#### BEFORE THE STATE OF FLORIDA COMMISSION ON ETHICS

In re GABRIELA NAVARRO,	)	Financial Disclosure Appeal No. FD 21-067
Appellant.	)	Final Order No. XXX
	)	

#### **FINAL ORDER**

This matter came before the Commission on Ethics, meeting in public session on June 6, 2025, on the appeal of Appellant, pursuant to Section 112.3145(8)(f), Florida Statutes, which assesses an automatic fine of \$25 per day on a person who fails to timely file a required CE Form 1, Statement of Financial Interests. The Commission may waive the fine in whole or in part for good cause shown, based on "unusual circumstances" surrounding the failure to file by the designated date. There are no matters in dispute. Appellant did not request a hearing.

#### Findings of Fact

- 1. According to information provided to the Commission, Appellant served as a Legislative Assistant in the Florida House of Representatives, a position requiring the filing of a 2020 CE Form 1, Statement of Financial Interests. In 2021, the designated due date for submitting a 2020 CE Form 1 was July 1, 2021, with a grace period ending on September 1, 2021.
- 2. On May 26, 2021, The Commission on Ethics sent Appellant a 2020 CE Form 1. This letter was sent to Appellant at 11830 SW 24<sup>th</sup> Terrace, Miami, Florida, 33175.
- 3. On July 30, 2021, The Commission on Ethics sent Appellant a notice of delinquency by certified mail. This notice was sent to Appellant at the 11830 SW 24<sup>th</sup> Terrace address.

- 4. On August 19, 2021, the Commission on Ethics mailed Appellant a postcard intended to remind her of her obligation to file a 2020 CE Form 1. The Commission mailed the postcard to the 11830 SW 24<sup>th</sup> Terrace address.
- 5. On September 8, 2021, the Commission on Ethics mailed Appellant a courtesy notice of fines accruing. This was sent to the 11830 SW 24<sup>th</sup> Terrace address.
- 6. On September 28, 2021, Appellant submitted her 2020 CE Form 1 to the Commission on Ethics, 27 days late.
- 7. On October 12, 2023, the Commission mailed Appellant a notice of assessment of her automatic fine. The notice was sent by mail to the 11830 SW 24<sup>th</sup> Terrace address. It indicated the total of Appellant's accrued automatic fine was \$675 (\$25 per day for 27 days late) and provided that the Commission must receive an appeal of the fine by November 13, 2023.
- 8. On November 27, 2023, the Commission received Appellant's appeal of her automatic fine for Form Year 2020. In part B of her appeal form, Appellant did not check any of the boxes indicating the general reason for her appeal. In part C of her appeal form, where an appellant is asked to provide detailed explanation of his or her appeal, Appellant wrote, "I do not have access to my state email to check dates sent. I do have a copy saved on my computer dated Aug 13, 2021."

#### Conclusions of Law

9. The Commission has jurisdiction over the subject matter of this proceeding pursuant to Section 112.3145, Florida Statutes.

10. Financial disclosure is required of public officials and employees because it enables the public to evaluate potential conflicts of interest, deters corruption, and increases public confidence in government.

#### 11. Section 112.3145(8)(f)2., Florida Statutes, states:

Any reporting person may appeal or dispute a fine, based upon unusual circumstances surrounding the failure to file on the designated due date, and may request and is entitled to a hearing before the commission, which may waive the fine in whole or in part for good cause shown. Any such request must be in writing and received by the commission within 30 days after the notice of payment due is transmitted. In such a case, the reporting person must, within the 30-day period, notify the person designated to review the timeliness of reports in writing of his or her intention to bring the matter before the commission. For purposes of this subparagraph, the term "unusual circumstances" does not include the failure to monitor an e-mail account or failure to receive notice if the person has not notified the commission of a change in his or her e-mail address.

- 12. "An elementary and fundamental requirement of due process in any proceeding which is to be accorded finality is notice reasonably calculated, under all the circumstances, to apprise interested parties of the pendency of the action and to afford them an opportunity to present their objections." Mullane v. Cent. Hanover Bank, 339 U.S. 306, 314, 70 S.Ct.652, 94 L.Eed.865 (1950).
- 13. Appellant was provided notice of her appellate rights and of her opportunity to be heard. Under the circumstances in this case, therefore, Appellant was provided adequate notice of her ability to file a timely appeal, and afforded due process of law. Section 120.569(2)(c), Florida Statutes, provides that a petition shall be dismissed if it has been untimely filed. In this case, Appellant did not file a timely appeal of the fine assessed against her or provide any explain for the untimely filing. As a result, the appeal is dismissed as untimely.

