



# LEGAL REQUEST MEMORANDUM (LRM)

From: (Name) Wheeler Sky (Dept) Visitors & Convention Bureau - 2870  
Last First  
 (Title) Tourism Development Manager (Phone) (352) 438-2800  
 Signature [Handwritten Signature] Date Thursday, August 15, 2024

The Office of the County Attorney is requested to provide legal assistance as detailed in this legal request and supporting documents (attached).

Request for:  New Document  Review & Comment  RESUBMIT LRM No. 2024-683  
 Approve as to Form  Other

Description of Request

We are requesting legal review of the agreement for the Marketing Assistance Funding Program for Ocala Main Street F/B/O Heart of the Park that will be presented to the TDC for recommendation, the recipients for signature and to the BCC for approval. This contract uses an approved template.  
 \* Please review and approve the amended stipulation regarding the requirement to have a physical brick and mortar location open to the public to qualify for reimbursement. (We would like the stipulation on this contract to be similar to the stipulation on LRM 2024-699)  
 \* As part of the stipulation (section 1.2) please include language which emphasizes that the brick and mortar location MUST be open to the public BEFORE reimbursement will be issued and the recipient has until September 30, 2025 to comply.

For more information or discussion, contact:  Same as above  
 (Name) Shelton Candace (Title) Visitor Relations Representative (Phone) (352) 438-2809  
Last First

Agenda Item?  Yes  No Agenda Date: Wednesday, September 4, 2024  
 Agenda Deadline Date for **Legal:** Friday, August 9, 2024 Agenda Deadline Date for **Admin:** Thursday, August 22, 2024

**Note: Please allow a MINIMUM of 5 working days BEFORE deadlines for LRM to be completed.**

DO NOT COMPLETE - Office of the County Attorney use ONLY

LRM No. \_\_\_\_\_  
 Assigned to:  Matthew Guy Minter, County Attorney  Dana E. Olesky, Chief Asst. County Attorney  Thomas Schwartz, Asst. County Attorney  Valdoston Shealey, Asst. County Attorney

Outcome: Date Received:  
 Approved as to form and legal sufficiency  
 Approved with revisions:  Suggested  Completed  
 Other:

Attorney Signature: \_\_\_\_\_ Date \_\_\_\_\_  
 Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Returned:  Department  Admin  \_\_\_\_\_  
Completed