



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 22 AUG 23 Time: _____

Agenda/Item Number: E6 E-7 E89

Issue: _____

Name: Carl Leay Prime

Mailing address: 141 Florida Ave

City: Coral Gables State/Zip: FL 33133

Phone: 786 252 3437 E-mail: _____

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

Yes

No

Representing: me

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: Carl Leay

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