



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Handwritten mark

PLEASE PRINT

Date: Sept 10 Time: 9:43

Agenda/Item Number: G-3

Issue: Weekend trolley service

Name: Mya Sampson

Mailing address: 169 E Flagler St.

City: Miami State/Zip: FL 33131

Phone: 401 699 1329 E-mail: mya@transitalliance.miami

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

Yes No

Representing: Transit Alliance

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

Comments regarding this issue:

 Signature *Mya Sampson*

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



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 9/10/19 Time: 9:59

Agenda/Item Number: G3

Issue: Weekend trolley service

Name: NORA VITAS

Mailing address: 169 E. Flagler St

City: Miami State/Zip: 33131

Phone: 786 705 0281 E-mail: nora@transitalliance.miami

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

Yes No

Representing: Transit Alliance

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

Comments regarding this issue:

 Signature *Nora Vitas*

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