

NJDA
New Jersey Dental Association

November 4, 2003

TO: COMPONENT SECRETARIES

FROM: ROBERT A SHEKITKA, D.M.D.
SECRETARY

RE: **NOMINATIONS FOR STATE TRUSTEE &
ALTERNATE TRUSTEE**

Please indicate your component's nomination for State Trustee and Alternate Trustee to serve on the NJDA Board of Trustees for 2004-2005. The term of office will begin with the Reorganization Meeting of the Board on June 11, 2004.

Please **return** this letter to: Phyllis Cortazzo at the Association Office **on or before MARCH 12, 2004**, indicating your component's choice for these two important positions.

Thank you.


COMPONENT SOCIETY: Middlesex

TRUSTEE Richard Kahn
(Name)

76 Livingston Ave. New Brunswick 08901 732-828-6622
(Address) (Zip) (Phone)

ALTERNATE TRUSTEE: Nancy Villa
(Name)

2455 Route 516 old bridge NJ 08857
(Address) (Zip) (Phone)

Signature of Component Secretary: 

/pfc

cc: Component Presidents
Component President-Elect's
Component Executive Secretaries

NOMINATIONS TO STATE ASSOCIATION COUNCILS
2004-2005

GOVERNMENTAL AFFAIRS COUNCIL: (usually meets on Thursday)

Delbert Daniel Krantz DE 11022
(Name) (License #)

7 Cedar Grove Lane, Tall Pine Center Site 33, Somerset NJ 08873
(Address) (Zip)

Telephone: _____

MEMBERSHIP COUNCIL: (usually meets on Thursday)

Scott Belkin 20774
(Name) (License #)

711 Ambury Ave. Woodbridge, NJ 07095
(Address) (Zip)

Telephone: 732-750-2600

PEER REVIEW COUNCIL: (usually meets on Wednesday morning)

John Fahrbender 11256
(Name) (License #)

101 Union Ave. Middlerex, NJ 08846
(Address) (Zip)

Telephone: 732-356-1313

Generally, the component representative to NJDA's Council on Peer Review acts as chairman of your local peer review committee. Therefore, new appointments to this position should have peer review experience and have attended at least one peer review training workshop.

NJDA
New Jersey Dental Association

November 4, 2003

TO: COMPONENT SECRETARIES

FROM: ROBERT A. SHEKITKA, D.M.D.
SECRETARY

RE: **NOMINATIONS FOR ADA DELEGATE &
ALTERNATE DELEGATE**

Please indicate your component's nomination for ADA DELEGATE AND ADA ALTERNATE DELEGATE for 2004-2005. The term of office will begin with the Reorganization Meeting of the Board on June 11, 2004.

Please return this letter to: Phyllis Cortazzo at the Association Office on or before MARCH 12, 2004, indicating your component's choice for these two important positions.

This is referenced in the Bylaws Article VII. Sec.120.L. and Article X. Sec.10.

Thank you.

COMPONENT SOCIETY: Middlesex

ADA DELEGATE: Joel Leizer

A-2 Cordwall Dr. E. Brunswick, NJ 08816 732-254-7733
(Address) (Zip) (Phone)

ADA ALTERNATE DELEGATE: Peter Clemente

121 Mellars Ln. Piscataway, N.J. 08854 732-985-1666
(Address) (Zip) (Phone)

Signature of Component Secretary: 

/pfc

cc: Component Presidents
Component President-Elect's
Component Executive Secretaries

NOMINATIONS TO STATE ASSOCIATION COUNCILS

2004-2005

Middlesex

(Component Society)

ANNUAL SESSION COUNCIL: (usually meets on Monday)

Araceli E. Ziemba 16994
(Name) (License #)
1626 Rt. 130, Lions Plaza No. Brunswick, NJ 08902
(Address) (Zip)
Telephone: 732-297-2565

DENTAL BENEFIT PROGRAMS COUNCIL: (meets on Wednesday during the day)

MAR VITALE 14141
(Name) (License #)
69 St. Hwy 27 Edison NJ 08820
(Address) (Zip)
Telephone: 732-494-7575

DENTAL EDUCATION COUNCIL: (usually meets on Monday, Tuesday, or Thursday)

Robert Ashman Jr. 19914
(Name) (License #)
1254 St. Hwy 27 North Brunswick 08902
(Address) (Zip)
Telephone: 732-846-6366

NOMINATIONS TO STATE ASSOCIATION COUNCILS
2004-2005

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RELIEF COUNCIL: (usually meets on Wednesday)

Ethan Glickman 09925
(Name) (License #)

515 Ravitan Ave. Highland Park NJ. 08504
(Address) (Zip)

Telephone: 732-572-4244

NOTE: THE ABOVE COUNCIL APPOINTMENTS ARE ON A YEARLY BASIS.

