

City of Coral Gab Request to Addre	oles Order of receipt ess City Commission
Date: PLEASE PRINT Time:	
Agenda/Item Number:	
Issue:	
Name 4 Maria	
Maria Cruz 1447 Miller Rd Coral Gables, FL 33146-230	7
City:	Zip:
305-323-0154 E-1	e Andrews
Are you a registered lobbyist with the City of Coral Gables? Yes No	
Representing:	
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 Que	Dee

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