



November 4, 2013

TO: COMPONENT SECRETARIES

FROM: MARK VITALE, DMD
SECRETARY

RE: CERTIFICATION OF DELEGATES AND ALTERNATE
DELEGATES TO THE 2014 NJDA HOUSE OF DELEGATES

Attached are Certification Sheets for Delegates and Alternate Delegates.
Please list your Delegates and Alternate Delegates in alphabetical order.

This information must be received from Component Secretaries at the Association Office, no later than **March 21, 2014**, which is 90 (ninety) dates prior to the Annual Session House of Delegates meeting, in order to comply with NJDA Bylaws.

Thank you for returning this information **on, or before March 21, 2014.**

/pfc

Att. Certification Sheet and blank sheets to list Delegates
and Alternate Delegates

cc: Component Presidents (Att. Cert. Sheet for information only)
Component President-Elect's (Att. Cert. Sheet for information only)
Component Executive Secretaries with all attachments.

PLEASE NOTE THAT DELEGATES SELECTED WILL BE SEATED AT THE HOUSE MEETING ON JUNE 29, 2014 AND SERVE AT ALL HOUSE MEETINGS HELD UP TO THE HOUSE MEETING IN JUNE 2015.

Due Date: **MARCH 21, 2014**

CERTIFICATION
DELEGATES & ALTERNATE DELEGATES TO THE NJDA HOUSE

FOR Middlesex County 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 29, 2014, and will serve at all House meetings up to the House meeting held in June 2015.

Signature of Component Secretary: Deborah Medici

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 21, 2014** to: Phyllis Cortazzo, NJDA, One Dental Plaza, PO Box 6020, No. Brunswick, NJ 08902-6020.

NUMBER OF DELEGATES

(Based on Oct. 31, 2013 figures of Active (includes Disabled), Active Life, Recent Graduates and Pending Members)

	<u>MEMBERS</u>	<u>DELEGATES</u>
Atlantic-Cape May	119	7
Bergen	707	19
Central	218	9
Essex	402	13
Hudson	198	8
Mercer	279	10
Middlesex	479	14
Monmouth-Ocean	610	17
Passaic	231	9
Southern	560	16
Student	-	1
Tri-County	485	14
Union	248	9

Note: Most component societies gained members this year with the exception of Atlantic-Cape May, Central, Southern and Tri-County. However, component delegate representation remains the same for most components with the exception of Bergen and Essex. They each gained one delegate.

Att. Delegates & Alt. Delegates Lists



November 4, 2013

TO: COMPONENT SECRETARIES
FROM: MARK VITALE, DMD 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 2014-2015. The term of office will begin with the Reorganization Meeting of the Board on June 29, 2014.

Please return this letter to: Phyllis Cortazzo at the Association Office on or before MARCH 21, 2014, indicating your component's choice for these two important positions.

Thank you.

COMPONENT SOCIETY: Middlesex County Dental Society

TRUSTEE Dr. Mitchell Weiner (Name)

3084 State Route 27, Suite 2 Kendall Park, NJ 08824 (Address) (Zip) (Phone) 732-297-4400

ALTERNATE TRUSTEE: Dr. Maya Prabhu

76 Livingston Ave., New Brunswick NJ 08901 (Address) (Zip) (Phone)

Signature of Component Secretary: [Handwritten Signature]

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



November 4, 2013

TO: COMPONENT SECRETARIES
FROM: MARK VITALE, 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 2014-2015. The term of office will begin with the Reorganization Meeting of the Board on June 29, 2014.

Please return this letter to: Phyllis Cortazzo at the Association Office on or before MARCH 21, 2014, 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 County Dental Society

ADA DELEGATE: Dr. Daniel Krantz

7 Cedar Grove Lane Somerset NJ 08873 732-469-8083
(Address) (Zip) (Phone)

ADA ALTERNATE DELEGATE: Dr. Richard Kahn

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

Signature of Component Secretary: [Handwritten Signature]

/pfc

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

The Component Secretary of Atlantic-Cape May, Essex, Southern and Union for Class I (expiring June 2014) can remind its representative that he/she may serve for an additional three year term after completing three years of his first term. The component representative may serve two 3 year terms if he/she chooses. **Both Southern & Union need to appoint a new representative as both Drs. Etter & Woinsky have served two terms.** This new class (Class I) will expire in June of 2017.

Component Secretaries of CLASS II (expiring 2015) and CLASS III (expiring 2016) 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 21, 2014** 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	_____ <i>Dr. Mark Schambra</i> _____
Monmouth-Ocean	_____
Passaic	_____
Southern	_____
Tri-County	_____
Union	_____

DeWayne Moore
(Sig. of Component Secretary)

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

DELEGATES TO THE HOUSE OF DELEGATES

Please return this form by: **3/21/14**

Page 1.

