



# AGENDA

## TOWN OF HUDSON – TOWN COUNCIL WORK SESSION

March 2, 2022 - 5:00 P.M.

50 South Beech Street, P.O. Box 351, Hudson, CO 80642  
Phone: (303) 536-9311 | [www.hudsoncolorado.org](http://www.hudsoncolorado.org)

### WORK SESSION AGENDA

#### 1) COUNCIL INTERVIEWS

*Applicant information for each qualified application received on or before February 17, 2022 has been provided as an attachment to this agenda. Town Council will interview each applicant in the following order:*

- a. Debra Tygrett
- b. Stuart Ashmore
- c. Leigh Ann Winslow
- d. Shannon Norgren
- e. Laurie Kuntz

#### Join Zoom Meeting: **Online**

<https://us02web.zoom.us/j/84714263080?pwd=SHJWVjZ5SmVWYmN4QWlTZS80a1BQQT09>

#### **Dial by your location**

+1 669 900 6833 US (San Jose)  
+1 253 215 8782 US (Tacoma)  
+1 346 248 7799 US (Houston)

Find your local number:

<https://us02web.zoom.us/j/84714263080?pwd=SHJWVjZ5SmVWYmN4QWlTZS80a1BQQT09>

Meeting ID: 847 1426 3080  
Passcode: 316945

*The order of agenda items listed above are approximate and intended as a guideline for the Town Council. Individuals with disabilities needing auxiliary aid(s) may request assistance by contacting the Town Clerk, 50 S. Beech Street PO Box 351, Hudson, CO 80642 (303) 536-9311, [clerk@hudsoncolorado.org](mailto:clerk@hudsoncolorado.org) at least 24 hours in advance.*



# APPLICATION FOR TOWN COUNCIL

Town Charter Article III,  
Article IV

PO Box 351  
50 S Beech Street  
Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

Application for:  Mayor  Council Position

Full Name: Debra Renee Tygett

Address: 253 Birch St Hudson CO 80642

Phone: 303-880-8166 Email: debra tygett@hotmail.com

Occupation: Barber Employer: Self-employed

Qualifications for Town Council Position:

1. U.S. Citizen
2. At least 18 years of age
3. Resident of Hudson at least 12 consecutive months
4. Registered elector
5. Must maintain residence throughout the term of the appointment

Length of Residency: 2 years 10 months

Please list any specialize business skill of education:

Cosmetology School, and Barber school. works well under pressure, Great communication and listening skills

Please list any civic activities:

Help organized benefits, rescuing animals donating, working at 2 County jails

Are you familiar with any ordinances of master plans relating to the particular board or commission for which you are applying?

Yes  No

Are you related to any employee, appointed or elected official of the Town of Hudson Government?

Yes  No

If yes, please list name and position of relative(s):

Applicant's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete.

Signature: [Signature] Date: 2-8-2022

<b>FOR OFFICE USE ONLY</b>	
Date Received:	<u>2/9/22</u>
Staff Initials:	<u>HM</u>
Approved:	<u>HM</u>
Date:	<u>2/10/22</u>
Notes:	_____
<small>Paid to the Town of Hudson 303-536-9311</small>	

FEB 09 2022

50 S. Beech St. PO Box 351  
Hudson, Co 80642



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Town Charter Article III,  
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50 S Beech Street  
Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

Application for:  Mayor  Council Position

Full Name: Stuart E Ashmore

Address: 85 Ash St PO Box 327

Phone: 303-720-5761

Email: huskers5842@gmail.com

Occupation: Agency Perfomance M

Employer: Harvest Strategy Group, Inc

**Qualifications for Town Council Position:**

1. U.S. Citizen
2. At least 18 years of age
3. Resident of Hudson at least 12 consecutive months
4. Registered elector
5. Must maintain residence throughout the term of the appointment

Length of Residency: 10 years 6 months

**Please list any specialize business skill of education:**

Over 30 years of experience in customer service and debt recovery.

