COMMONWEALTH OF MASSACHUSETTS

| Middlesex, ss | | Board of Registration in Medicine | | |
|-----------------|---|-----------------------------------|------------------------------|---|
| | | | Adjudicato | ry No. 2024-048 |
| In the | Matter of | | | |
| | ARD A. KAUFF, M.D. cration No. 50973 |) | | |
| | | RESIGN | <u>ATION</u> | |
| I, RIC | HARD A. KAUFF, M.D., | being duly swor | n, depose and | state: |
| 1. | I desire to resign my license to practice medicine and/or my inchoate right to renew said license 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. | | | |
| Signe | ed under the penalties of pe | rjury this | day of <u>U</u> | <u>19</u> , 2024. |
| | | | RICHARI | Lal A Waff DA. KAUFF, M.D. |
| signe act ar | Then personally appeared the foregoing resignation and deed. | d before me the in my presence | above-named, and acknowle | , M.D. who dged said resignation to be his free |
| Date | d: | | tary Public Commission | Expires: |
| he | AA: Kelli | Porge | + - | 8/7/24 |