

**WILLIAM S. OSBORNE, D.C.
3501 BELAIR ROAD
BALTIMORE, MARYLAND 21213**

October 20, 2010

Kay B. O'Hara, D.C.
Board President
Maryland Board of Chiropractic Examiners
4201 Patterson Avenue
Baltimore, MD 21215

Dear Ms. O'Hara and Members of the Board:

Please be advised that I have decided to surrender my license to provide chiropractic care in the State of Maryland pursuant to License Number S01213. I understand that I may not practice chiropractic on any patient as defined in the Maryland Chiropractic Practice Act (the "Act"), Md. Health Occ. Code Ann. ("H.O.") §§ 3-101 *et seq.* (2009 Repl. Vol.). In other words, as of the effective date of this Letter of Surrender, I understand that the surrender of my license means that I am in the same position as an **unlicensed individual**.

I understand that this Letter of Surrender is a PUBLIC DOCUMENT.

My decision to surrender my license to provide any form of chiropractic care or treatment in Maryland, is based upon both an investigation and charges that have been brought against me by the Maryland State Board of Chiropractic Examiners, ("the Board"). The investigation pertains to my physical competence to practice chiropractic care. The Charges are based upon my unauthorized practice of chiropractic, from September 1, 2009 – October 20, 2009, following my failure to renew my license on September 1, 2009, as a result of an outstanding tax delinquency with the State of Maryland. The pertinent provisions of the Act under § 3-501 provide as follows:

§ 3-501 (a) Practicing without license

Except as otherwise provided in § 3-404 of this title, a person may not practice, attempt to practice, or offer to practice chiropractic in this State unless licensed by the Board.

I have decided to surrender my license to provide chiropractic care in order to avoid further proceedings by the Board against my license. By virtue of this Letter of Surrender, I waive any right to contest the Charges. I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender to avoid prosecution and further investigation by the Maryland State Board of Chiropractic Examiners. I understand that by executing this Letter of Surrender I am waiving any right to contest these issues in a formal evidentiary hearing and am waiving all other substantive and procedural protections provided by law, including the right to appeal. I make this decision after the opportunity to consult with my attorney.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have had the opportunity to consult with my attorney before signing this Letter of Surrender. I understand both the nature of the Board's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Letter of Surrender. I acknowledge that I am fully **competent** to make this decision and I make this decision knowingly and voluntarily.

Sincerely,

William S. Osborne, D.C.

OCT 20 2010

William S. Osborne, D.C.

NOTARY

STATE OF MARYLAND
CITY/COUNTY OF

Baltimore

OCT 20 2010

I HEREBY CERTIFY that on this 20th day of October, 2010, before me, a Notary Public of the City/County aforesaid, personally appeared William S. Osborne, D.C., and declared and affirmed under the penalties of perjury that the signing of this Letter of Surrender was his voluntary act and deed.

AS WITNESS my hand and Notarial seal.

[Signature]
Notary Public



My commission expires: ~~My Commission Expires~~
April 1, 2011

ACCEPTANCE

On behalf of the Maryland Board of Chiropractic Examiners, it is this 27th day of OCTOBER, 2010_ that, I accept this PUBLIC LETTER OF SURRENDER of William S. Osborne's s license to provide chiropractic services in the State of Maryland.

Kay B. O'Hara, D.C.
Kay B. O'Hara, D.C.
Board President