## COMMONWEALTH OF MASSACHUSETTS

|   | COMMON WENTERING OF WINDSHORDER IS   |
|---|--|
| Midd  | lesex, ss Board of Registration in Medicine  |
|   | Adjudicatory No. 2014-029  |
| JOHN  | Matter of  N VON-WEISS, M.D.  tration No. 27658  |
|   | RESIGNATION  |
| I, Joh  | n Von-Weiss, M.D., being duly sworn, depose and state:   |
| 1.  | I desire to resign my license to practice medicine in the Commonwealth of Massachusetts pursuant to the terms of 243 CMR 1.05(5)(a).   |
| 2.  | My resignation is tendered voluntarily.  |
| 3.  | I realize that this resignation is a final act that deprives me of all privileges of registration and is not subject to reconsideration or judicial review.                        |
| 4.  | I am not currently licensed to practice medicine in any other state and will make no attempt to seek licensure elsewhere.  |
| 5.  | I understand that my resignation is a disciplinary action that is reportable to any national data-reporting agency, pursuant to G.L. c. 112, §2.                                   |
| Signed under the penalties of perjury this day of |  |
|   |  |
|   | John Von-Weiss, M.D.   |
| _   | Then personally appeared before me the above-named, John Von-Weiss, M.D. who dethe foregoing resignation in my presence and acknowledged said resignation to be his free ded deed. |
| Dated   | Hely 8 2014 Harikelm Gilkaule Notary Public  |

My Commission Expires:

HÁRIKLIA GJIKURIA
NOTARY PUBLIC
COMMONWEALTH OF MASSACHUSETTS
MY COMMISSION EXPIRES 07/11/2014