



Board of County Commissioners Agenda Request

4A
Agenda Item #

Requested Meeting Date: November 28, 2017

Title of Item: Approve Requests to Fill Committee Vacancies

<input checked="" type="checkbox"/> REGULAR AGENDA	Action Requested:	<input type="checkbox"/> Direction Requested
<input type="checkbox"/> CONSENT AGENDA	<input checked="" type="checkbox"/> Approve/Deny Motion	<input type="checkbox"/> Discussion Item
<input type="checkbox"/> INFORMATION ONLY	<input type="checkbox"/> Adopt Resolution (attach draft)	<input type="checkbox"/> Hold Public Hearing* <i>*provide copy of hearing notice that was published</i>

Submitted by: Jessica Seibert	Department: Administration
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Presenter (Name and Title): Jessica Seibert, County Administrator	Estimated Time Needed: 15 minutes
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Summary of Issue:

The following committees have openings. Applications have been included for your review.

1. East Central Regional Library - One opening, one application has been received.
2. Housing and Redevelopment Authority - One opening, two applications have been received.
3. Board of Adjustment - One opening in District 2, two applications have been received.
One opening in District 4, one application has been received.
4. Planning Commission - Two total openings from Districts 1, 2, 3, or 4, five applications have been received.

Terry Neff included a memo (attached) and will be present to answer questions.

Alternatives, Options, Effects on Others/Comments:

Recommended Action/Motion:
Make appointments for each of the above committee openings.

Financial Impact:
 Is there a cost associated with this request? Yes No
 What is the total cost, with tax and shipping? \$
 Is this budgeted? Yes No *Please Explain:*

NEWS RELEASE

AITKIN COUNTY HAS AN OPENING ON THE FOLLOWING COMMITTEE:

1. East Central Regional Library Board

*At Large

Serve as a citizen representative from Aitkin County on the joint governing board of East Central Regional Library, along with representatives of Chisago, Isanti, Kanabec, Mille Lacs, and Pine Counties. The Board is comprised of 1 county commissioner and 2 citizens appointed by each of the respective counties who are signatories of a Joint Powers Agreement. The Board is responsible for policies, goals and objectives, budget, hiring a director, and advocacy for the regional library system. Board meetings are held at 9:30 a.m. on the second Monday of the month, generally at the regional library headquarters in Cambridge with 2-3 meetings per year at one of the other branch libraries. Board members also serve on working committees as appointed by the Board President. Mileage is reimbursed. Applications are being accepted through Friday, November 17, 2017. The Aitkin County Board of Commissioners will make the selection at their Tuesday, November 28, 2017 County Board meeting.

For additional information on the East Central Regional Library Board, please email Carla Lydon @ clydon@ecrlib.org

Applications can be found on the Aitkin County website, picked up in the West Annex of the Courthouse, or call 218-927-3093 to request an application by mail.

Please contact Sue Bingham at (218) 927-7306 for any questions concerning this news release that you will not bill to the County. Thank you.

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

ECRL Board - re-appointment

AITKIN COUNTY COMMISSIONER DISTRICT _____

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I was appointed to the ECRL board Aug 2016 to complete Jim Raiser's term. I would like to continue on the ECRL board. My past employment was 40 yrs as RN and nurse practitioner. I retired May 2016. Libraries are a great resource for the public. I personally have a passion for reading and strongly support the public library system. Please consider me for re-appointment to the ECRL Board.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Rebecca May

Signature of Applicant

10-13-17

Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No _____

Is this application submitted at the suggestion of appointing authority? Yes _____ No _____

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Rebecca May

STREET ADDRESS OF APPLICANT:
101 Main Ave So
Aitkin, MN 56431

PHONE NUMBERS:
DAYS 218 927 3481
EVENINGS "

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

NEWS RELEASE

AITKIN COUNTY HAS AN OPENING ON THE FOLLOWING COMMITTEE:

Aitkin County Housing Authority Board

*District 1

This committee meets 13 times each year. Travel required. Qualifications include participation and knowledge of housing programs in the service area. Applications are being accepted through Friday, November 17, 2017. Please email Nancy J. Houg at: nancy@aitkinhra.org for more information. The Aitkin County Board of Commissioners will make the selection at a County Board meeting.

Applications can be found on the Aitkin County website, picked up in the West Annex of the Courthouse, or mailed to you if requested.

