



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
Stephen		Lance	12/31/2020	slance@blairstowntp-nj.com

Chief Administrative Officer

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Chief Financial Officer

Christine		Rolef		cfo@blairstowntp-nj.com
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Municipal Clerk

Linda		Leidner		clerk@blairstowntp-nj.com
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Registered Municipal Accountant

William		Schroeder		
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Governing Body Members

First Name	Middle Name	Last Name	Term Expires	Business Email
Paul		Avery	12/31/2018	pavery@blairstowntp-nj.com
Cynthia		Dalton	12/31/2018	cdalton@blairstowntp-nj.com
Joanne		VanValkenburg	12/31/2019	jvalkenburg@blairstowntp-nj.com
Debbie		Waldron	12/31/2020	dwaldron@blairstowntp-nj.com

