

COMMONWEALTH OF MASSACHUSETTS

Middlesex, ss.

Board of Registration in Medicine

Adjudicatory Case No. 2019-010

_____)
 In the Matter of)
)
 Domenic A. Ciraulo)
 Registration No. 41153)
 _____)

RESIGNATION

I, Domenic A. Ciraulo, being duly sworn, depose and state:


1. I desire to resign my inchoate right to renew 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 5th day of February, 2019.

 Domenic A. Ciraulo
 by his Power of Attorney,
 Jon A. Ciraulo

Then personally appeared before me the above-named Jon A. Ciraulo acting as Power of Attorney for Domenic Ciraulo who signed the foregoing resignation in my presence and acknowledged said resignation to be his free act and deed.

Dated: 2.5.19


 Notary Public Stephen J. Lawler
 My Commission Expires: April 9, 2021

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, the undersigned:

DOMENIC A. CIRAULO (hereinafter referred to as the "Principal"), of
EAST FALMOUTH, MASSACHUSETTS 02536
IN THE COUNTY OF BARNSTABLE

HEREBY CONSTITUTE AND APPOINT:

JON A. CIRAULO, my son, presently of
BARNSTABLE, MASSACHUSETTS 02630
IN THE COUNTY OF BARNSTABLE

to be my true and lawful attorney-in-fact (hereinafter referred to as "attorney-in-fact" or "attorney"), acting in my name and for my benefit.

- 1. GRANT OF POWER.** To exercise or perform any act, power, duty, right or obligation that I now have or may hereinafter acquire in connection with, arising from, or, relating to any person, matter, item, transaction relating to or in regard with the adjudicatory matter pending before the Board of Registration in Medicine (License No. 41153). This grant of power includes a grant of full power and authority to do everything necessary in exercising any of the powers herein granted.
- 2. POWER TO EXECUTE RESIGNATION.** I hereby grant full power and authority to execute on my behalf and thereafter tender to the Board of Registration in Medicine a notice of resignation.

IN WITNESS WHEREOF, I have executed this Power of Attorney and I hereby direct that photocopies of the power shall have the same force and effect as an original.

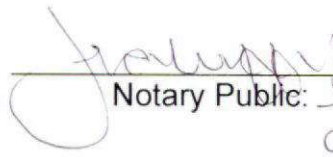


Domenic A. Ciraulo, Principal

Dated: February 1, 2019

COMMONWEALTH OF MASSACHUSETTS

On this 1st day of February, 2019, before me, the undersigned notary public, personally appeared the said Principal, Domenic A. Ciraulo, proved to me by satisfactory evidence of identification, which was a Massachusetts Driver's License No. S79674C106, to be the person whose name is signed on this document, and acknowledged to me that he signed it voluntarily for its stated purpose.



Notary Public: Jessica L. Duffy
02/12/2025