



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: _____ Time: 8:30 AM

Agenda/Item Number: ARTS ADVISORY PANEL

Issue: ~~_____~~

Name: FERNANDO ALVAREZ-PEÑE

Mailing address: 4103 ANDERSON ROAD

City: CORAL GABLES State/Zip: FL 33146

Phone: 305-903-3193 E-mail: MARZGARD@DELLAUNO.COM

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

Yes No

Representing: CULTURAL DEVELOPMENT BOARD

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature [Signature]

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