LORIUD CORTU	City of Coral Gables	Order of receipt
	Request to Address City	Commission

PLEASE PRINT			
Date: 8-33	Time: 920 am		
Agenda/Item Number:	5-6-7		
Issue: HAMPER CF	Soning flamp Pla		
Name: GURBON) SOKOLUTT			
Mailing address: 025 Alesio Am.			
City: CORDI FABLES	State/Zip: 7. 33134		
Phone: 305-786-0826	E-mail: GORDENS 3LOWN		
Are you a registered lobbyist with the City of Coral Gables? Ves No			
Representing: (.G.XI.A.	1 584		
I wish to speak I do not wish to speak I have been requested to spea	Proponent Opponent To provide information		
Comments regarding this issue:			
Signature Signature	Skily		

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