Even if that the appeal were accepted as timely, Appellant stated that she does not know the date that the CE Form 1 was sent. The records of the Commission on Ethics show that the CE Form 1 was sent via email, received, and processed on September 28, 2021 Appellant does not offer any reason for the untimely filing of either her CE Form 1 or her Appeal. Therefore, the Appeal does not contain any facts that indicate an "unusual circumstance" that would prevent someone from timely filing his or her CE Form 1. Thus, considering Appellant's claims, it does not appear that there was an "unusual circumstance" that prevented her from timely filing her 2020 CE Form 1 by September 1, 2021.

#### Order

Based on the foregoing facts and conclusions of law, the Commission hereby finds that unusual circumstances for the failure to file timely have not been demonstrated. We therefore affirm the assessed fine of \$675. The fine shall be paid to the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709, within 30 days of the date this order is rendered, unless other payment arrangements are made by contacting Kimberly Holmes, Financial Disclosure Program Administrator, at the address above or by telephone at (850) 488-7864.

ORDERED by the State of Florida Commission on Ethics meeting in public session on June 6, 2025

Date Rendered

Luis M. Fusté

Chair, Florida Commission on Ethics

THIS ORDER CONSTITUTES FINAL AGENCY ACTION. ANY PARTY WHO IS ADVERSELY AFFECTED BY THIS ORDER HAS THE RIGHT TO SEEK JUDICIAL REVIEW UNDER SECTION 120.68, AND SECTION 112.3241, FLORIDA STATUTES, BY FILING A NOTICE OF ADMINISTRATIVE

APPEAL PURSUANT TO RULE 9.110 FLORIDA RULES OF APPELLATE PROCEDURE, WITH THE CLERK OF THE COMMISSION ON ETHICS, AT EITHER 325 JOHN KNOX ROAD, BUILDING E, SUITE 200, TALLAHASSEE, FLORIDA 32303 OR P.O. DRAWER 15709, TALLAHASSEE, FLORIDA 32317-5709; AND BY FILING A COPY OF THE NOTICE OF APPEAL ATTACHED TO WHICH IS A CONFORMED COPY OF THE ORDER DESIGNATED IN THE NOTICE OF APPEAL ACCOMPANIED BY THE APPLICABLE FILING FEES WITH THE APPROPRIATE DISTRICT COURT OF APPEAL. THE NOTICE OF ADMINISTRATIVE APPEAL MUST BE FILED WITHIN 30 DAYS OF THE DATE THIS ORDER IS RENDERED.

LMF: mdt

Gabriela Navarro 11830 SW 24<sup>th</sup> Terrace Miami, Florida, 33175

21-067 2803/2 FLORIDA

COMMISSION ON ETHICS

NOV 2 7 2023

RECEIVED



## STATE OF FLORIDA COMMISSION ON ETHICS

325 John Knox Road Building E, Suite 200 Tallahassee, FL 32303 Telephone: (850) 488-7864

Fax: (850) 488-3077 Email: disclosure@leg.state.fl.us

### **APPEAL OF AUTOMATIC FINE FOR FORM YEAR 2020**

**DIRECTIONS:** The information you provide in this form is critical for processing your appeal in a timely manner.

In Part A, please provide current contact information. If your contact information changes while your appeal is being processed, please notify us.

In Part B, please check any boxes that specify the general reason(s) for your appeal.

In Part C, please explain in detail the reason(s) for your appeal. In addition to your written explanation in Part C, you may attach any documents that support your appeal.

IMPORTANT: TO PRESERVE YOUR RIGHT TO APPEAL, THIS FORM OR OTHER WRITTEN APPEAL (AND ANY ATTACHMENTS) MUST BE FILED WITH (RECEIVED BY) THE COMMISSION ON ETHICS WITHIN THIRTY (30) DAYS OF THE DATE THE NOTICE OF ASSESSMENT OF AUTOMATIC FINE WAS MAILED TO YOU.