JUDICIAL COUNCIL: Please note this Council is handled in a separate memo to Component Secretaries, since the term of office is three years.

/pfc

The Component Secretary of Bergen, Central and Middlesex for Class I (expiring June 2004) can remind its representative to the Judicial Council of his/her term of office and his willingness to serve a 2nd term of three years. **The Component Secretary of Passaic** can remind its representative that he can serve for an additional term of three years as he is completing an open term which ends in 2004. This new class (Class I) will expire in June of 2007.

Component Secretaries of CLASS II (expiring 2005) and CLASS III (expiring 2006) are requested to remind their representatives to the Judicial Council of their terms of office and obtain their willingness to continue to serve. **If a change** in representative is necessary, please indicate below who your representative will be. **If the representative listed is willing to serve, please also indicate this information on this sheet.**

Please return this sheet by **March 12, 2004** to Mrs. Cortazzo at the Association Office.

Thank you for your help and cooperation.

COMPONENT REPRESENTATIVE

Atlantic-Cape May _____

Bergen _____

Central _____

Essex _____

Hudson _____

Mercer _____

Middlesex Joseph Fertig


Monmouth-Ocean _____

Passaic _____

Southern _____

Tri-County _____

Union _____


(Sig. of Component Secretary)

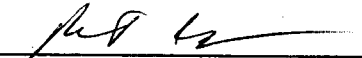
- cc: Component Presidents (informational only)
- Component Pres.-Elect's (informational only)
- Component Executive Secretaries (w/attachment)

Due Date: **MARCH 12, 2004**

CERTIFICATION
DELEGATES & ALTERNATE DELEGATES TO THE NJDA HOUSE

FOR Middlesex COMPONENT SOCIETY

This is to certify that the members of this Component Society shown on the attached list(s), have been selected as Delegates or Alternate Delegates for the House meeting on June 11, 2004, and will serve at all House meetings up to the House meeting held in June 2005.

Signature of Component Secretary: 

INSTRUCTIONS

- 1) List names of Delegates and Alternate Delegates in **alphabetical** order on the attached sheets.
- 2) **Indicate "CHAIRPERSON"** by the name of the person designated as **Chair of your Delegation**. This will eliminate a follow-up letter to you.
- 3) **Return information before March 12, 2004** to: Phyllis Cortazzo, NJDA, One Dental Plaza, PO Box 6020, No. Brunswick, NJ 08902-6020.

NUMBER OF DELEGATES

(Based on Oct. 31, 2003 figures of Active (includes Disabled), Active Life, Recent Graduates and Pending Members)

	<u>MEMBERS</u>	<u>DELEGATES</u>
Atlantic-Cape May	130	7
Bergen	718	19
Central	237	9
Essex	454	14
Hudson	211	9
Mercer	275	10
Middlesex	429	13
Monmouth-Ocean	586	16
Passaic	222	9
Southern	597	16
Student		1
Tri-County	491	14
Union	253	10

Note: All Component delegates remain the same except Bergen, Essex and Union. These 3 components have gained one delegate.

Att. Delegates & Alt. Delegates Lists

DELEGATES TO THE HOUSE OF DELEGATES

Please return this form by: **3/12/04**

Page 1.

Middlesex

(Component Society)

PLEASE INDICATE WHO IS **CHAIRPERSON** OF YOUR DELEGATION.

PLEASE ALSO LIST ALL NAMES IN **ALPHABETICAL ORDER**.

- * Cavan Bransden DI 12832
(NAME) (License #)
2455 Route 576 Old Bridge 08857
(Address) (City) (Zip)
- * James Carey DI 18587
(NAME) (License #)
2186 Hwy #27 North Brunswick 08902
(Address) (City) (Zip)
- * Peter DeSicco DI 15245
(NAME) (License #)
283 High St Perth Amboy 08861
(Address) (City) (Zip)
- * Bruce Huberman DI 16321
(NAME) (License #)
619 Amboy Ave Edison 08837
(Address) (City) (Zip)
- * Richard Kahn DI 12236
(NAME) (License #)
76 Livingston Ave New Brunswick 08901
(Address) (City) (Zip)
- * Ross Kline DI 17648
(NAME) (License #)
E-7 Briar Hill Ct East Brunswick 08816
(Address) (City) (Zip)

PLEASE LIST ALL NAMES IN ALPHABETICAL ORDER: AND INDICATE WHO IS CHAIRPERSON.

