

City of Coral Gables Request to Address City Commission

ZORIUM	
PLEASE I Date: 12-12-23 Agenda/Item Number:	PRINT TIME: CERTAIN /
Issue: RETIREC COL	
Name: Christophe C	hollenge
Mailing address:	
City:	State/Zip:
Phone:	E-mail:
Are you a registered lobbyist with the	
Representing:	APHILL
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:	
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Signature

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City of Coral Gables Request to Address City Commiss

Request to Add	ress City Commission
Date: 12/12/22	PRINT Time: 1250
Agenda/Item Number:	
Issue: COLA	
Name: RICK COC	K
Mailing address: 16775	SW 80AL
City: PALMETTO BAY	
Phone: 3057330012	E-mail:
Are you a registered lobbyist with the $\frac{\Gamma}{Ves}$ Representing:	City of 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:	
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THE PERSONAL PROPERTY.

Order of receipt **City of Coral Gables**

Request to Addre	ess City Commission
Date: 12/12/23 PLEASE PR	INT
Agenda/Item Number:	
ssue: COLA	
Name: Jon Zelena	ale
City: Palme to Bay Star	
are you a registered lobbyist with the City Yes 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:	
A	* ************************************
Signature	

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CORIUM

City of Coral Gables Request to Address City Commission

LORIUM
Date: 12/12 PLEASE PRINT Time: 1/25
Agenda/Item Number: Z-Z
Issue: XETREMENT COLA
Mailing address: 18 DE LEON DR.
Mailing address: 18 DE KEON DR.
City: MIAMI SOR INGS State/Zip: 71. 33/66
Phone: 305-926-2299 E-mail: MANCE-1269 af hellsouth. NE
Are you a registered lobbyist with the City of Coral Gables?
Representing: MYSELF AS A RETIREE
I wish to speak Proponent
I do not wish to speak Opponent
\square I have been requested to speak \square To provide information
Comments regarding this issue:
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Signature Advisor 24 of the Florida Countity tion

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FLORIDA

Order of receipt Citizens Court Coulded

Request to Address City Commission	
Date: PLEASE	PRINT Time:
Agenda/Item Number:	1
Issue: PENSON CO	
Name: Joseth Mo	wichol
Mailing address:	
City:	State/Zip:
Phone:	E-mail:
Are you a registered lobbyist with the	City of Coral Gables?
Representing: Reprint En	MPLOYEES
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:	
Signatura	

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City of Coral Gables Request to Address City Commission PLEASE PRINT Time:
Agenda/Item Number:
Issue: Police Colf
Name: Marles Faidless
Mailing address: 92011 132 AVP.
City: State/Zip: FL. 3333
Phone: 80 402-9038 E-mail: # 410/6/
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.

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City of Coral Gables Request to Address City Commission

Request to	Address Cit	y Commission
, PLE	ASE PRINT	

Agenda/Item Number: I	PLEASE PRI	NT
Name: Eric Plescov Mailing address: 15933 SW (oC Terr City: Miam State/Zip: 533193 Phone: 3 972-2972 E-mall: Are you a registered lobbyist with the City of Coral Gables? Ves No Representing: I wish to speak Proponent I do not wish to speak Opponent I have been requested to speak Comments regarding this issue:	• •	
Mailing address: 15933 SW (oG Terr City: Micro State/Zip: F33193 Phone: 3 972-2972 E-mail: Are you a registered lobbyist with the City of Coral Gables? Ves No Representing: I wish to speak I do not wish to speak I have been requested to speak Comments regarding this issue:	Agenda/Item Number: I-	
Mailing address: 15933 SW (aC Text City: Man State/Zip: 533193 Phone: 3 972-2972 E-mail: Are you a registered lobbyist with the City of Coral Gables? Ves No Representing: I wish to speak I do not wish to speak I have been requested to speak Comments regarding this issue:	Issue: COLA	· · · · · · · · · · · · · · · · · · ·
City: Man State/Zip: 533193 Phone: 3 972-2972 E-mail: 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 Comments regarding this issue:	Name: Eric Plescon	
Phone: 3 972-2972 E-mail: 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 Comments regarding this issue:		
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 Comments regarding this issue:	City: Miam State	e/Zip: <u>FL 33193</u>
Representing: Wish to speak	Phone: 3 972-2972 E-m	ail:
Representing: I wish to speak I do not wish to speak I have been requested to speak Comments regarding this issue:		of Coral Gables?
I wish to speak I do not wish to speak Thave been requested to speak Comments regarding this issue:	□ _{Yes} □ N	0
I do not wish to speak I have been requested to speak Comments regarding this issue:	Representing:	***************************************
I have been requested to speak Comments regarding this issue:	I wish to speak	Proponent
Comments regarding this issue:	I do not wish to speak	Opponent
	I have been requested to speak	To provide information
9 - 10 -00	Comments regarding this issue:	
9 - 10 -00		
9 0 00		***************************************
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City of Coral Gables Request to Address City Commission

PLEASE PRINT	1100 211
Date: 4/12/23 PLEASE PRINT	ime: 1:00 pu
Agenda/Item Number:	/
Issue: Cola	
Name: Michal Chickello	
Mailing address: 11830 SW	1
City: State/2 Phone: 305 - 496 - 390 E-mail	Pip: FL 3315
Phone: 305 - 496 - 390 E-mail	Chichelle No bells
Are you a registered lobbyist with the City of Yes No	Coral Gables?
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 M. du Chi dh	

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Order of receipt **City of Coral Gables**

Request to Address City Commission PLEASE DRINT Agenda/Item Number Issue: Mailing address: State/Zip: E-mail: _ Are you a registered lobbyist with the City of Coral Gables? □ _{Ves} Representing: Proponent I wish to speak Opponent I do not wish to speak To provide information I have been requested to speak Comments regarding this issue:

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

12/12/20 2 PLEASE PRI	INT /:00 NU
Date: 12/12/23 PLEASE PRI	Time:
Agenda/Item Number:	
Issue: Retiree (COLA
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Name:	
Mailing address: 2541 N	Nob Itill lack
City: SCHUISS Stay)e/Zip: 1=L
Phone: 786 729-1575 E-n	<i>するつみ }</i> ngil:
	hpick3600
Are you a registered lobbyist with the City	of Coral Gables?
□ _{Yes}	lo
Representing:	etive
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	7
Pursuant to Article I, Section 24 of	the Elevisia Constitution

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