I manage collection agencies and Lawfirms across the US

**Please list any civic activities:**

\_\_\_\_\_  
\_\_\_\_\_

**Are you familiar with any ordinances of master plans relating to the particular board or commission for which you are applying?**

Yes  No

**Are you related to any employee, appointed or elected official of the Town of Hudson Government?**

Yes  No

If yes, please list name and position of relative(s):

\_\_\_\_\_

Applicant's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete

Signature:  Date: 1/31/2022

**FOR OFFICE USE ONLY**

Date Received: 2/9/22

Staff Initials: HIM

Approved: HIM

Date: 2/10/22

Notes: \_\_\_\_\_

\_\_\_\_\_



# APPLICATION FOR TOWN COUNCIL

Town Charter Article III,  
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50 S Beech Street  
Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

Application for:  Mayor  Council Position

Full Name: LeighAnn Winslow

Address: 22 Birch St.

Phone: 720-891-7871 Email: Hockeygirl46@aol.com

Occupation: Stay at Home Mom Employer: \_\_\_\_\_

Qualifications for Town Council Position:

1. U.S. Citizen
2. At least 18 years of age
3. Resident of Hudson at least 12 consecutive months
4. Registered elector
5. Must maintain residence throughout the term of the appointment

Length of Residency: 5 years 7 months

Please list any specialize business skill of education:

I've worked as a ParaEducator w/ the school districts  
as a Health aid and Special Education

Please list any civic activities:

@ Jury duty and responsible voter

Are you familiar with any ordinances of master plans relating to the particular board or commission for which you are applying?

Yes  No

Are you related to any employee, appointed or elected official of the Town of Hudson Government?

Yes  No

If yes, please list name and position of relative(s):  
\_\_\_\_\_

Applicant's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete.

Signature: [Signature] Date: 02/16/2022

<b>FOR OFFICE USE ONLY</b>	
Date Received:	<u>2/16/22</u>
Staff Initials:	<u>HM</u>
Approved:	<u>HM</u>
Date:	<u>2/16/22</u>
Notes:	_____
	_____



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50 S Beech Street  
Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

Application for:  Mayor  Council Position

Full Name: SHANNON NORGREN

Address: 210 Elm St. / PO Box 264 Hudson 80642

Phone: 303-435-8822 Email: Shudrocker@AOL.com

Occupation: Homemaker Employer: \_\_\_\_\_

Qualifications for Town Council Position:

1. U.S. Citizen
2. At least 18 years of age
3. Resident of Hudson at least 12 consecutive months
4. Registered elector
5. Must maintain residence throughout the term of the appointment

Length of Residency: 20 years \_\_\_\_\_ months

Please list any specialize business skill of education:

\_\_\_\_\_  
\_\_\_\_\_

Please list any civic activities:

SCHOOL PROGRAMS FOR COLEMAN  
\_\_\_\_\_

Are you familiar with any ordinances of master plans relating to the particular board or commission for which you are applying?

Yes  No

Are you related to any employee, appointed or elected official of the Town of Hudson Government?

Yes  No

If yes, please list name and position of relative(s):

\_\_\_\_\_

Applicant's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete.

Signature: Shannon Norgren Date: 2-16-22

<b>FOR OFFICE USE ONLY</b>	
Date Received:	<u>2/16/22</u>
Staff Initials:	<u>HM</u>
Approved:	<u>HM</u>
Date:	<u>2/16/22</u>
Notes:	_____
	_____



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Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

Application for:  Mayor  Council Position

Full Name: Laurie Kuntz

Address: 110 Dahlia Street

Phone: 720.314.6998

Email: lauriekuntz.hc@gmail.com

Occupation: Human Resources

Employer: Town of Keenesburg

**Qualifications for Town Council Position:**

1. U.S. Citizen
2. At least 18 years of age
3. Resident of Hudson at least 12 consecutive months
4. Registered elector
5. Must maintain residence throughout the term of the appointment

Length of Residency: 6 years 6 months

**Please list any specialize business skill of education:**

MBA, in business and HR, ran offices and companies, budgets, sit on the Naitonal Board of Directors for the American Legion Auxiliary and Board of Directors for Columbine Credit Union

**Please list any civic activities:**

Active member with American Legion Auxiliary at state and national level

**Are you familiar with any ordinances of master plans relating to the particular board or commission for which you are applying?**

Yes  No

**Are you related to any employee, appointed or elected official of the Town of Hudson Government?**

Yes  No

If yes, please list name and position of relative(s):

Applicant's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete.

Signature: *Laurie Kuntz* Date: 2/11/22

**FOR OFFICE USE ONLY**

Date Received: 2/11/22  
Staff Initials: HK

Approved: *HK*  
Date: 2/11/22

Notes: \_\_\_\_\_