

General Information

Name: Mrs Judy Vandergrift

PID 304239

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 05/27/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Lynn Haven	City Commission	Commissioner
Lynn Haven	Community Redevelopment Agency	Commissioner

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)
(If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
State of Florida Retirement	Florida	Education

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
Social Security	Federal	Washington D.C	Retirement

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)
(If you have nothing to report, write "none" or "n/a")

Location/Description

N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)
(If you have nothing to report, write "none" or "n/a")

Type of Intangible**Business Entity to Which the Property Relates**

403.B

Horace Mann

Liabilities

LIABILITIES (Major debts valued over \$10,000):
(If you have nothing to report, write "none" or "n/a")

Name of Creditor**Address of Creditor**

N/A

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)
(If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

Signature of Filer***Judy Vandergrift***

Digitally signed: 08/31/2025

Filed with COE: 08/31/2025