## PLEASE SEND YOUR COMPLETED FORM TO ONE OF THE FOLLOWING:

Mailing Address: Commission on Ethics

P.O. Drawer 15709

Tallahassee, FL 32317-5709

Physical Address: Commission on Ethics

325 John Knox Road Building E, Suite 200 Tallahassee, FL 32303

Fax:

(850) 488-3077

Email:

disclosure@leg.state.fl.us

PART A: YOUR I	NFORMATION
Name: Gabricla M Navorr	0
Address: 1830 SW 24 TeW City:	MIAMI State: Zip: 38175
Daytime Tel.:	Cell: 786 237 8070
Email: gaby @ Mbcokpa. Com	Filer ID# (if known):
Public Employer:	
Public Position:	

PART B: GENERAL REASON(S) FOR YOUR APPEAL
Please choose any/all reasons that apply to your appeal.
I hereby appeal the Notice of Assessment of Automatic Fine on the following basis:
a. [ ] <b>Sickness or injury</b> (Explain in Part C and attach a statement from attending physician, including dates and nature of illness or injury)
b. [ ] Lack of notification – Failure to receive notice (Explain in Part C and provide documentation that supports your assertion that you never received certified mail delinquency notice: for example, incorrect address; misdelivered mail; change in employment; extended absence from home, etc.)
c. [ ] Claim of timely filing of financial disclosure (Explain in Part C and provide copy of certified mail receipt and/or copy of completed form which had been previously filed, along with a sworn notarized statement that you filed prior to the deadline)
d. [ ] Left public position prior to December 31, 2020 (Explain in Part C and provide confirmation from agency that your office-holding/employment ended before 12/31/2020)
e. [ ] <b>Other unusual circumstance</b> (Explain in Part C and provide documentation explaining uncommon, rare, or sudden occurrence that prevented timely filing prior to deadline)
f. [ ] <b>Not required to file</b> (Explain in Part C and provide documentation that supports reason for not required to file)
PART C: DETAILED EXPLANATION OF YOUR APPEAL

PART C: DETAILED EXPLANATION OF YOUR APPEAL
Please provide a detailed explanation of your appeal, including why each option you selected in Part B is
applicable to you. You may use the space provided and/or attach additional pages.
I do not have access to my state amoul to
pheck clades sent. I do haile a copy saved on
my computer dated Aug 13, 2021.

OPTIONAL REQUEST FOR HEARING

[ ] In addition to this written appeal, I specifically request to appear before the Commission in a hearing pursuant to Section 112.3144(8)(f)3 or Section 112.3145(8)(g)3, Florida Statutes. Commission meetings occur in Tallahassee.

## **SIGNATURE**

I have received and read the Notice of Assessment of Automatic Fine and its instructions on How to Appeal and I understand my options. I am requesting disposition of this matter as indicated.

11. 1. 2023 DATE

SIGNATURE

## FORM 1

# STATEMENT OF

2020

	FINANCIAL	INTERESTS	FOR OFFICE USE ONLY:	
GABRIELA NAVARRO LEGISLATIVE ASSISTANT House Of Representatives Employees 11830 SW 24TH TER MIAMI FL 33175-2456			280312 FLORIDA	
*	*** THIS SECTION MUS	ST BE COMPLETED	***	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YO				
FEWER CALCULATIONS, OR US (see instructions for further details)	SING REPORTING THRESHOL NG COMPARATIVE THRESHO	DS THAT ARE ABSOLUTE LDS, WHICH ARE USUALL USING (must check one):	DOLLAR VALUES, WHICH REQUIRES Y BASED ON PERCENTAGE VALUES AR VALUE THRESHOLDS	
PART A PRIMARY SOURCES OF IN (If you have nothing to rep	COME [Major sources of income to	the reporting person - See instr	uctions]	
NAME OF SOURCE OF INCOME	l so	URCE'S O DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY	
PART B - SECONDARY SOURCES C [Major customers, clients, a (If you have nothing to rep	OF INCOME  nd other sources of income to busine bort, write "none" or "n/a")	sses owned by the reporting per	son - See instructions]	
[Major customers, clients, al (If you have nothing to rep NAME OF	nd other sources of income to busine port, write "none" or "n/a")  NAME OF MAJOR SOURCES	ADDRESS	son - See instructions]  PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
[Major customers, clients, al (If you have nothing to rep	nd other sources of income to busine port, write "none" or "n/a")		PRINCIPAL BUSINESS	
[Major customers, clients, al (If you have nothing to rep NAME OF	nd other sources of income to busine port, write "none" or "n/a")  NAME OF MAJOR SOURCES	ADDRESS	PRINCIPAL BUSINESS	
[Major customers, clients, al (If you have nothing to rep NAME OF	nd other sources of income to busine port, write "none" or "n/a")  NAME OF MAJOR SOURCES	ADDRESS	PRINCIPAL BUSINESS	
[Major customers, clients, al (If you have nothing to rep NAME OF	nd other sources of income to busine bort, write "none" or "n/a")  NAME OF MAJOR SOURCES  OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS	

