1924 Town Road
Two Harbors, MN 55616
PH: 218-834-5255
EMAIL: silvercreek@frontiernet.net

Certificate of Appointment

The Silver Creek Board of Supervisors hereby appoints: _____Namexxxx_____
to the Town Hall Restoration Committee of the Town of Silver Creek, Lake County, Minnesota.
This appointment is made on the ____20th____ day of _____January_____, 2026.

_____	_____	_____
Supervisor Chuck Voss	Supervisor Mike Hoops	Chairman Greg Hull

Attest:

_____
Alison Oftedahl,
Clerk, Town of Silver Creek

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By accepting this appointment, I understand that members of the Hall Restoration Committee serve as a subcommittee of the Silver Creek Board of Supervisors and as such are bound by the same laws and statutes that govern the Township.

_____
XXXX Name

Attest:

_____
Katie Anderson
Deputy Clerk, Town of Silver Creek