



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 2/28/23 Time: _____

Agenda/Item Number: F-4

Issue: Human Resources /

Labor Relations

Name: MARIA E. OWZ

Mailing address: 1447 Mitchell

City: Coral Gables State/Zip: FL 33146

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@Aol.com

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

Yes

No

Representing: _____

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: Maria E. Owz

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