PART D — INTANGIBLE PERSONAL PROPERTY [Sto (If you have nothing to report, write "none	cks, bonds, certificates	of deposit, etc See ins	tructions]
TYPE OF INTANGIBLE	E	BUSINESS ENTITY TO W	HICH THE PROPERTY RELATES
. 10	,		
7			
PART E — LIABILITIES [Major debts - See instructions (If you have nothing to report, write "none	i] i" or "n/a")		
NAME OF CREDITOR		ADDRES	S OF CREDITOR
n > 0			
PART F — INTERESTS IN SPECIFIED BUSINESSES [	Ownership or position	s in certain types of bus	inesses - See instructions]
(If you have nothing to report, write "none"	or "n/a")	SENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	DOGINES	ZERTITE # 1	500M250 2M11 # 2
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			_
POSITION HELD WITH ENTITY	4 1 6		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			
PART G — TRAINING For elected municipal officers, agency created under Part III, Chapter 163 required to c	omplete annual ethics t	training pursuant to section	on 112.3142, F.S.
IF ANY OF PARTS A THROUGH G ARE	CONTINUED ON	A SEDADATE SHE	ET BLEASE CHECK HEDE
SIGNATURE OF FILE	<u>R:</u>		DRNEY SIGNATURE ONLY
Signature:			nuntant licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement:
$\leq \alpha \alpha \alpha \alpha \alpha \alpha \alpha$		1.	, prepared the CE
	<u> </u>		with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the and correct.
Date Signed:	1	CPA/Attorney Signature	:
6/13/2061		Date Signed:	
FILING INSTRUCTIONS:			

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

**MULTIPLE FILING UNNECESSARY:** A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

**Finally**, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

Gabriela Navarro 11830 SW 24 Terrace Miami, FL 33175 MIAMI FL 330 21 NOV 2023PM 6



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Commission on Ethics P.O. Drawer 15709 Tallahassee, FL 32317-5709

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#### Holmes, Kim

From:

Navarro, Gabriela < Gabriela. Navarro@myfloridahouse.gov>

Sent:

Tuesday, September 28, 2021 4:49 PM

To:

COE-Form1

Subject:

Gabriela Navarro Financial Disclosure

**Attachments:** 

gaby financial statement 2020.pdf

Hey Emily-

As per our conversation attached above is the completed financial disclosure document. Please let me know if there is anything else you need from me.

Thank you, Gabriela Navarro

Gabriela Navarro (she/her) Legislative Aide State Representative Michael Grieco 406 House Office Building 402 South Monroe Street Tallahassee, FL 32399 (850)-717-5113

#### FORM 1

## STATEMENT OF FINANCIAL INTERESTS

2020

FOR OFFICE USE ONLY:

9-28-21 \*\*\*\*\*\*\*\*AUTO\*\*ALL FOR AADC 331 T44 P1 187 9627 Processo **GABRIELA NAVARRO** LEGISLATIVE ASSISTANT ID CODE House Of Representatives **Employees** ID NO. 280312 11830 SW 24TH TER MIAMI FL 33175-2456 CONF. CODE Ուրթյեսիսուդիլիլնիովիկյությինուդիուներելից դոիսիուիների հերիների Navarro, Gabriela ■ NEW EMPLOYEE OR APPOINTEE CHECK ONLY IF CANDIDATE OR \*\*\*\* THIS SECTION MUST BE COMPLETED \*\*\*\* **DISCLOSURE PERIOD:** THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020. MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one): **DOLLAR VALUE THRESHOLDS COMPARATIVE (PERCENTAGE) THRESHOLDS** OR PART A - PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF SOURCE SOURCE'S **DESCRIPTION OF THE SOURCE'S** PRINCIPAL BUSINESS ACTIVITY ADDRESS OF INCOME SECONDARY SOURCES OF INCOME PART B ---[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") **ADDRESS** PRINCIPAL BUSINESS NAME OF MAJOR SOURCES NAME OF **ACTIVITY OF SOURCE BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] You are not limited to the space on the (If you have nothing to report, write "none" or "n/a") lines on this form. Attach additional sheets, if necessary. FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2. INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificate (If you have nothing to report, write "none" or "n/a")	es of deposit, etc See instructions]				
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES				
n.()					
PART E — LIABILITIES [Major debts - See instructions] (If you have nothing to report, write "none" or "n/a")					
NAME OF CREDITOR	ADDRESS OF CREDITOR				
n lo					
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or position (If you have nothing to report, write "none" or "n/a")  BUSINES  NAME OF BUSINESS ENTITY	ons in certain types of businesses - See instructions] SS ENTITY # 1 BUSINESS ENTITY # 2				
ADDRESS OF BUSINESS ENTITY  PRINCIPAL BUSINESS ACTIVITY	L .				
POSITION HELD WITH ENTITY					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS					
NATURE OF MY OWNERSHIP INTEREST					
	s training pursuant to section 112.3142, F.S.  LETED THE REQUIRED TRAINING.				
IF ANY OF PARTS A THROUGH G ARE CONTINUED O					
SIGNATURE OF FILER:	CPA or ATTORNEY SIGNATURE ONLY				
Signature:	If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:				
Date Signed:	I,				
ENT TAYOUT THE CONTRACTOR OF T	Date Signed:				
FILING INSTRUCTIONS:					

