



# LEGAL REQUEST MEMORANDUM (LRM)

From: (Name) Wheeler Sky (Dept) Visitors & Convention Bureau - 2870  
(Title) Tourism Development Manager (Phone) (352) 438-2800  
Signature [Signature] Date Thursday, June 20, 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. \_\_\_\_\_  
☒ Approve as to Form ☐ Other

## Description of Request

Please review and comment on the attached Three (3) Party Escrow Agreement to be entered into between the State of Florida, the Department of Transportation (FDOT), Marion County and the State of Florida, Department of Financial Services, Division of Treasury (Escrow Agent). This Three (3) Party Escrow Agreement refers to Project Name: Interstate 75 (State Road 93) at NW 49th Street (from the end of NW 49th Street to end of NW 35th Street), Project# 435209-1-52-02: Contractor Construction Phase: in the amount of \$3,555,863.00. Please provide any questions or requests for changes necessary for Marion County to proceed with implementation of this agreement.

For more information or discussion, contact: ☒ Same as above

(Name) \_\_\_\_\_ (Title) \_\_\_\_\_ (Phone) \_\_\_\_\_  
Last First

Agenda Item? ☒ Yes ☐ No Agenda Date: Tuesday, July 2, 2024

Agenda Deadline Date for Legal: Friday, June 7, 2024 Agenda Deadline Date for Admin: Thursday, June 20, 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. 2024-536

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:

**RECEIVED**

By Marion County Attorney- AT at 8:46 am, Jun 21, 2024

Attorney Signature: [Signature] Date: 6/21/24

Staff Signature: [Signature] Date: 6/21/24 Returned: ☒ Department ☐ Admin ☐ \_\_\_\_\_

Completed