

Date:

Agenda/Item Number:

Issue:

Mailing address: 446

Phone:

E-mail:

State/Zip:

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

Yes

No

City of Coral Gables

Order of receipt_

Request to Address City Commission

PLEASE PRINT

Time: **Request to Address City Commission** City of Coral Gables PLEASE PRINT Order of receipt

Date: lime:
Agenda/Item Number: T.1.
Issue: Granada Brack Shop
Name: Martin Ebbert
address: 6510
City: C6 State/Zip: FC
Phone:E-mail:
Are you a registered lobbyist with the City of Coral Gables?
Representing:
I wish to speak I do not wish to speak Opponent Opponent
\square I have been requested to speak \square To provide information
Comments regarding this issue:
5
7
Signature

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

Comments regarding this issue:

I have been requested to speak

To provide information

I wish to speak

Proponent

Opponent

I do not wish to speak

Representing:

Pursuant to Article I, Section 24 of the Florida Constitution,

this document, and information contained therein, is a public record.