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by entire completed form and any attachments as a pdf (do not use any your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. <u>Do not file by both mail and email. Choose only one filing method.</u> Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file within 30 days of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.

#### BEFORE THE STATE OF FLORIDA COMMISSION ON ETHICS

In re Gabriela Navarro
Legislative Assistant
Employees
House Of Representatives

PID#: 280312

#### NOTICE OF ASSESSMENT OF AUTOMATIC FINE

The Commission on Ethics hereby gives notice of an assessment of a fine against you pursuant to Section 112.3145(8)(g), Florida Statutes, due to your failure to timely file your 2020 CE Form 1, Statement Of Financial Interests. Under the law, your 2020 CE Form 1, Statement of Financial Interests, was due by July 1, 2021. The law provided for a penalty-free grace period extending the due date to September 1, 2021. After that date, you accrued fines of \$25.00 per day for each day your financial disclosure was late, pursuant to Section 112.3145(8)(g), Florida Statutes.

Inasmuch as your 2020 CE Form 1 was filed September 28, 2021 with the Commission on Ethics, you are fined the amount of \$675.00 (\$25.00 per day for 27 day(s) late). This fine must be paid to the Commission on Ethics within 30 days of the date of this notice unless you appeal the fine to the Commission. The Commission has the authority to consider the appeal and waive the fine in whole or in part if your failure to file on time was due to "unusual circumstances" surrounding the failure to file.

#### HOW TO APPEAL

- 1. Read these instructions carefully before submitting your appeal.
- 2. **LEGAL AUTHORITY:** Appeals are governed by Section 112.3145(8)(g)3., Florida Statutes, and Commission Rule 34-8.215, Florida Administrative Code.
- 3. **FORMAT:** Your appeal must be in writing and mailed to <u>Florida Commission on Ethics</u>, P. O. <u>Drawer 15709</u>, <u>Tallahassee</u>, <u>FL 32317-5709</u>, or delivered to <u>Florida Commission on Ethics</u>, <u>325 John Knox Road</u>, <u>Building E, Suite 200</u>, <u>Tallahassee</u>, <u>FL 32303</u>. The appeal may take the form of a letter or you may use the appeal form included in this mailing. The appeal form also is available at the Commission's website: <u>www.ethics.state.fl.us</u>. Click on "Financial Disclosure" and then the link to the sample appeal form.
- 4. **DUE DATE:** Your appeal must be <u>received</u> by the Commission on Ethics on or before <u>November 13</u>, <u>2023</u>. <u>NOTE</u>: Failure to timely file an appeal will constitute a waiver of your right to appeal and will result in the entry of a default order against you.
- 5. UNUSUAL CIRCUMSTANCES: An appeal must demonstrate that you submitted your CE Form 1 after the extended due date because of "unusual circumstances." "Unusual circumstances" is defined in Commission Rule 34-8.215(4), Florida Administrative Code, as "uncommon, rare, or sudden events over which the reporting individual had no control and which directly result in the failure to act in accordance with the filing requirements." Therefore, circumstances that allowed for time to take steps necessary to file on time do not constitute "unusual circumstances" that will allow the Commission to waive the fine. You have the burden to establish "unusual circumstances." Your appeal must specifically state the circumstances that led to your not filing by September 1, 2021, and must include any documentation or evidence supporting your appeal, such as:
  - a. SICKNESS/INJURY: a statement from attending physician, including dates and nature of the illness or injury;
  - b. LACK OF NOTICE (WRONG ADDRESS): documentation that you did not reside at the address to which notice was sent;
  - c. LACK OF NOTICE (ABSENCE FROM HOME): documentation establishing the period of time of your absence covering the notification period;

