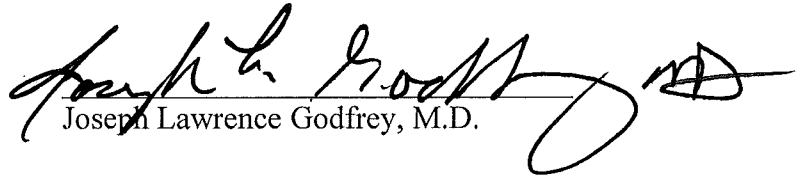


Consent and Waiver

I, Joseph Lawrence Godfrey, M.D., would like to resolve this matter without the need for more formal proceedings and consent to the Board's issuance of this public letter of concern in resolution of this matter.

Further, I agree to take an onsite comprehensive review of pediatric psychiatric diagnoses and treatment, including ADHD, of at least fifteen (15) hours of a Category I continuing medical education course. I shall contact the Board's Office of the Medical Director to get their advance approval for the CME Course and I shall complete the CME Course within six (6) months from the effective date of this public letter of concern.

Consented to this the 19th day of May, 2015.


Joseph Lawrence Godfrey, M.D.

State of NC

County of: Rowan

I, Shannon Aysta Isaac, a Notary Public for the above named County and State, do hereby certify that Joseph Lawrence Godfrey, M.D. personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal
this the 19 day of May, 2015.


Notary Public



My Commission expires: Aug 21, 2018