



**New Jersey State  
Association of Chiefs  
of Police**

751 Route 73 North, Suite 12  
Marlton, NJ 08053  
Phone: 856-334-8943  
Fax: 856-334-8947  
Web: [www.njsacop.org](http://www.njsacop.org)  
Email: [njsacop@njsacop.org](mailto:njsacop@njsacop.org)

**President**  
Kevin Sauter  
Chief of Police  
Colts Neck Police Department

**Immediate Past President**  
Paul Cell  
Chief of Police  
Montclair State University  
Police Department

**First Vice President**  
Christopher Wagner  
Chief of Police  
Denville Police Department

**Second Vice President**  
William Parenti  
Chief of Police  
North Plainfield Police  
Department

**Third Vice President**  
Gary Gubbei  
Chief of Police  
Maple Shade Police Department

**Fourth Vice President**  
Richard Buzby  
Chief of Police  
Little Egg Harbor Police Department

**Vice President at Large**  
Lawrence Roberts  
Chief of Police  
Franklin Township Police Department

**Treasurer**  
Brett Matheis  
Chief of Police  
Clinton Police Department

**Parliamentarian**  
Anton Danco  
Chief of Police (Ret.)  
Clark Police Department

**Sergeant-at-Arms  
Northern Region**  
Joseph Madden  
Chief of Police  
Park Ridge Police Department

**Sergeant-at-Arms  
Central Region**  
Sebastian Donaruma  
Chief of Police  
Readington Police Department

**Sergeant-at-Arms  
Southern Region**  
Louis Bordi  
Chief of Police  
Voorhees Police Department

**Executive Director**  
Mitchell C. Sklar, Esq., CAE

**NOTICE OF INTENTION TO  
BE A CANDIDATE FOR NJSACOP OFFICE**

Mitchell C. Sklar  
Executive Director  
New Jersey State Association of  
Chiefs of Police  
751 Route 73 North, Suite 12  
Marlton, NJ 08053

I hereby declare that I meet the requirements of eligibility for serving on the Board of Officers of the New Jersey State Association of Chiefs of Police as set forth in Article III, Section 11, of the NJSACOP Constitution. I further declare my intention to actively campaign for said office and seek nomination at the May monthly State Chiefs Briefing prior to the 2015 annual NJSACOP Training Conference.

Name: \_\_\_\_\_

Rank/Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date \_\_\_\_\_

Candidate for office of: \_\_\_\_\_

Signature: \_\_\_\_\_