



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 3/28/23 PLEASE PRINT Time: 11:20

Agenda/Item Number: C2

Issue: Cameras North Gables

Name: Evelyn DIAZ

Mailing address: 36 Montilla Av

City: C.G State/Zip: FL

Phone: _____ E-mail: evelyndiaz36

Are you a registered lobbyist with the City of Coral Gables?
 Yes No @aol.com

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 [Handwritten Signature]

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