

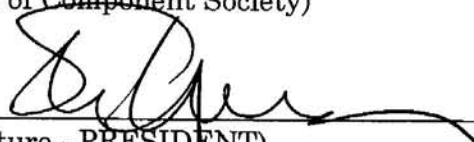
OFFICIAL FORM

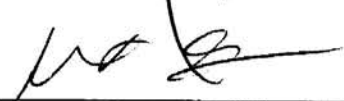
NEW JERSEY DENTAL ASSOCIATION  
COMPONENT SOCIETY NOMINATIONS  
TO  
STATE ASSOCIATION COUNCILS

The nominees submitted have the approval of:

*M. J. Hesse*

-----  
(Name of Component Society)

  
\_\_\_\_\_  
(Signature - PRESIDENT)

  
\_\_\_\_\_  
(Signature - PRESIDENT-ELECT OR  
VICE PRESIDENT)

  
\_\_\_\_\_  
(Signature - STATE ASSOCIATION TRUSTEE)

  
\_\_\_\_\_  
(Signature - COMPONENT SECRETARY)

**THIS PAGE MUST BE SIGNED BY ALL DESIGNATED OFFICERS IN ORDER TO BE  
VALID AS PRESCRIBED IN THE BYLAWS, ARTICLE VII., SECTION 20.**

***PLEASE RETURN ON OR BEFORE MARCH 10, 2006 TO:***

Mrs. Phyllis Cortazzo  
New Jersey Dental Association  
One Dental Plaza, PO Box 6020  
North Brunswick, NJ 08902-6020

/pfc  
Att. Council Nominations form

NOMINATIONS TO STATE ASSOCIATION COUNCILS

2006-2007

Middlesex

(Component Society)

ANNUAL SESSION COUNCIL: (usually meets on Monday)

Araceli Ziemba

(Name)

1626 Hwy 130 N. Brunswick

(Address)

08902

(Zip)

Telephone: 732-297-0588

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

Mark Vitale

(Name)

69 Rt 27 Edison

(Address)

08820

(Zip)

Telephone: 732-494-7575

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

Robert Ashman

(Name)

1254 Rt 27 North Brunswick

(Address)

08902

(Zip)

Telephone: 732-846-6366

NOMINATIONS TO STATE ASSOCIATION COUNCILS  
2006-2007

GOVERNMENTAL AFFAIRS COUNCIL: (usually meets on Thursday)

Mitchell Weiner

(Name)

3084 Rt 27 Landell Plk 08824

(Address)

(Zip)

Telephone: 732-297-4900

MEMBERSHIP COUNCIL: (usually meets on Thursday)

Scott Galkin

(Name)

711 Amboy Ave Woodbridge 07095

(Address)

(Zip)

Telephone: 732-750-2600

PEER REVIEW COUNCIL: (usually meets on Wednesday morning)

John Fehsbecker

(Name)

101 Union Ave Middlesex 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.

NOMINATIONS TO STATE ASSOCIATION COUNCILS  
2006-2007

Page 3.

RELIEF COUNCIL: (usually meets on Wednesday)

Ethan Glickman

(Name)

515 Keriden Ave Highland Park 28904

(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



November 4, 2005

TO: COMPONENT SECRETARIES

FROM: DANIEL B. KRANTZ, D.D.S.  
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 2006-2007. The term of office will begin with the Reorganization Meeting of the Board on June 9, 2006.

Please **return** this letter to: Phyllis Cortazzo at the Association Office **on or before MARCH 10, 2006**, indicating your component's choice for these two important positions.

Thank you.

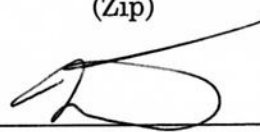
COMPONENT SOCIETY: M. J. DeSera

TRUSTEE Richard Kohn  
(Name)

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

ALTERNATE TRUSTEE: Nancy Villa  
(Name)

2455 City Ave 516 Old Bridge 08857 732-679-2323  
(Address) (Zip) (Phone)

Signature of Component Secretary: 

/pfc


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

Due Date: **MARCH 10, 2006**

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 9, 2006, and will serve at all House meetings up to the House meeting held in June 2007.

