

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 15, 2026

Nancy Coffman
880 S. 39th Street
Lincoln, NE 68510

Re: C-2 Potential Conflict of Interest Statement

Dear Ms. Coffman,

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 Wednesday, May 13, 2026. Following receipt of your Statement, we also had an opportunity to speak with you concerning it.

You are an Orientation Counselor II with the Nebraska Commission for the Blind and Visually Impaired ("NCBVI"). You are also first Vice-President of the National Federation of the Blind of Nebraska.

Under the terms of §49-1499.02(1) of the Nebraska Political Accountability and Disclosure Act ("NPADA"), you must file a Statement, as you have done, where you would be required, "to take any action or make any decision" in the discharge of your official duties that, "may cause financial benefit or detriment to [you], a member of your immediate family, or a business with which [you are] associated."

The term "business" is defined in §49-1407 to include, "any corporation." The term "business with which the individual is associated," is defined in §49-1408 to include a business, "...in which the individual is a partner, limited liability company member, director, or officer."

In your Statement, you have advised that, as an Orientation Counselor, you do not make financial decisions. These are all made by other persons at NCBVI.

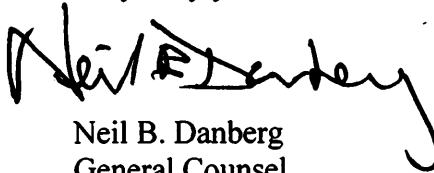
You have further noted that as first Vice-President of the National Federation of the Blind of Nebraska, you may be called upon to vote upon matters which relate to NCBVI, but these are not decisions which would financially benefit the National Federation of the Blind of Nebraska—which is the "business" with which you are associated.

Based upon the information which you have provided in your Statement as supplemented by our conversation with you, we do not find any conflicts of interest with respect to your position at NCBVI, nor do we find any conflict of interest between your position with NCBVI and the National Federation of the Blind of Nebraska.

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.

Thank you for your timely filing of the subject Statement.

Very truly yours,

A handwritten signature in black ink, appearing to read "Neil B. Danberg", with a stylized flourish at the end.

Neil B. Danberg
General Counsel

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L St., Suite 400 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: 15%; font-size: small;">POSTMARK DATE</td> <td style="width: 85%; text-align: center;">5/13/2026</td> </tr> <tr> <td style="font-size: small;">MICROFILM NUMBER</td> <td style="text-align: center;">EM S</td> </tr> <tr> <td colspan="2" style="text-align: center; font-size: x-small;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> RECEIVED MAY 13 2026 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE	5/13/2026	MICROFILM NUMBER	EM S	OFFICE USE ONLY		RECEIVED MAY 13 2026 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 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																									
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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: _____																										
Description of Potential Conflict: I am currently the first VP of the National Federation of the Blind of Nebraska. The board makes all financial decisions, I make none. I may be called upon to vote in matters of interest to the NCBVI at National Conventions of the NFB.																										

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. I do not anticipate any conflict of interest, should a potential conflict of interest arise I will take appropriate leave time and/or contact my supervisor for further guidance.

ITEM 7 CONTINUATION

(SIGNATURE)

(DATE)