- d. CLAIM OF TIMELY FILING OF FINANCIAL DISCLOSURE: (1) an affidavit from you attesting under oath or affirmation that you filed your financial disclosure and your recollection of when and how you filed and (2) a copy of a certified mail receipt and/or a copy of the completed form which was filed. If you have witnesses to your filing, we also will need an affidavit from each witness. NOTE: A claim of having filed the CE Form 1F for the current year does not satisfy the CE Form 1 filing requirement or excuse a late filing;
- e. LEFT PUBLIC POSITION BEFORE DECEMBER 31, 2020: confirmation of your last date of office or employment by your former agency, showing the last date to be before December 31, 2020; or
- f. UNCLAIMED CERTIFIED MAIL: if deliquency notice was addressed correctly but not received, you must explain why.
- 6. YOUR RIGHT TO A HEARING: You have the right to have your appeal heard by the Commission and to appear before the Commission at the hearing, but, to exercise this right, you must specifically request a hearing in your appeal. If you do not request a hearing, you will waive your right to a hearing, the Commission will determine the outcome of your appeal based upon the written record (including the documentation you provide and any documentation in your case file), and you will receive no further notice until after the Commission decides your appeal.

## FAILURE TO PAY FINE OR FILE APPEAL WITHIN 30 DAYS

If you do not timely file an appeal or pay the assessed fine within 30 days of this Notice, a default order will be entered against you and the Commission will take the steps provided by law to collect the fine, including:

- Referral to the CFO of the Department of Financial Services, if you are a salaried state officer or employee, for withholding of a portion of you salary until the fine is satisfied; or
- Referral to your agency's governing body for withholding of a portion of your salary until the fine is satisfied:
- Referral to a collection agency, which can seek garnishment of your wages; and/or
- An additional civil penalty, not limited by this automatic fine, may be imposed if your disclosure statement is filed more than 60 days late and a complaint is filed against you pursuant to Section 112.324, Florida Statutes.

Please contact our office if you have any questions about this matter.

#### **CERTIFICATE OF MAILING**

I certify that a copy of the foregoing Notice of Assessment of Automatic Fine was furnished to:

Gabriela Navarro 11830 Sw 24th Ter Miami, FL 33175 -2456

by Certified Mail on this Thursday, October 12, 2023.

Kinhaed Who

KIMBERLY R. HOLMES Program Administrator

-or-

Florida Commission on Ethics

P. O. Drawer 15709 Tallahassee, FL 32317-5709 Florida Commission on Ethics

325 John Knox Road, Building E, Ste. 200

Tallahassee, FL 32303

Tel.: (850) 488-7864 Fax: (850) 488-3077 Email: disclosure@leg.state.fl.us





9214 8901 0661 5400 0189 7919 48

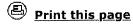
#### RETURN RECEIPT (ELECTRONIC)

280312	
GABRIELA	
11830 SW 2 MIAMI. FL	

URGENT - Open Immediately!

CUT : FOLD MERE	Zone 4
639 ENVELOPE CHT FOLD HEPE	
CUT FOLD MERE	

#### **Mail Piece Details**



#### **Recipient Address**

GABRIELA NAVARRO 11830 SW 24TH TER MIAMI, FL 33175-2456

Record / Case Number:

280312

#### **Return Address**

STATE OF FLORIDA COMMISSION ON ETHICS PO DRAWER 15709 TALLAHASSEE, FL 32317-5709

Entry Point ZIP: 32317

#### **Mail Piece Information**

Tracking Number: 92148901066154000189791948

Date Created: 10/12/2023 02:46:50 PM

Mail Class: USPS First Class Mail

Special Services: Certified Mail

Return Receipt Electronic

1emo: --

Created By: Kimberly Holmes - Commission on Ethics

#### **Signature Information**

Signed For By: GABRIELA NAVARRO Signature Status: Available (Click Here)

Having issues viewing the signature file?

Make sure you are using the latest version of Adobe Acrobat Reader

#### **Tracking Information**

Pre-Shipment Info Sent To Usps, Usps Awaiting Item, October 12, 2023, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, October 12, 2023, 02:05:00 PM, TALLAHASSEE,FL
32317

Delivered Left With Individual, October 16, 2023, 06:57:00 PM, MIAMI,FL 33175

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October 16, 2023

Dear MAIL MAIL:

The following is in response to your request for proof of delivery on your item with the tracking number: **9214 8901 0661 5400 0189 7919 48**.

