



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 6/11/19 Time: _____

Agenda/Item Number: I-2

Issue: collection & disposal of solid waste

Name: MARIA C. DEWZ

Mailing address: 1447 Miller Rd

City: Coral Gables State/Zip: FL 33144

Phone: 305-323-2154 E-mail: theboadewz@aol.com

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

Yes No

Representing: _____

- | | |
|---|---|
| <input checked="" type="checkbox"/> I wish to speak | <input type="checkbox"/> Proponent |
| <input type="checkbox"/> I do not wish to speak | <input type="checkbox"/> Opponent |
| <input type="checkbox"/> I have been requested to speak | <input type="checkbox"/> To provide information |

Comments regarding this issue:

Signature: Maria C. Dewz

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