



City of Coral Gables

Order of receipt

Request to Address City Commission

PLEASE PRINT

Date:	Time:
Agenda/Item Number:	3
Issue:	
Name: Maite Hall	ez
Mailing address: 1245 M	ilan Ave.
City: Corol Gables sto	
Phone: 3/299-5917 E-1	mail: maitehallor
Are you a registered lobbyist with the City of Ceral Gables? Yes No	
Representing:	
I wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
Signature Pursuant to Article I, Section 24 of	of the Florida Constitution,

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