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Housing and Redevelopment Authority of Aitkin County

AITKIN COUNTY COMMISSIONER DISTRICT 1

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I am currently retired after being employed by the Aitkin County Public Health Department for 10 1/2 years as a staff Public Health nurse and also as director of the department. I was a retail small business owner in Aitkin for 25 years. I am currently a board member of the Aitkin - Itasca - Hoodichewy Community Health Services Board Board

I am also a current member of various local non-profit organizations

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Shleen E. Williams

Signature of Applicant

10-11-17

Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes No

Is this application submitted at the suggestion of appointing authority? Yes No

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Ihleen E. Williams

STREET ADDRESS OF APPLICANT:

36987 US Hwy 169
Aitkin, Mn 56431

PHONE NUMBERS:

DAYS 218-927-3966
EVENINGS 218-927-3966

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

NOV 15 2017

MINNESOTA OPEN APPOINTMENT ACT APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

AITKIN COUNTY HOUSING AUTHORITY BOARD

AITKIN COUNTY COMMISSIONER DISTRICT 1

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

Served terms on Health + Human Services Board
Respite Care Coordinator/Provider
DIRECTOR AITKIN COUNTY CARE - 2016

I am very familiar with housing options
in Aitkin County. Provided services in these
housing options

BLANDIN LEADERSHIP Trng -
AITKIN TOWNSHIP Board - Deputy Clerk @ Present
Previous Supervisor @ Clerk

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Renee Larson
Signature of Applicant

11/12/17
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes _____ No X

Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431

NAME OF APPLICANT: Renee LARSON

STREET ADDRESS OF APPLICANT:
329-4th St SE
AITKIN MN 56431

PHONE NUMBERS:
DAYS 218-839-0708
EVENINGS 218 429-0040

For Office Use Only

Date Appointed: _____ Date of Term Expiration: _____ Term #: _____


Aitkin County Environmental Services Planning and Zoning
209 Second Street NW
Room 100
Aitkin, MN 56431
Phone: 218-927-7342
Fax: 218-927-4372



MEMORANDUM

DATE: November 20, 2017

TO: Aitkin County Board of Commissioners
Jessica Seibert, County Administrator

FROM: Terry Neff, Environmental Services Director 

RE: Board of Adjustment and Planning Commission Appointments

I have reviewed the applications for the openings on the Board of Adjustment for Districts 2 and 4. We received two applications for District 2 and one for District 4. The current District 2 member, Ed Spiel, has good attendance and has been a good member. I recommend Ed Spiel representing District 2 be reappointed for another term and Jeremy Paquette representing District 4 be reappointed for another term.

I have reviewed the applications for the openings on the Planning Commission. There are currently two openings on the Commission. Five applications were received, one from current Commission member Dennise Sonnee. Dennise has served one term, participates well and has had good attendance. I recommend Dennise Sonnee be reappointed for another term. The other four applicants all have good backgrounds and would likely serve well. They are Steve Kulifaj – District 2, Terry Betley – District 1, Brian Anderson – District 1 and Robert Harwarth – District 1.

If you have any questions prior to the meeting, please contact me at 218-927-7342 or by e-mail at tneff@co.aitkin.mn.us.

c:\ctybrd\ctybrd2017

NEWS RELEASE

AITKIN COUNTY HAS OPENINGS ON THE FOLLOWING COMMITTEES:

1. Aitkin County Board of Adjustment
 - Commissioner District 2 (One opening)
 - Commissioner District 4 (One opening)

Reviews variance applications and interpretations from Aitkin County Zoning Ordinances. Individuals will participate in public hearings for reviewing variance applications from Aitkin County Zoning Ordinances. Meetings are held the first Wednesday of each month at 4:00 P.M.

2. Aitkin County Planning Commission
 - Commissioner District 1, 2, 3, or 4 (Two openings total)

Reviews applications for Conditional Use Permits, Interim Use Permits, Planned Unit Developments, Rezoning and Subdivisions to ensure compliance with Aitkin County Ordinances and the Comprehensive Land Use Plan. Individual will participate in public hearings for review of the applications. Meetings are held on the third Monday of each month at 4:00 P.M.

Applications for both committees will be accepted until Noon on November 17, 2017, or until filled. The positions will start the first meeting of January 2018. Terms are three years. Applications can be found on the Aitkin County website, picked up in the West Annex of the Courthouse, or mailed to you if requested.

