

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

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

(PLEASE PRINT OR TYPE)

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CITY OF MIAMI BEACH
OFFICE OF THE CITY CLERK

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

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)
Mitch Novick

3. Address (include post office box or street, city, state, zip code)
901 Collins Avenue #207
Miami Beach, FL 33139

4. Telephone
(305) 532-0958

5. E-mail address
mitch@mitchnovick.com

6. Office sought (include district, circuit, group number)
Miami Beach City Commission Group 4

7. If a candidate for a nonpartisan office, check if applicable: *NA*
 My intent is to run as a Write-In candidate.

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 *NA* Party candidate.

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

10. Name of Treasurer or Deputy Treasurer
Mitch Novick

11. Mailing Address
901 Collins Avenue #207

12. Telephone
(305) 532-0958

13. City
Miami Beach

14. County
Miami-Dade

15. State
FL

16. Zip Code
33139

17. E-mail address
mitch@mitchnovick.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
446 Collins Avenue

21. City
Miami Beach

22. County
Miami-Dade

23. State
FL

24. Zip Code
33139

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

8-21-23

26. Signature of Candidate

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

I, *Mitch Novick*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer. Deputy Treasurer.

8-21-23
Date

[Signature]
Signature of Campaign Treasurer or Deputy Treasurer