

City of Coral Gables

Order of receipt

Request to Address City Commission

PLEASE PRINT

	2 2 2 4
	In hour.
	Comments regarding this issue:
	I have been requested to speak To provide information
	I do not wish to speak Opponent
	I wish to speak Proponent
	Representing: Myself
	Are you a registered lobbyist with the City of Coral Gables? Ves No
	Phone: 500 WT-1001 E-mail: 100 OF your Tolling Month Con
10.	75034
	Mailing address: 2701 Sexully Street
,	Name: BEAL Bryant
	Issue: Des Park
	Agenda/Item Number: Dos Paul
	Date: 3-28-12 Time: ONO

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



City of Coral Gables

Order of receipt

es :
Date: 03/29/23 PLEASE PRINT Time:
Agenda/Item Number: 6-/2 22-3904
Issue: Salvadort Pog Pull
Name: Orace Carnante
Mailing address: 1036 Palemas Ac.
City: Wand GMUS State/Zip: FL 33/34
Phone: 305-962-2258 E-mail: grace a gradest
Are you a registered lobbyist with the City of Coral Gables? Yes No
Representing: Vtg/lun/S
I have been requested to speak To provide information
Comments regarding this issue:
Signature

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-	Date: 3/1		
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	PLEASE PRINT Time:	Address City	al Gables
•	9:03 52	Request to Address City Commission	di di construi

Agenda/Item Number: 6-12-22-3904 Name: Justoh tade

Mailing address: 905 Survella Aux

- State/Zip: 33124

Phone: 305-606-2705 E-mail:

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

Representing: _ Thuish to speak I do not wish to speak Opponent Proponent

I have been requested to speak To provide information

Comments regarding this issue:

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da/Item Number:
Issue: Of last dor sul on Silvato
Name: Shoul Do Bail
Mailing address: 72/ Saluce Coc
City: C & State/Zip: R
Phone: 305, 332, 3256 E-mail: decalocume
Are you a registered lobbyist with the City of Coral Adbles?
Representing:
ℓ I wish to speak ℓ Proponent
I do not wish to speak Opponent To provide information
Comments regarding this issue:
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