



City of Coral Gables
Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 11/14/24 Time: Noon

Agenda/Item Number: F-4

Issue: Ray's Ball

Name: _____



Maria Cruz
1447 Miller Rd
Coral Gables, FL 33146-2307

Mailing address: _____

City: _____ State/Zip: _____

Phone: 305-373-2154 E-mail: thebeach@vz@ad.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: Maria L. Cruz

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