



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 8/27/2019 PLEASE PRINT Time: _____

Agenda/Item Number: Trolley Service

Issue: _____

Name: Alex Adams

Mailing address: 50 Mowbray Avenue

City: CG State/zip: FL

Phone: 33134 E-mail: _____

Are you a registered lobbyist with the City of Coral 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:

Pro extend hours

Signature _____

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



City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 8/27/2019 PLEASE PRINT Time: 11:30

Agenda/Item Number: 38

Issue: Trolley schedule

Name: Judith Baez

Mailing address: 4100 Salzedo St Apt 417

City: Coral Gables State/zip: FL 33146

Phone: 386 781 3568 E-mail: judithbaez07@gmail.com

Are you a registered lobbyist with the City of Coral 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:

Extend the trolley service to the weekends.

Signature Judith Baez

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City of Coral Gables
Request to Address City Commission

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Date: 8/27/19 PLEASE PRINT Time: _____

Agenda/Item Number: 68

Issue: TROLLEY EXPANSION

Name: ROBERT RUIANO

Mailing address: 1544 MURLINA AVE.

City: CORAL GABLES State/zip: _____

Phone: 305/982-6142 E-mail: RRUIANO@ECOSYSTEMS
.com

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

- Yes No

Representing: BIKE WALK CORAL GABLES

- 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:

I SUPPORT THIS EXPANSIO

Signature [Signature]

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City of Coral Gables
Request to Address City Commission

Order of receipt _____

Date: 8/27/19 PLEASE PRINT Time: 11:02AM

Agenda/Item Number: 6-8

Issue: coral gables trolley extension

Name: Myra Sampson

Mailing address: 169 E Flagler

City: Miami State/zip: FL 33131

Phone: 401 699 1329 E-mail: _____

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

- Yes No

Representing: Transit Alliance

- 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 [Signature]

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**City of Coral Gables
Request to Address City Commission**

Order of receipt _____

PLEASE PRINT

Date: 8/27/19 **Time:** 11:30Am

Agenda/Item Number: G8

Issue: CORAL GABLES TROLEY EXTENSION

Name: PAZHRR CHOUQUE (TRANSPORT AWARDEE)

Mailing address: 169 E FINGER ST #1628

City: MIRMI **State/zip:** 33131 FL

Phone: 305-796-2658 **E-mail:** AZ@TRANSPORTAWARDEE.MIRMI

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

Yes No

Representing: _____

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

Comments regarding this issue:

Signature AC

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