



City of Coral Gables  
Request to Address City Commission

Order of receipt \_\_\_\_\_

PLEASE PRINT

Date: 4/16/24 Time: \_\_\_\_\_

Agenda/Item Number: F-16

Issue: \_\_\_\_\_



Name: \_\_\_\_\_

Mail: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone: 305-323-2151 E-mail: thebeachcrzy@

#01.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 Cruz

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