## COMMISSIONER'S AGENDA Thursday, December 29, 2016 10:00 A.M.

PRESENT: Allan Underdal, Deb Brandon, Joe Pehan and Treva Nelson

## <u>Public comment is allowed on all agenda items at the direction of the Chairman and</u> following Board rules.

Approval of December 19, 2016 Minutes: Joe motioned to approve. Deb 2<sup>nd</sup> the motion and the motion carried.

- 1. Consider the appointment of a Public Administrator for Toole County, necessary because of the death of Helen Schnee. **This agenda item was postponed.**
- 2. Consider approval of the Toole County Noxious Weed Management Plan. This has already been approved by the Toole County Road/Weed Board. Joe motioned to approve. Deb 2<sup>nd</sup> the motion and the motion carried.
- 3. Consider approval of Resolution 31-2016. A resolution to continue participation in the Dept. of Administration's Surplus Property Program with Joe Pehan, Brian Krahn, Lloyd Omdahl, Robert Postma and Jim Ghekiere as authorized purchasers. **Deb motioned to approve. Joe seconded the motion and the motion carried.**

State of Montana Surplus Property Program P O Box 200137 Helena, MT 59620-0137 (406) 444-9923

## RESOLUTION 31-2016

Donee #: 87/423
Approved to acquire:

State: Yes No Federal: Yes No

BE IT RESOLVED THAT: Tool (Print I	e County Legal Name of Applicant Organization)			- NEW TORON CONTROL OF THE STATE OF THE STAT
STREET ADDRESS: 226 14 :	st s	City: Shel	by	MT 59474
MAILING ADDRESS:				MT 59
PHONE NUMBER: 406-424-	8310	FAX NUMBER:	406-424-	8301
E-MAIL ADDRESS: +ccomm	2 toole countymt.	204		
by its Governing Board (or) by the Chic and its funds to the extent necessary to The employee(s) whose name(s) a federal surplus property from the	ef Administration Officer, if not to comply with the TERMS and and signature(s) appears o	governed by a boar CONDITIONS listed n this document is	on the reverse side (are) authorize	d to acquire
BE IT FURTHER RESOLVED THAT this Property Program and the same remain rescind said Resolution.	in in effect until written notice			
CERTIFICATION: I, Allan the (Chairman of the	Underdal  Board (or) Administrative Officer)		hereby cert	ify that I am
Chairman	of the	Toole Count	Commissi	oners
(Title) of the above applicant that the foregoi		(Full Legal Name o	Governing Board)	and a control of the
,	n theday ofday ofday of	ember , 2	, 2016 at which a	a quorum was
TYPE OR PRINT NAME:	ACQUIRE SURPLUS PROPE	RTY AND THEIR S	DEPARTMENT	
1. Joe Pehan	SIGNATURE		Commiss	
2. Brian Krahn	R TIM	AA	Medical Ctr	
	11 10000	lylaride	Road	Lifted Mariton
3. Lloyd Omdahl 4. Robert Postma	Refer to the	ma)	Road	
5. Jim Ghekiere	Jun Mh	Kier	Weed	