

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH**

Re: Kevin Riley
License No.: 002251

Petition No. 2011-64

VOLUNTARY SURRENDER

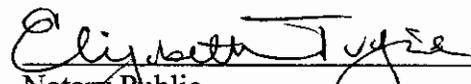
Kevin Riley being duly sworn, deposes and says:

1. I am over the age of majority and understand the obligations of an oath.
2. I make this affidavit on the basis of personal knowledge.
3. I am licensed by the Department of Public Health (hereinafter "the Department") to practice as an embalmer. I presently hold license number 002251.
4. I hereby voluntarily surrender my license to practice as an embalmer in the State of Connecticut.
5. I understand and agree that if I seek a new license or to reinstate my license at any time in the future, the allegations contained in Petition Number 2011-64 shall be deemed true. I further understand that any such application must be made to the Department which shall have absolute discretion as to whether said license shall issued or reinstated and, if so, whether said license shall be subject to conditions.
6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request.
7. I understand and agree that this affidavit and the case file in Petition Number 2011-64 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.
8. I understand that this surrender of my license is an event that is reportable to the National Practitioner Data Bank and is public information
9. I understand that this document has no effect unless and until it is executed by the Department; and that, upon execution, the Department will dismiss Petition No 2011-64.
10. I understand that the execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

11. I understand that the purpose of this agreement is to resolve the pending matter against my license and is not intended to affect any claim of civil liability or defense thereto.
12. I understand that I have the right to consult with an attorney prior to signing this affidavit.
13. If applicable, I agree to comply with the provisions of Section 19a-14-44 of the Regulations of Connecticut State Agencies.


Kevin Riley

Subscribed and sworn to before me this 9th day of February 2011.


Notary Public
Commissioner of Superior Court
My Commission Expires April 30 2013

Accepted: 
Jennifer Filippone
Section Chief
Practitioner Licensing and Investigation Section

2/15/11
Date