

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 11 th Floor, State Capitol P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522	Candidate's Exemption Statement NADC Form CFLA-3	POSTMARK DATE	
		MICROFILM NUMBER	
		OFFICE USE ONLY	

- A CFLA Candidate's Exemption Statement should be filed by a candidate with an existing candidate committee for a covered elective office under the Campaign Finance Limitation Act (CFLA) who has not and will not file to seek election or reelection to a covered elective office. Contact the Commission about forming a committee and about candidates subject to the CFLA.
- This statement must be filed on or before the first day of the election period for the covered elective office.

Item 1	Name and Address of Candidate
Election Year: _____ Office: _____ District: _____ Candidate Name (Print): _____ Telephone: _____ Candidate Address: _____	

Item 2	Statement of Exempt Status
<p>I certify that I have a candidate committee for the covered elective office noted above. I have not filed and I will not file for election or reelection to said covered elective office and I am therefore exempt from filing an Affidavit to Abide by Spending Limits, an Affidavit Not to Abide by spending Limits and an Estimate of Expenditures in connection with said office.</p>	

 (Signature of Candidate) (Date)

ATTACHMENT C