

**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

**NOTE: This form must be on file with the qualifying officer before opening the campaign account.**

**RECEIVED**  
2023 MAY 10 PM 12:15  
CITY OF MIAMI BEACH  
OFFICE OF THE CITY CLERK

**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form      Re-filing to Change:  Treasurer/Deputy     Depository     Office     Party

**2. Name of Candidate** (in this order: First, Middle, Last)

Marcella Novela

**3. Address** (include post office box or street, city, state, zip code)

6619 S. Dixie Hwy No 148

**4. Telephone**

(305) 647-2666

**5. E-mail address**

marcellanovela@gmail.com

Miami, FL 33143

South Miami MI

**6. Office sought** (include district, circuit, group number)

Miami Beach City Commissioner - Group 6

**7. If a candidate for a nonpartisan office, check if applicable:**

My intent is to run as a Write-In candidate. N/A

**8. If a candidate for a partisan office, check block and fill in name of party as applicable:** My intent is to run as a

Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate. N/A

**9. I have appointed the following person to act as my**  Campaign Treasurer     Deputy Treasurer

**10. Name of Treasurer or Deputy Treasurer**

Gloria Maggiolo

**11. Mailing Address**

6619 S. Dixie Hwy No 148

**12. Telephone**

( 305 ) 647-2666

**13. City**

South Miami

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33143

**17. E-mail address**

gloria@bffcompliance.com

**18. I have designated the following bank as my**  Primary Depository     Secondary Depository

**19. Name of Bank**

City National Bank of Florida

**20. Address**

8311 SW 40th Street

**21. City**

Miami

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

33155

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

**25. Date**

5/9/2023

**26. Signature of Candidate**

**X** 

**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Gloria Maggiolo, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.

05/10/23

Date

**X**

  
Signature of Campaign Treasurer or Deputy Treasurer