

State of Nebraska

Accountability and Disclosure Commission

P.O. BOX 95086
Lincoln, Nebraska 68509
nadc.nebraska.gov
July 17, 2024



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

Councilmember Pete Festersen
660 Parkwood Lane
Omaha, NE 68132

Re: C-2 Potential Conflict of Interest Statement received on July 15, 2024

Dear Councilmember Festersen,

This will acknowledge receipt of a Potential Conflict of Interest Statement (hereinafter "Statement") which was received in our office on July 15, 2024.

The facts in this matter are, as we understand them, that you are a member of the Omaha City Council. You have identified your employer as, "Alegent Creighton Health-Creighton University Medical Center/CHI" (hereinafter, "CHI").

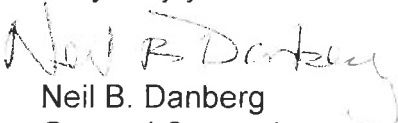
A decision will be made by the Omaha City Council on July 16, 2024 with respect to the following matter as you have described it in your Statement:

"A resolution to approve a Contribution Agreement between the City of Omaha and the Omaha Economic Development Corporation (CEDC), towards OEDC's effort to renovate, rehabilitate, and equip a 19,000 square foot building at 1127 North 20th Street, which will be used as a commercial kitchen and dietary call center for CHI Health."

You have stated with respect to this matter that, because of your position with CHI, you intend to recuse yourself from participation and voting with respect to this matter. We understand and acknowledge your decision.

The Commission thanks you for filing your Statement in accordance with §49-1499.03(1) of the Nebraska Political Accountability and Disclosure Commission.

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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 2px;">POSTMARK DATE</td> <td style="padding: 2px;">Email 7/16/24</td> </tr> <tr> <td style="padding: 2px;">MICROFILM NUMBER</td> <td style="padding: 2px;"></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 2px;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="height: 100px; vertical-align: middle; text-align: center;"> </td> </tr> </table>	POSTMARK DATE	Email 7/16/24	MICROFILM NUMBER		OFFICE USE ONLY											
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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 who is required to file Statements of Financial Interests must disclose a potential conflict of interest. - File this Potential Conflict of Interest Statement with the Nebraska Accountability and Disclosure Commission and your immediate superior whenever a potential conflict on interest situation arises. - Persons who fail to disclose potential conflict of interests or who otherwise do not comply with the law are subject to penalties.																		
ITEM 1	NAME, ADDRESS AND TELEPHONE NUMBER																	
<table style="width: 100%;"> <tr> <td style="width: 15%;">Name</td> <td style="width: 35%;">Festersen Pete</td> <td style="width: 20%;">Telephone No.</td> <td style="width: 30%;">402-554-1436</td> </tr> <tr> <td></td> <td style="text-align: center;">Last First Middle</td> <td></td> <td></td> </tr> <tr> <td>Address</td> <td>660 Parkwood Lane</td> <td>Omaha</td> <td>NE 68132</td> </tr> <tr> <td colspan="2" style="text-align: center;">STREET ADDRESS OR RURAL ROUTE</td> <td style="text-align: center;">City</td> <td style="text-align: center;">STATE ZIP CODE</td> </tr> </table>			Name	Festersen Pete	Telephone No.	402-554-1436		Last First Middle			Address	660 Parkwood Lane	Omaha	NE 68132	STREET ADDRESS OR RURAL ROUTE		City	STATE ZIP CODE
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ITEM 2	TITLE, AGENCY, ADDRESS, PHONE AND SUPERIOR																	
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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: July 16, 2024																		
Description of Potential Conflict: A resolution to approve a Contribution Agreement between the City of Omaha and the Omaha Economic Development Corporation (OEDC), towards OEDC's effort to renovate, rehabilitate, and equip a 19,000 square foot building at 1127 North 20 th Street, which will be used as a commercial kitchen and dietary call center for CHI Health. As I am employed by CHI Health, I will <u>not</u> be voting on this resolution.																		

ITEM 4 PERSONS WHO MAY RECEIVE FINANCIAL BENEFIT OR DETRIMENT

You

☐ Member of your Immediate Family: _____
NAMEBusiness With Which You
X Are Associated (See Definitions) CHI HEALTH
NAME OF BUSINESS**ITEM 5 NATURE OF FINANCIAL BENEFITS**

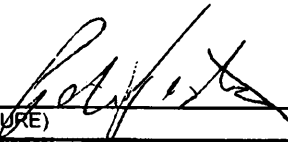
Employed by Alegent Creighton Health-Creighton University Medical Center/CHI.

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)

7/16/24