The Aitkin County Board of Commissioners will make the committee selections from submitted applications during a County Board meeting. All applicants will receive notification by mail whether or not they have been selected. For more information please contact Terry Neff, Environmental Services Director at 218-927-7342.

Please contact Sue Bingham at 218-927-3093 for any questions concerning this news release that you will not bill to the County. Thank you.

Sue

MINNESOTA OPEN APPOINTMENT ACT APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Aitkin County Board of Adjustment

AITKIN COUNTY COMMISSIONER DISTRICT 2

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I AM Retired, but still Licensed to practice LAW
Since 1982

I Live at 41199 310th LN Aitkin
FARM ISLAND Township

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

W.A. Schmitt
Signature of Applicant

Oct 16, 2017
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No _____

Is this application submitted at the suggestion of appointing authority? Yes _____ No _____

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: William A. Schmitt

STREET ADDRESS OF APPLICANT:
41199 310th LN
Aitkin, MN 56431

PHONE NUMBERS:
DAYS 218 927 6796
EVENINGS _____

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

BOA

AITKIN COUNTY COMMISSIONER DISTRICT 2

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I have been on the Aitkin County Board of Adjustment for the past ten years and have attended three continuing education classes for this board. I also have been second chair for six years. Graduated high school '56', Marine Corps '66' school for machinest then tool & die maker till I started my own Machine shop in '83' till retirement in '97'. Currently active in St James Church, Knights of Columbus & the American Legion

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Edward Spief
Signature of Applicant

11/2/17
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No _____

Is this application submitted at the suggestion of appointing authority? Yes _____ No _____

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Edward Spief

STREET ADDRESS OF APPLICANT:
31479 - 395th Place
Aitkin, Mn. 56431

PHONE NUMBERS:
DAYS 927-2658
EVENINGS Same

For Office Use Only

Date Appointed: _____ Date of Term Expiration: _____ Term #: _____

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

AITKIN COUNTY BOARD OF ADJUSTMENTS

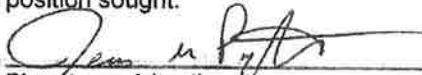
AITKIN COUNTY COMMISSIONER DISTRICT 4

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I HAVE SERVED ON THE BOA FOR THE LAST 3 TERMS

I AM A LOCAL CONTRACTOR

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.


Signature of Applicant

11/11/2017
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes X No _____

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW – Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Jeremy Paquette

STREET ADDRESS OF APPLICANT:

50801 237th Place

McGregor MN 55760

PHONE NUMBERS:

DAYS _____

EVENINGS _____

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Planning Commission

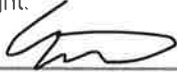
AITKIN COUNTY COMMISSIONER DISTRICT 2

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I request to be considered for appointment to the planning commisiion as a
vested business owner, home owner, and employer in Wealthwood township.

As a serial entrepreneur, former CEO, education director, and someone who has been
involved in the Conditional Use Permit process on multiple occasions, I am confident
that I could offer valuable input and be a strong contributor to the process. I have
experience on multiple boards an am currently representing the rights and interests
of Aitkin county residents on the MLFAC board. I will be a dedicated board member
and educate myself on all aspects necessary to best serve the residents and board.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.



Signature of Applicant

10/22/17

Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No _____

Is this application submitted at the suggestion of appointing authority? Yes _____ No _____

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW – Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: Steve Kulifaj

STREET ADDRESS OF APPLICANT:
38421 State Hwy 18, Aitkin MN 56431

PHONE NUMBERS:
DAYS 775-750-6772

EVENINGS 775-750-6772

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

MINNESOTA OPEN APPOINTMENT ACT APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

PLANNING COMMISSION

AITKIN COUNTY COMMISSIONER DISTRICT 1

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

REGISTERED LAND SURVEYOR

FORMER ASSIST. CLERK WITH COUNTY DISTRICT

FORMER AITKIN COUNTY SURVEYOR

LICENSED ABSTRACTOR

LICENSED TITLE INSURANCE PROVIDER

OWNER OF AITKIN COUNTY ABSTRACT COMPANY

FORMER MEMBER DISTRICT 1, BOARD OF ADJUSTMENT

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Terry J. Betley
Signature of Applicant

