City of Coral Gables Order of receipt Request to Address City Commission
Date: 10/11/22 PLEASE PRINT Time:
Agenda/Item Number: <u>9-4</u>
Issue: CATALOMA POG PANK
Name: MARY POWVELL
Mailing address: 3267 KIVIERA PM
City:
City:
Are you a registered lobbyist with the City of Coral Gables?
Representing:
I wish to speak Proponent
I do not wish to speak V Opponent
I have been requested to speak
Comments regarding this issue:
Signature A A A A A A A A A A A A A A A A A A A

Dumune to Article I Continn 21 of the Florida Constitution

City of Coral Gables Order of receipt Request to Address City Commission
Date: TO -//- PLEASE PRINT Time:
Agenda/Item Number:
Issue: Maite Halten
Mailing address: 1245 Milan Ave City: Coral Gables State/Zip: FL
Phone: E-mail: maitchaller@
Are you a registered lobbyist with the City of Coral Gables?
Representing
I wish to speak Image: Proponent I do not wish to speak Image: Opponent I have been requested to speak Image: To provide information Comments regarding this issue: Image: State St
Comments regarding this issue:
Signature Pursuant to Article I, Section 24 of the Florida Constitution,

City of Coral Gab Request to Addres	Order of receipt
PLEASE PRI	NT y
Date: /0-//	Time:
Agenda/Item Number: <u>64</u> Issue: <u>Cata/Dnia Par</u> Name: <u>Laura Loj</u> Mailing address: <u>637 Se</u>	$\frac{DPR}{UIR}$ $\frac{VIR}{E/Zip:} \frac{f(33134)}{LauraCoralgabbs}$ $mail: \frac{LauraCoralgabbs}{GmRil}$ $y of Coral Gables?$
Representing:	
I wish to speak I do not wish to speak I have been requested to speak Comments regarding this issue:	 Proponent Opponent To provide information