

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

February 19, 2025

Rocky Schneider
2650 Prairie Street
Gering, NE 69341

Re: C-2A Potential Conflict of Interest Statement

Dear Mr. Schneider,

This will acknowledge receipt of a C-2A, Potential Conflict of Interest Statement ("Statement"), which you filed with the Nebraska Accountability and Disclosure Commission ("NADC") on Tuesday, February 18, 2025. This will also acknowledge our phone call of Tuesday, February 18, 2025.

You are a Principal in the Minatare Public School District ("District"). Your spouse is a teacher in the District.

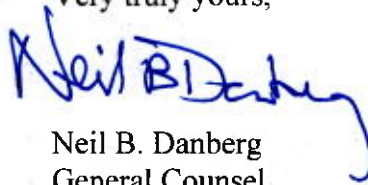
In our telephone conference, we discussed the fact that you do not have discretion to set compensation for District teachers. Compensation is set for each teacher according to the terms of the contract between the District Board and the Teachers' Union. You do not have the authority to vary the compensation terms of that contract. The salary for each teacher in the District is set by the terms of the said contract.

Because you are not required to take action with respect to the contractual compensation of your spouse, you do not have any financial benefit or detriment with respect to compensation as set by her contract. Nor can you make a decision that will affect her compensation. Consequently, you do not have a conflict of interest in the preparation and setting of your spouse's annual compensation.

Our opinion in this matter is premised upon the material facts which we have outlined above. If any of these facts are inaccurate or incomplete, please contact us immediately.

Please call me at 402-471-0846 if you have any question concerning this Opinion.

Very truly yours,

A handwritten signature in blue ink, appearing to read "Neil B. Danberg". The signature is stylized with a large, sweeping "N" and a long, horizontal stroke extending to the right.

Neil B. Danberg
General Counsel

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 https://nadc.nebraska.gov	POTENTIAL CONFLICT OF INTEREST STATEMENT NADC FORM C-2A	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; font-size: small;">POSTMARK DATE</td> <td style="width: 85%;">2-13-25</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center; color: blue; font-weight: bold;">RECEIVED</td> </tr> <tr> <td colspan="2" style="text-align: center; color: blue;">FEB 18 2025</td> </tr> <tr> <td colspan="2" style="text-align: center; color: blue; font-size: small;">NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION</td> </tr> </table>	POSTMARK DATE	2-13-25			OFFICE USE ONLY		RECEIVED		FEB 18 2025		NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION					
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BEFORE COMPLETING THIS FORM READ THE FILING REQUIREMENTS ON PAGE 3																		
- Any public official of any political subdivision must file this form if he or she has a potential conflict of interest. Additionally, any employee of a political subdivision whose annual salary and benefits exceed \$150,000 must file this form if he or she has a potential conflict of interest. Exception: Public officials required to file a Statement of Financial Interests (Form C-1) should file Form C-2. - This form should be filed with the person who normally keeps records for the political subdivision. The form may be filed with the Nebraska Accountability and Disclosure Commission to request an opinion from the NADC. - 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																	
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">Name</td> <td style="width: 40%;"><u>Schneider Rocky Joe</u></td> <td style="width: 10%;">Telephone No.</td> <td style="width: 40%;"><u>(308) 637-1788</u></td> </tr> <tr> <td></td> <td style="font-size: x-small; text-align: center;">Last First Middle</td> <td></td> <td></td> </tr> <tr> <td>Address</td> <td colspan="3"><u>2650 Prairie St. Gering NE 69341</u></td> </tr> <tr> <td></td> <td colspan="3" style="font-size: x-small; text-align: center;">STREET ADDRESS OR RURAL ROUTE City STATE ZIP CODE</td> </tr> </table>			Name	<u>Schneider Rocky Joe</u>	Telephone No.	<u>(308) 637-1788</u>		Last First Middle			Address	<u>2650 Prairie St. Gering NE 69341</u>				STREET ADDRESS OR RURAL ROUTE City STATE ZIP CODE		
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ITEM 2	TITLE, AGENCY, ADDRESS AND PHONE																	
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ITEM 3	DESCRIBE POTENTIAL CONFLICT OF INTEREST IN DETAIL (Use Item 6 Continuation, if necessary)																	
Date action is to be taken or decision is to be made: _____																		
Description of Potential Conflict: <u>Spouse works for District</u>																		

ITEM 4 PERSONS WHO MAY RECEIVE FINANCIAL BENEFIT OR DETRIMENT

☒ You

☒ Member of your Immediate Family:

Shauna Schneider
NAME

Business With Which You

☐ Are Associated (See Definitions)

NAME OF BUSINESS

ITEM 5 NATURE OF FINANCIAL BENEFIT OR DETRIMENT

Spouse is potentially a subordinate.

ITEM 6 CONTINUATION

Employment Contract continues Annually

(SIGNATURE)

(DATE)

2/10/25