2025 Form 1 - Statement of Financial Interests

Filed with COE: 05/29/2026

General Information

Name: Mr Tim Murry

PID 216350

AGENCY INFORMATION

Organization	Suborganization	Title
Clermont	City Council	Mayor
Lake Apopka Natural Gas District	Board of Directors	Director

CANDIDATE FOR

Position	Agency Name	Position sought or held
Mayor for a City, Town or Village - Form 1 (Effective 6/10/2024)	City of Clermont	City Council Seat 3 - Mayor

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

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
U S Military Retirement	8899 E 56th St Indianapolis IN 46249	Military Service
Office of Personnel Management	P O Box 45 Boyers PA 16017	U S Postal
Social Security	P O Box 67620 Wilkes-Barre PA 18767	Retirement
City of Clermont	685 W Montrose St Clermont F L 34711	City Council

Filed with COE: 05/29/2026

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
N/A			

Real Property

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

Location/Description
563 E DeSoto St Clermont FL 34711

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
Mutual Funds	PGIM Investments
Stocks	MacDonald's Corporation
TSP	U S Postal Service
Saving Account	Insight Federal Credit Union
Checking Account	Truist Bank

Filed with COE: 05/29/2026

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
Bank of America	P O Box 45224 Jacksonville FL 32232-5224

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

Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Filed with COE: 05/29/2026

Signature of Filer

Tim Murry

Digitally signed: **05/29/2026**

Filed with COE: 05/29/2026