Middlesex County
(Component Society)

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

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

* Dr. Alyssa Bernstein
(NAME)

560 St. Georges Ave. Rahway 07065
(Address) (City) (Zip)

* Dr. Cavan M. Brunson
(NAME)

2455 Highway 516 Old Bridge 08857
(Address) (City) (Zip)

* Dr. Nainesh Desai
(NAME)

6-2 Cornwall Dr. East Brunswick 08816
(Address) (City) (Zip)

* Dr. Genevieve Fernandes
(NAME)

573 Cranbury Rd., Suite A-1 East Brunswick 08816
(Address) (City) (Zip)

* Dr. Richard Kahn
(NAME)

76 Livingston Ave. New Brunswick 07095
(Address) (City) (Zip)

* Dr. Dewang Modi
(NAME)

25 Clyde Rd. Suite 102 Somerset 08873
(Address) (City) (Zip)

Chairperson
→

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

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DELEGATES (cont'd.)

* Dr. Maya Prabhu

(NAME)

76 Livingston Ave. New Brunswick NJ 08901

(ADDRESS)

(City)

(Zip)

* Dr. Arnold H. Rosenheck

(NAME)

Rutgers Dental School 110 Bergen St. Newark NJ 07103

(Address)

(City)

(Zip)

* Dr. Sanjeev Satwah

(NAME)

3086 Route 27, Suite 12 Kendall Park NJ 08824

(Address)

(City)

(Zip)

* Dr. David Stein

(NAME)

177 Main St. East Brunswick NJ 08816

(Address)

(City)

(Zip)

* Dr. Nancy Villa

(NAME)

2455 Highway 516 Old Bridge NJ 08857

(Address)

(City)

(Zip)

* Dr. Mark Vitale

(NAME)

69 State Highway 27 Edison NJ 08820

(Address)

(City)

(Zip)

Dr. Amit Vora

(NAME)

98 James St. Suite 306 Edison NJ 08820

(Address)

(City)

(Zip)

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

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DELEGATES (cont'd.)

* Dr. Mitchell Weiner

(NAME)
3084 State Route 27 Suite 2 Kendall Park NJ 08824

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

* -----
(NAME)

(Address) (City) (Zip)

PLEASE LIST ALL NAMES IN ALPHABETICAL ORDER.

Page 1.

ALTERNATE DELEGATES

Please return this form with your Delegates List by 3/21/14

*Dr. Bob Ashman

(NAME)

1254 State Route 27

(Address)

North Brunswick

(City)

08902

(Zip)

*Dr. Scott Galkin

(NAME)

711 Amboy Ave. Woodbridge

(Address)

NJ

(City)

07095

(Zip)

*Dr. Ethan Glickman

(NAME)

519 Raritan Ave.

(Address)

Highland Park

(City)

NJ

(Zip)

08904

*Dr. Sandy Goldstein

(NAME)

1107 Convery Blvd.

(Address)

Perth Amboy

(City)

08861

(Zip)

*Dr. Maha Kaga

(NAME)

225 Demott Lane 2nd floor Suite 5

(Address)

Somerset

(City)

08873

(Zip)

*Dr. Daniel Krantz

(NAME)

7 Cedar Grove Lane Suite 33

(Address)

Somerset

(City)

08873

(Zip)

*Dr. Joel Leizer

(NAME)

A-2 Cornwall Ct. East Brunswick

(Address)

(City)

08816

(Zip)

ALTERNATE DELEGATES (cont'd.)

* Dr. Nima Mir Madjlessi

(NAME)

E-7 Brier Hill Ct.	East Brunswick	08816
(Address)	(City)	(Zip)

* Dr. Ira Rosen

(NAME)

2186 State Route 27	North Brunswick	08902
(Address)	(City)	(Zip)

* Dr. Mark Schambra

(NAME)

1254 State Route 27	North Brunswick	08902
(Address)	(City)	(Zip)

* Dr. Robert Silverstein

(NAME)

32 Worlds Fair Dr. Suite 101	Somerset	08873
(Address)	(City)	(Zip)

* Dr. Constantine Simos

(NAME)

109 Livingston Ave.	New Brunswick	08901
(Address)	(City)	(Zip)

* Dr. Antoinette Tank

(NAME)

2050 State Route 27	North Brunswick	08902
(Address)	(City)	(Zip)

* Dr. Aracelli E. Ziemba

(NAME)

1626 US Highway 130	North Brunswick	08902
(Address)	(City)	(Zip)