



# Board of County Commissioners Agenda Request

2L  
Agenda Item #

**Requested Meeting Date:** December 22, 2020

**Title of Item:** Natural Resources Advisory Committee Appointments

<input type="checkbox"/> REGULAR AGENDA	<b>Action Requested:</b>	<input type="checkbox"/> Direction Requested
<input checked="" 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>
<b>Submitted by:</b> Dennis Thompson		<b>Department:</b> Land
<b>Presenter (Name and Title):</b> Dennis Thompson, Assistant Land Commissioner		<b>Estimated Time Needed:</b> NA
<b>Summary of Issue:</b> See attached memorandum.		
<b>Alternatives, Options, Effects on Others/Comments:</b> Find and select other individuals to serve on the committee.		
<b>Recommended Action/Motion:</b> Approve appointment and reappointment of the recommended applicants.		
<b>Financial Impact:</b> Is there a cost associated with this request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No What is the total cost, with tax and shipping? \$ Is this budgeted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>Please Explain:</i>		

Legally binding agreements must have County Attorney approval prior to submission.



## Aitkin County Land Department


502 Minnesota Ave N  
Aitkin, MN 56431

218-927-7364  
[acld@co.aitkin.mn.us](mailto:acld@co.aitkin.mn.us)

### MEMORANDUM

**DATE:** December 16, 2020

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

**FROM:** Dennis Thompson, Assistant Land Commissioner 

**RE:** Natural Resources Advisory Committee Appointments

I have reviewed the applications for the openings on the Natural Resources Advisory Committee. There are five at-large openings and one opening for Commissioner District 4. Galen Tveit is currently an at-large committee member. I would like to have him moved from at-large to the Commissioner District 4 representative. This would then leave 6 at-large openings to be filled. I recommend that Dale Shipp, James Bixby, Robert Marcum, Russ Hoppe, and Bob Lake be reappointed to another term. I also recommend Jessica Perrine be appointed to the committee as an at-large representative. She has not previously served on the committee.

If you have any questions prior to the meeting, please contact me at (218) 927-7364 or by e-mail at: [dennis.thompson@co.aitkin.mn.us](mailto:dennis.thompson@co.aitkin.mn.us)

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

NAME OF AGENCY OR COMMITTEE YOU WISH TO SERVE ON:

NRAC

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)

Being a land owner myself, Hope to  
promote good stewardship of Aitkin  
counties forests, waters, parks and  
wild life

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

Russell P. Hoppe  
Signature of Applicant

12-14-2020  
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  
307 2<sup>nd</sup> Street NW - Room 310, Aitkin, MN 56431**

NAME OF APPLICANT:

Russell Hoppe

STREET ADDRESS OF APPLICANT:

28901 442<sup>nd</sup> PL

Aitkin, MN

56431

PHONE NUMBERS:

DAYS 218-927-4142

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:

Natural Resources Advisory Committee

AITKIN COUNTY COMMISSIONER DISTRICT 3 (or at large)

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 would like to continue my service on the NRAC. I have a deep commitment Aitkin County and it's

people. I currently serve as the President of the Long Lake Conservation Foundation, and that position

dovetails nicely with service on the NRAC. I am able to give (and receive) updates about our service to

LLCC.

I currently serve on the board of directors of : Lakes and Pines, Angels of McGregor, Mn. DHS

Medicaid Advisory Committee (7 years), Supervisor Salo Township (6th term), National Association of

Medicaid Directors conference speaker 2018 and 2020.

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

10/28/2020

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  
307 2<sup>nd</sup> Street NW – Room 310, Aitkin, MN 56431**

NAME OF APPLICANT: Robert Marcum

STREET ADDRESS OF APPLICANT:

36136 Kestrel Ave.

McGregor, Mn. 55760

PHONE NUMBERS:

DAYS 218-768-2337

EVENINGS 218-565-2449

**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 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)

EDUCATION UNIVERSITY MINNESOTA ST PAUL CAMPUS (FORESTRY)  
EMPLOYED BY U.S. FOREST SERVICE BOZEMAN MONTANA  
GALLATIN DISTRICT ALSO BEAR TOOTH RANGER DISTRICT.  
(VOLUNTEER) GOODWILL INDUSTRIES - BIG BROTHERS -  
BOY SCOUTS.

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

James Bixby  
Signature of Applicant

10-14-2020  
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  
307 2<sup>nd</sup> Street NW - Room 310, Aitkin, MN 56431

NAME OF APPLICANT: James Bixby

STREET ADDRESS OF APPLICANT:  
34584-298TH STREET  
AITKIN, MN 56431

PHONE NUMBERS:  
DAYS 952-432-8479  
EVENINGS 218-927-1457

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:

Natural Resources Advisory Committee

AITKIN COUNTY COMMISSIONER DISTRICT

5

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)

Retired

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

Dale Shipp  
Signature of Applicant

10/17/20  
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  
307 2<sup>nd</sup> Street NW - Room 310, Aitkin, MN 56431

NAME OF APPLICANT: Dale Shipp

STREET ADDRESS OF APPLICANT:  
38420 Grove ST  
Palisade MN 56469

PHONE NUMBERS:  
DAYS 218 845 2545  
EVENINGS 218 845 2545

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:

Natural Resource Advisory Committee

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 taught Natural Resources & Forestry for 32 yrs.  
@ Aitkin High School. I enjoy our counties'  
Park & Trail System. I would like to be  
reappointed as a steward of our counties'  
land, forests, water and minerals.

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

Bob Lake  
Signature of Applicant

10-12-2020  
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  
307 2<sup>nd</sup> Street NW - Room 310, Aitkin, MN 56431**

NAME OF APPLICANT: Bob Lake

STREET ADDRESS OF APPLICANT:  
38050, 390<sup>th</sup> St.  
Aitkin, MN. 56431

PHONE NUMBERS:  
DAYS Home - 218-927-3442  
EVENINGS Cell - 218-232-1219

**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:

Natural Resources Advisory Committee

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)

Experience: Registered nurse of 15 years, employed at Riverwood Health Center, community service includes volunteer hours with church, food shelf, care for dogs in service training program

I would like to participate in a positive and meaningful way in my community governance.

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

Jessica Perrine  
Signature of Applicant

11/19/2020  
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 307 2<sup>nd</sup> Street NW - Room 310, Aitkin, MN 56431

NAME OF APPLICANT: Jessica Perrine

STREET ADDRESS OF APPLICANT:

33702 370th Ave  
Aitkin MN 56431

PHONE NUMBERS:

DAYS 320 630 1315  
EVENINGS same

For Office Use Only

Date Appointed: \_\_\_\_\_

Date of Term Expiration: \_\_\_\_\_

Term #: \_\_\_\_\_