2024 Form 1 - Statement of Financial Interests

Filed with COE: 03/31/2025

General Information

Name: Ms Judith Dugo

PID 238183

AGENCY INFORMATION

Organization	Suborganization	Title
Greenacres	Mayor And City Council	Councilwoman

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2024.

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
US MILITARY ANNUITANT PAY	8899 E 56th St Indianapolis IN	Department of Defense
SOCIAL SECURITY	US Government	Social Security Administration
Merril Lynch	POBox 2150 Lakewood NJ 08701	Financial Planner
Guardians Credit Union	3406 Summit Blvd West Palm Beach 33413	Credit Union/Financial institution
Reliance Standard Life Ins Company	1700 Market St Philadelphia Pa 19103	Annuity
City of Greenacres	5800 Melaleuca Ln Greenacres Fl 33463	Municipality
US Treasury Bonds	POBox 9150 Minneapolis Mn 55480	Department of Treasury Retail Services

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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
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
Florida Municipal Trust Fund	City of Greenacres
AB Large Cap Growth Fund	Merril Lynch
Savings and Checking Trust Account	Guardians Credit Union
US Treasury Notes	US Government
Vanguard Target Retirement Fund	Florida Municipal Pension Trust Fund
Annunity Fund	Reliance Financial Annuity Insurance
Checking Account	Chase BankFinancial Institution
PrePlan NY State Trust	Harloff Funeral Hm East Rochester NY
Invesco Global Fund	Merrill Lynch

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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	
Name of Business Entity	Guardians Credit Union
Address of Business Entity	3469 Summit Blvd West Palm Beach 33406
Principal Business Activity	Financial
Postion Held with Entity	Board Treasurer
I own more than a 5% Interest in the Business	No
Nature of my Ownership Interest	Board Member

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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.

Signature of Filer

Judith Dugo

Digitally signed: **03/31/2025**

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