10/24/17
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes _____ No X

Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW – Room 130, Aitkin, MN 56431

NAME OF APPLICANT: TERRY J. BETLEY

STREET ADDRESS OF APPLICANT:
12 THIRD ST NW
AITKIN MN 56431

PHONE NUMBERS:
DAYS 218-727-6339
EVENINGS 218-727-2851

For Office Use Only

Date Appointed: _____ Date of Term Expiration: _____ Term #: _____

**MINNESOTA OPEN APPOINTMENT ACT
APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY**

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

Aitkin Co Planning Commission

AITKIN COUNTY COMMISSIONER DISTRICT

3

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I have served on this committee for the previous 3 yrs. I am a real estate broker & certified residential appraiser.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Signature of Applicant

Dennise Sonnee

Date

10-27-17

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes _____ No X

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW – Room 130, Aitkin, MN 56431**

NAME OF APPLICANT:

Dennise Sonnee

STREET ADDRESS OF APPLICANT:

20585 326th Ave
Isle, MN 56342

PHONE NUMBERS:

DAYS 612-759-8174

EVENINGS Same

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

MINNESOTA OPEN APPOINTMENT ACT APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

AITKIN COUNTY PLANNING & ZONING COM

AITKIN COUNTY COMMISSIONER DISTRICT 1

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

I LIVE IN AITKIN COUNTY 19 YEARS AT SAME ADDR.

I HAVE BEEN ON SPENCER TOWNSHIP BOARD
FOR 7 YEARS - 7 YEARS AS ROAD SUP &
BOARD CHAIRPERSON 5 YEARS.

I WAS ON PLANNING & ZONING 2012 TO 2014
FOR AITKIN COUNTY

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Robert A. Harwarth
Signature of Applicant

OCT 31 2017
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes _____ No X

Is this application submitted at the suggestion of appointing authority? Yes _____ No X

**Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431**

NAME OF APPLICANT: ROBERT A. HARWARTH

STREET ADDRESS OF APPLICANT:

38191 360ST P.O. 70
AITKIN MINN 56431

PHONE NUMBERS:

DAYS 218-927-4572
EVENINGS _____

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____

MINNESOTA OPEN APPOINTMENT ACT APPLICATION FOR SERVICE ON COUNTY/STATE AGENCY

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

AITKIN COUNTY PLANNING COMMISSION

AITKIN COUNTY COMMISSIONER DISTRICT 1,2,3,4

Minnesota Statutes 15.0597, state that the application shall include a "statement that the nominee satisfies any legally prescribed qualifications and any other information the nominating person feels be helpful to the appointing authority." (May include employment, community service experience, or education that would be pertinent to this appointment)

MY NAME IS BRIAN ANDERSON OF AITKIN AND I AM INTERESTED IN SERVING ON THE PLANNING COMMISSION. I LIVED IN THE ST. PAUL AREA FOR MANY YEARS AND MOVED TO AITKIN IN 2011. I HAVE A DEGREE IN FINANCE FROM ST. CLOUD STATE UNIVERSITY AND GRADUATED IN 1979. I WORKED IN HEALTH CARE ADMINISTRATION FOR OVER THIRTY YEARS INCLUDING AT BLUE CROSS & UNITED HEALTH CARE. NEGOTIATED PROVIDER CONTRACTS AND CALCULATED PREMIUM RATES. CURRENTLY WORKING PT AT AITKIN CHAMBER AND SERVES ON AITKIN COUNTY CARE BOARD OF DIRECTORS.

I, the undersigned, hereby state that I satisfy, to the best of my knowledge, all legally prescribed qualifications for the position sought.

Brian Anderson
Signature of Applicant

NOVEMBER 2, 2017
Date

If applicant is being nominated by another person or group, the above signature indicates consent to nomination.

Is this application submitted by appointing authority? Yes No

Is this application submitted at the suggestion of appointing authority? Yes No

Please return application to the Aitkin County Administrator's office, located at
217 2nd Street NW - Room 130, Aitkin, MN 56431

NAME OF APPLICANT: BRIAN ANDERSON

STREET ADDRESS OF APPLICANT:
408 6TH STREET NW
AITKIN, MN 56431

PHONE NUMBERS:
DAYS 218 821-6613
EVENINGS 218-429-0132

For Office Use Only

Date Appointed: _____

Date of Term Expiration: _____

Term #: _____