

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

July 30, 2025

LaVonya Goodwin
4111 North 18th Street
Omaha, NE 68110

Re: C-2 Potential Conflict of Interest Statement

Dear Ms. Goodwin,

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 Tuesday, July 22nd, 2025.

We understand that you are a member of the Omaha City Council ("Council"). Your Statement concerns an action which was to have been taken on July 22nd, 2025.

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 opinions after the action in question has already occurred. We note that you recused yourself from voting, and this was consistent with the terms of the Nebraska Political Accountability and Disclosure Act.

Please contact me directly if you have any questions concerning this matter.

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: 50%; padding: 2px;">POSTMARK DATE</td> <td style="width: 50%; text-align: center; padding: 2px;">7/22/2025</td> </tr> <tr> <td style="padding: 2px;">MICROFILM NUMBER</td> <td style="text-align: center; padding: 2px;">EM S</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> RECEIVED JUL 22 2025 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE	7/22/2025	MICROFILM NUMBER	EM S	OFFICE USE ONLY		RECEIVED JUL 22 2025 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION									
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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: 20%;">Name</td> <td style="width: 30%;">Goodwin LaVonya</td> <td style="width: 20%;">Telephone No.</td> <td style="width: 30%;">402-575-8164</td> </tr> <tr> <td></td> <td style="text-align: center;">Last First Middle</td> <td></td> <td></td> </tr> <tr> <td>Address</td> <td>4111 N 18th Street</td> <td>Omaha</td> <td>NE 68110</td> </tr> <tr> <td></td> <td 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	Goodwin LaVonya	Telephone No.	402-575-8164		Last First Middle			Address	4111 N 18 th Street	Omaha	NE 68110		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: <u>July 22, 2025</u> Description of Potential Conflict: The City Council of the City of Omaha will vote on a Special Levy Ordinance approving assessments for the North 24 th Street Business Improvement District. Councilmember Goodwin is a member of the North 24 th Street Business Improvement District Board. Councilmember Goodwin <u>WILL NOT</u> vote on this item.																		

ITEM 4 PERSONS WHO MAY RECEIVE FINANCIAL BENEFIT OR DETRIMENT

X You

Member of your Immediate Family: _____

NAME

Business With Which You

☐ Are Associated (See Definitions) _____

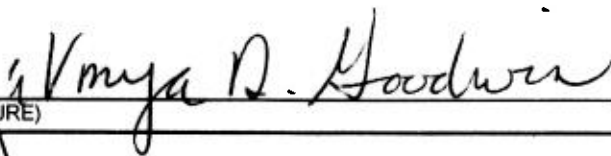
NAME OF BUSINESS

ITEM 5 NATURE OF FINANCIAL BENEFITSNote: Councilmember Goodwin is a member of the North 24th Street Business Improvement District Board.**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)