#### Item Details

Status:

Delivered, Left with Individual

Status Date / Time:

October 16, 2023, 6:57 pm

Location:

MIAMI, FL 33175

**Postal Product:** 

USPS Ground Advantage™

**Extra Services:** 

Certified Mail™

Return Receipt Electronic

Recipient Name:

GABRIELA NAVARRO

#### Recipient Signature

Signature of Recipient:

6 Mareno

1/830 Sw 24th

Address of Recipient:

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

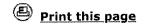
Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely, United States Postal Service® 475 L'Enfant Plaza SW Washington, D.C. 20260-0004

The customer reference information shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

Reference ID: 92148901066154000189791948 280312 GABRIELA NAVARRO 11830 SW 24th Ter Miami, FL 33175-2456

#### **Mail Piece Details**



#### **Recipient Address**

GABRIELA NAVARRO 11830 SW 24TH TER MIAMI, FL 33175-2456

**Record / Case Number:** 280312

#### **Return Address**

STATE OF FLORIDA COMMISSION ON ETHICS PO DRAWER 15709 TALLAHASSEE, FL 32317-5709

Entry Point ZIP: 32317

#### **Mail Piece Information**

Tracking Number: 92148901066154000165086594

Date Created: 07/29/2021 09:55:43 AM Mail Class: USPS First Class Mail

Special Services: Certified Mail

Return Receipt Electronic

Memo: --

Created By: Kimberly Holmes - Commission on Ethics

#### **Tracking Information**

Mailed, July 29, 2021, 09:55:43 AM, TALLAHASSEE,FL 32317

Pre-Shipment Info Sent To Usps, Usps Awaiting Item, July 29, 2021, 12:00:00 AM

Pre-Shipment Info Sent Usps Awaits Item, July 29, 2021, 09:17:00 AM, TALLAHASSEE,FL 32317

Accepted At Usps Origin Facility, July 30, 2021, 06:46:00 PM, TALLAHASSEE,FL 32317

Origin Acceptance, July 30, 2021, 06:46:00 PM, TALLAHASSEE,FL 32317

Arrived At Usps Regional Origin Facility, July 30, 2021, 08:01:00 PM

Processed Through Usps Facility, July 30, 2021, 08:01:00 PM, TALLAHASSEE FL DISTRIBUTION CEN 32301

Departed Usps Regional Facility, July 30, 2021, 11:12:00 PM

Depart Usps Facility, July 30, 2021, 11:12:00 PM, TALLAHASSEE FL DISTRIBUTION CEN 32301

Arrived At Usps Regional Destination Facility, July 31, 2021, 05:15:00 PM

In Transit To Next Facility, August 01, 2021, 12:00:00 AM

Departed Usps Regional Destination Facility, August 01, 2021, 09:42:00 PM

Processed Through Usps Facility, August 01, 2021, 09:42:00 PM, MIAMI FL DISTRIBUTION CENTER 33152

Arrived At Post Office, August 02, 2021, 07:32:00 AM, MIAMI,FL 33175

Arrival At Unit, August 02, 2021, 07:32:00 AM, MIAMI,FL 33175

Out For Delivery, Expected Delivery By 9:00Pm, August 02, 2021, 07:43:00 AM, MIAMI,FL 33175

Out For Delivery, August 02, 2021, 07:43:00 AM, MIAMI,FL 33175

Awaiting Delivery Scan, August 03, 2021, 01:43:00 AM

Awaiting Delivery Scan, August 03, 2021, 01:43:00 AM, MIAMI,FL 33175

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## La Filer - Fines and Appeals - PID 280312 - Gabriela Navarro

Filer	Inform	ation
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**Org Membership** 

**Forms** 

Communications

Fines and Appeals >

View All

#### Filer Flags

2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020(\$) 2021 2022 2023 2024

<< 2024 Form Year

#### Status

Filing: INACTIVE Fine: No Fine

#### Flags

**Public Address** Filing Extensions Indefinite: None Temporary:

Eligible for Fines

None

The filer has fines for: 2021 (Appeal)

