



City of Coral Gables  
Request to Address City Commission

Order of receipt \_\_\_\_\_

Date: 8-22-23 PLEASE PRINT Time: 9:20

Agenda/Item Number: 96 thru 619

Issue: BOARD Waivers For Non Residents

Name: GORDON SOKOLOFF

Mailing address: 225 Alesio Ave

City: CORAL GABLES State/Zip: FL 33134

Phone: 305-788-0828 E-mail: GORDON@S360.COM

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

Yes  No

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: Gordon Sokoloff