



City of Coral Gables

Request to Address City Commission

Order of receipt _____

PLEASE PRINT

Date: 8/24/22 Time: 11:49 am

Agenda/Item Number: 2-1

Issue: Resolution

Name: Monica Segura

Mailing address: _____

City: _____ State/Zip: _____

Phone: _____ E-mail: _____


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

- Yes
- No

Representing: Parks Advisory Board

- 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 

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