2021 Fines and Appeals

#### Form Year 2020 Filed Forms

Received Date	Form Type	Form Signed	Filed by Email	Filing Location	Updated	Comments
09/28/21	Form 1	Yes	Yes	COE	PRINEE on 09/28/2021	

on

Update Fine Information Assign Agency Contact

			Assign Agency Contact				
Fine Balance	Fine Status	Fine Date	Original Assessment	Fine Amount	Last Payment Date	Payment Plan Start Date	Payment Plan Amount
\$675.00	Appeal	10/10/2023	\$675.00	\$675.00			

Fine Address 11830 Sw 24th Ter Miami FL 33175-2456 Org/Suborg House Of Representatives-Employees

#### 2021 Fine Payment History

Date Posted	Description	Amount	Method	Payment ID	Comments
10/10/2023	Fine Levied	+ \$675.00			Fined \$675.00

Current Balance: \$675.00

## 2021 Fine Year Event

Chronology

Invalidate Transaction



Type

Description

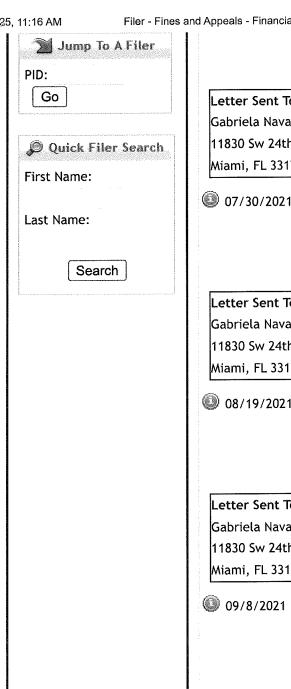
Reference

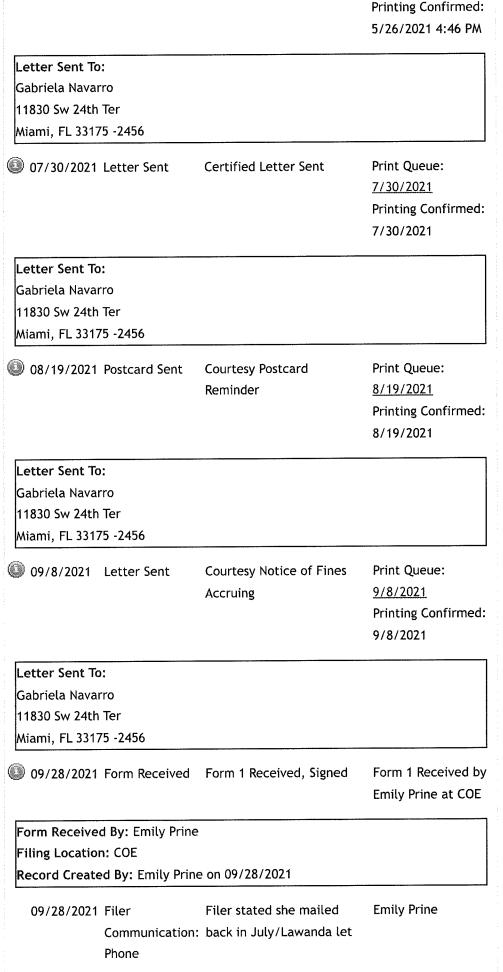
05/26/2021 Letter Sent

Form 1 Official List - Form Print Queue:

5/26/2021 4:46 PM 1 Official Filers List







Annoals - Financial	Disclosura System -	The Florida Commission on Ethics	- Florida Commission on Ethics
Appeals - I mandial	Disclosure Gystem	her know form was never posted. She going to email.	
09/28/2021		From: Navarro, Gabriela Sent: Tuesday, September 28, 2021 4:49 PM To: COE- Form1 Subject: Gabriela Navarro Financial Disclosure Hey Emily- As per our conversation attached above is the completed financial disclosure document. Please let me know if there is anything else you need from me. Thank you, Gabriela Navarro	Emily Prine
09/28/2021		From: COE-Form1 Sent: Tuesday, September 28, 2021 4:54 PM To: 'Navarro, Gabriela' Subject: RE: Gabriela Navarro Financial Disclosure Hi, Thank you! Form recorded. As I mentioned you will receive notification after the first of the year concerning the fine assessment and the option to appeal. Please keep us updated on any address or contact change.	Emily Prine
10/10/2023	Fine Levied	Fined \$675.00	Journal: <u>10/10/2023</u> <u>6:37 PM</u>
10/12/2023	Notice of	Initial Fine Notice	Journal: <u>10/12/2023</u>

Assessed Fine

2:26 PM

