



Board of County Commissioners Agenda Request

4A

Agenda Item #

Requested Meeting Date: October 28, 2025

Title of Item: Appointment of Aitkin County HRA Commissioner

☒ REGULAR AGENDA

☐ CONSENT AGENDA

Action Requested:

☒ Approve/Deny Motion

☐ Adopt Resolution (attach draft)

☐ Hold Public Hearing **provide copy of hearing notice that was published*

☐ Direction Requested

☐ Discussion Item

☐ Information Only

Submitted by:

Teresa Smude, Executive Director

Department:

Aitkin County HRA

Presenter (Name and Title):

Teresa Smude, Executive Director

Estimated Time Needed:

5 minutes

Summary of Issue:

Attached please find an Application for Service for Edward Anderson to be re-appointed for a five year term to the Aitkin County Housing and Redevelopment Authority board of commissioners.

Pursuant to statute, all appointments to the HRA board must be made by the County Commissioners.

Alternatives, Options, Effects on Others/Comments:

Recommended Action/Motion:

Motion to approve appointment of Edward Anderson as commissioner on the Aitkin County HRA Board.

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:

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 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'd like to continue the work of the HRA providing
housing to those who otherwise would have fewer options.
We're doing good work and I'd like to be part of that.
Also through the work of our Executive Director we've secured
millions in funding to improve facilities and frankly
provide work opportunities for the community

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

Edward Anderson
Signature of Applicant

October 15, 2025
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 2nd Street NW – Room 310, Aitkin, MN 56431**

NAME OF APPLICANT: Edward Anderson

STREET ADDRESS OF APPLICANT:
42987 Daisy Street
Aitkin, MN 56431

PHONE NUMBERS:
DAYS _____
EVENINGS 218-838-2089

For Office Use Only

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