



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 6/8/21 **PLEASE PRINT** **Time:** 2:15 PM

Agenda/Item Number: F-1 / J-1

Issue: 350 Garco Avenue / I1

Name: AUOLIO DUANA

Mailing address: PO Box 143984

City: Coral Gables **State/Zip:** 33114

Phone: _____ **E-mail:** AUOLIO@QUANA.US

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 _____

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