

2025 Form 6F - Final Full and Public Disclosure of Financial Interests

Filed with COE: 09/02/2025

General Information

Name: Ms Mary Catherine Green

CONFIDENTIAL

PID 14821

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 07/31/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (10Th)	Elected Constitutional Officer	Polk County Judge

Net Worth

My Net Worth as of July 31, 2025 was \$ 850,000.00.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 15,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Lot {REDACTED} Pipestem Wv	\$ 30,000.00
{REDACTED}	\$ 548,300.00
DROP	\$ 829,711.42

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Audi Financial Services	P.O. Box 5215 Carol Stream IL 60197	\$ 63,000.00
Bank of America	P.O. Box 78058 AZ 85062	\$ 18,000.00
MidFlorida	129 S. Kentucky Ave Lakeland FL 33813	\$ 60,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2025, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida	DMS 4050 Esplanade Way Suite 160 Tallahassee FLa	\$ 11,000.00
Social security administration	550 Commerce Dr Lakeland 33813	\$ 2,935.70

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6F and that the facts stated in it are true.

Mary Catherine Green

Digitally signed: 09/02/2025

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