



State of New Jersey Local Government Services

Year: **Municipal User Friendly Budget**

MUNICIPALITY:

Municode: **Filename:** 1603_fbi_2017.xlsm

Website:

Phone Number:

Mailing Address:

[Email the UFB if not using Outlook](#)

Municipality: **State:** **Zip:**

Mayor

First Name	Middle Name	Last Name	Term Expires	Business Email
DOMENICK		STAMPONE	12/31/2018	

Chief Administrative Officer

<input type="text" value="ALLAN"/>	<input type="text" value="SUSEN"/>	<input type="text" value="asusen@haledonboronj.com"/>
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Chief Financial Officer

<input type="text" value="MARY ANN"/>	<input type="text" value="BRINDISI"/>	<input type="text" value="mbrindisi@haledonboronj.com"/>
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Municipal Clerk

<input type="text" value="ALLAN"/>	<input type="text" value="SUSEN"/>	<input type="text" value="asusen@haledonboronj.com"/>
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Registered Municipal Accountant

<input type="text" value="CHUCK FERRAIOLI"/>	<input type="text" value="ferraioli@optonline.net"/>
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Governing Body Members

First Name	Middle Name	Last Name	Term Expires	Business Email
MOUNIR		ALMAITA	12/31/2019	
TAHSINA		AHMED	12/31/2017	
CURIEL		NEREYDA	12/31/2019	
MICHAEL		JOHNSON	12/31/2017	
REYNALDO		MARTINEZ	12/31/2018	
ISLAM		SERY	12/31/2018	