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DELEGATES (cont'd.)

* Daniel Krantz DI 11022

(NAME) (License #)
7 Cedar Grove Lane Tall Pine Center Suite 33 Somerset 08873

(Address) (City) (Zip)

* Joel Leizer DI 08659

(NAME) (License #)
A-2 Cornwall Drive East Brunswick 08816

(Address) (City) (Zip)

* George McLaughlin DI 10581

(NAME) (License #)
330 Livingston Ave New Brunswick 08901

(Address) (City) (Zip)

* Arnold Rosenheck DI 08288

(NAME) (License #)
UMDNJ-NJDS 110 Bergen St New 07103

(Address) (City) (Zip)

* Robert Silverstein DI 17464

(NAME) (License #)
636 Easton Avenue Somerset 08873

(Address) (City) (Zip)

* Nancy Villa DI 17027

(NAME) (License #)
2455 Route 516 Old Bridge 08857

(Address) (City) (Zip)

* Mitch Weiner (Chair) DI 17406

(NAME) (License #)
3084 Route 27 Kendall Park 08824

(Address) (City) (Zip)

ALTERNATE DELEGATES**Please return this form with your Delegates List by 3/12/04**

*	<u>Robert Ashmen</u>		<u>DI 19914</u>
	(NAME)		(License #)
	<u>1254 Hwy 27</u>	<u>North Brunswick</u>	<u>08902</u>
	(Address)	(City)	(Zip)
*	<u>Peter Clemente</u>		<u>DI 08969</u>
	(NAME)		(License #)
	<u>121 Mellows Way</u>	<u>Piscataway</u>	<u>08854</u>
	(Address)	(City)	(Zip)
*	<u>Phil Engel</u>		<u>DI 14511</u>
	(NAME)		(License #)
	<u>109 Livingston Ave</u>	<u>New Brunswick</u>	<u>08901</u>
	(Address)	(City)	(Zip)
*	<u>Joe Fertig</u>		<u>DI 08632</u>
	(NAME)		(License #)
	<u>2208 US Hwy #1</u>	<u>North Brunswick</u>	<u>08902</u>
	(Address)	(City)	(Zip)
*	<u>Ethaz Glickman</u>		<u>DI 09925</u>
	(NAME)		(License #)
	<u>515 Parvian Ave</u>	<u>Highland Park</u>	<u>08904</u>
	(Address)	(City)	(Zip)
*	<u>Steven Lawson</u>		<u>DI 18238</u>
	(NAME)		(License #)
	<u>34-36 Progress St. Twin Plaza Suite A-3</u>	<u>Edison</u>	<u>08820</u>
	(Address)	(City)	(Zip)
*	<u>Joe Perlmutter</u>		<u>DI 12092</u>
	(NAME)		(License #)
	<u>1254 Hwy #27</u>	<u>North Brunswick</u>	<u>08902</u>
	(Address)	(City)	(Zip)

ALTERNATE DELEGATES (cont'd.)

- * Maya Babhu DI 17888
 (NAME) (License #)
76 Livingston Ave New Brunswick 08901
 (Address) (City) (Zip)
- * Era Rosen DI ~~17888~~ 14588
 (NAME) (License #)
2186 Hwy #27 #2B North Brunswick 08902
 (Address) (City) (Zip)
- * Mark Schambra DI 17565
 (NAME) (License #)
1254 Hwy 27 North Brunswick 08902
 (Address) (City) (Zip)
- * Constantine Simas DI 21508
 (NAME) (License #)
109 Livingston Ave New Brunswick 08901
 (Address) (City) (Zip)
- * Mark Vitale DI 14141
 (NAME) (License #)
69 St Hwy #27 Edison 08820
 (Address) (City) (Zip)
- * Araceli Zamba DI 16994
 (NAME) (License #)
1626 Route 130, Lions Plaza North Brunswick 08902
 (Address) (City) (Zip)
- * _____
 (NAME) (License #)

 (Address) (City) (Zip)

There has to be an easier way with your new computer system...