 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 <u>JOY</u> <u>CRISTY</u> Telephone No. <u>402-429-7150</u> Last First Middle	
Address <u>801 W ROCK CREEK RD</u> <u>RAYMOND</u> <u>NE</u> <u>68428</u> STREET ADDRESS OR RURAL ROUTE City STATE ZIP CODE	
ITEM 2	TITLE, AGENCY, ADDRESS, PHONE AND SUPERIOR
Your Title <u>Planning Commissioner</u> Agency <u>Lincoln-Lancaster Co. Planning Commission</u>	
Agency Address <u>555 S. 10th Street, Room 213, Lincoln, NE 68508</u> Agency Phone <u>402-441-7491</u>	
Name of Immediate Superior <u>N/A</u> Title <u>N/A</u>	
ITEM 3	DESCRIBE POTENTIAL CONFLICT OF INTEREST IN DETAIL (Use Item 7 Continuation, if necessary)
Date action is to be taken or decision is to be made: <u>November 1, 2023 (conflict declared at meeting)</u>	
Description of Potential Conflict: <u>Street and Alley Vacation 23008 - Ms. Joy chose to declare a conflict at the meeting and did not participate in the public hearing or action taken by the Planning Commission due to being the architect working on the project identified in Street and Alley Vacation 23008.</u>	

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) Archi-Etc., LLC

NAME OF BUSINESS

ITEM 5 NATURE OF FINANCIAL BENEFIT OR DETRIMENT**ITEM 6 FOR MEMBERS OF THE LEGISLATURE ONLY**

If you will not abstain from acting on a matter state why, despite the potential conflict, you intend to vote or otherwise participate.

ITEM 7 CONTINUATION

(SIGNATURE)

(DATE)

11/1/23