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 10, 2006 to: Phyllis Cortazzo, NJDA, One Dental Plaza, PO Box 6020, No. Brunswick, NJ 08902-6020.

NUMBER OF DELEGATES

(Based on Oct. 31, 2005 figures of Active (includes Disabled), Active Life, Recent Graduates and Pending Members)

	<u>MEMBERS</u>	<u>DELEGATES</u>
Atlantic-Cape May	126	7
Bergen	715	19
Central	236	9
Essex	435	13
Hudson	200	7
Mercer	270	10
Middlesex	454	14
Monmouth-Ocean	602	17
Passaic	226	9
Southern	614	17
Student		1
Tri-County	486	14
Union	245	9

Note: All Component delegates remain the same except Hudson, Middlesex, Monmouth-Ocean and Union. The Union County Dental Society lost one delegate and Hudson County Dental Society lost two delegates. Both Middlesex County Dental Society and Monmouth-Ocean Dental Society gained one delegate.

Att. Delegates & Alt. Delegates Lists





DELEGATES (cont'd.)

\* Joel Leizer  
-----  
(NAME)

-----  
(ADDRESS) (City) (Zip)

\* George McLoughlin  
-----  
(NAME)

330 Livingston Ave New Brunswick 08901  
-----  
(Address) (City) (Zip)

\* Arnold Rosenheck  
-----  
(NAME)

110 Bergen St Newark 07013  
-----  
(Address) (City) (Zip)

\* Robert Silberstein  
-----  
(NAME)

636 Easton Ave Somerset 08873  
-----  
(Address) (City) (Zip)

\* Nancy Ulla  
-----  
(NAME)

2455 5th Ave S16 Old Bridge 08857  
-----  
(Address) (City) (Zip)

\* Mark Vitale  
-----  
(NAME)

69 Rt 27 Edison 08820  
-----  
(Address) (City) (Zip)

\* Scott Galkin  
-----  
(NAME)

711 Amboy Ave Woodbury 07095  
-----  
(Address) (City) (Zip)

DELEGATES (cont'd.)

\* Robert Ashmen

(NAME)

1254 W 27

North Brunswick

08902

(Address)

(City)

(Zip)

\* Miya Prabhu

(NAME)

76 Livingston Ave

New Brunswick

08901

(Address)

(City)

(Zip)

\* \_\_\_\_\_

(NAME)

(Address)

(City)

(Zip)

\* \_\_\_\_\_

(NAME)

(Address)

(City)

(Zip)

\* \_\_\_\_\_

(NAME)

(Address)

(City)

(Zip)

\* \_\_\_\_\_

(NAME)

(Address)

(City)

(Zip)

\* \_\_\_\_\_

(NAME)

(Address)

(City)

(Zip)

ALTERNATE DELEGATESPlease return this form with your Delegates List by 3/10/06

*	Joseph Ferdy		
	(NAME)		
	2208 Mt 130	N. Brunswick	08902
	(Address)	(City)	(Zip)
*	Ethan Glukman		
	(NAME)		
	515 Renda Ave	Highland Pl	08904
	(Address)	(City)	(Zip)
*	Wael Ibrahim		
	(NAME)		
	11 McGinnis St	E. Brunswick	08916
	(Address)	(City)	(Zip)
*	Ira Rosen		
	(NAME)		
	2186 Mt 27	North Brunswick	08902
	(Address)	(City)	(Zip)
*	Mark Schembera		
	(NAME)		
	1254 Mt 27	North Brunswick	08902
	(Address)	(City)	(Zip)
*	Constance Simus		
	(NAME)		
	109 Livingston Ave	New Brunswick	08901
	(Address)	(City)	(Zip)
*	Jason Wasserman		
	(NAME)		
	12 Cornwell Ct	E. Brunswick	08916
	(Address)	(City)	(Zip)

