

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

October 28, 2025

Senator Brad Von Gillern
District 4
Nebraska Legislature
Nebraska State Capitol
Lincoln, NE 68509

INTEROFFICE

RE: Conflict of Interest Statement

Dear Senator Von Gillern,

We are in receipt of your Potential Conflict of Interest Statement ("Statement") filed with our office on Monday, October 27, 2025. We understand that you have filed this Statement pursuant to the terms of § 49-1499 of the Nebraska Political Accountability and Disclosure Act ("NPADA"). The Statement will be maintained on file with our Commission as a public record.

If you have not already done so, please be sure to forward a copy of this Statement to the Speaker of the Legislature so that it may be filed in accordance with § 49-1499.

Please contact me at 402-471-0846 if you have any questions.

Very truly yours,

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-2	POSTMARK DATE <u>NONE</u>
BEFORE COMPLETING THIS FORM READ THE FILING REQUIREMENTS ON PAGE 3		OFFICE USE ONLY RECEIVED OCT 27 2025 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION

- An official or employee of the executive branch of state government or any other official or employee required to file a Statement of Financial Interests (Form C-1) must file this form if he or she has a potential conflict of interest.
- All other public officials who have a potential conflict of interest would file a Potential Conflict of Interest Statement Form C-2A. Additionally, any employee of a political subdivision whose annual salary and benefits exceed \$150,000 must file a Potential Conflict of Interest Statement Form C-2A if he or she has a potential conflict.
- 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>von Gillern</u> Last	<u>Roger</u> First	<u>Bradford</u> Middle	Telephone No. <u>402-290-1048</u>
Address	<u>18370 Honeysuckle Dr</u> STREET ADDRESS OR RURAL ROUTE		<u>Elkhorn</u> City	<u>NE</u> <u>68022</u> STATE ZIP CODE

ITEM 2	TITLE, AGENCY, ADDRESS, PHONE AND SUPERIOR	
Your Title	<u>Senator</u> Agency <u>Legislature</u>	
Agency Address	<u>Capitol Building</u> Agency Phone _____	
Name of Immediate Superior	_____ Title _____	

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: _____ Description of Potential Conflict: I own property that may be considered for future purchase by Tenaska Corporation for future development. 	

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) _____

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.

Should a vote occur that would impact the sale of my property, either positively or negatively, I will abstain from that vote.

ITEM 7 CONTINUATION

(SIGNATURE)

(DATE)

10/23/25