



State of New Jersey Local Government Services

Year: **Municipal User Friendly Budget**

MUNICIPALITY:

Municode: **Filename:**

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
Jordan		Schlump	12/31/2018	jschlump@woolwichtwp.org

Chief Administrative Officer

Jane		DiBella		jdibella@woolwichtwp.org
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Chief Financial Officer

William		Pine		wpine@woolwichtwp.org
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Municipal Clerk

Jane		DiBella		jdibella@woolwichtwp.org
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Registered Municipal Accountant

Michael		Holt		mholt@hfacpas.com
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Governing Body Members

First Name	Middle Name	Last Name	Term Expires	Business Email
John		Carleton	12/31/2018	jcarleton@woolwichtwp.org
Daniel		Battisti	12/31/2019	dbattisti@woolwichtwp.org
Vernon		Marino	12/31/2020	vmarino@woolwichtwp.org
Gina	Marie	Santore	12/31/2020	gsantore@woolwichtwp.org

