



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 8 MAR 21 Time: 0900

Agenda/Item Number: _____

Issue: D3-22-3734
CODE LANGUAGE

Name: TOM O'MALLEY

Mailing address: 616 JERONIMO DR

City: CG State/Zip: FL

Phone: 3/987-3133 E-mail: OMALLEY TFO
@BELLSOUTH.NET

Are you a registered lobbyist with the City of Coral Gables?

Yes No

Representing: _____

- I wish to speak
- I do not wish to speak
- I have been requested to speak
- Proponent
- Opponent
- To provide information

Comments regarding this issue:

Signature T. O'Malley

Pursuant to Article I, Section 24 of the Florida Constitution, this document, and information contained therein, is a public record.