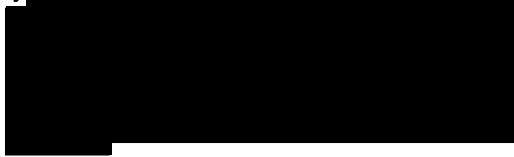


Raymond Jackson, Pharm.D.# 29245-016



November 25, 2008

Donald Taylor, P.D., Chair, and members of
the Board of Pharmacy
4201 Patterson Avenue
Baltimore, Maryland 21215

Re: Surrender of Pharmacist License
Number: 10050

Dear Mr. Taylor and Members of the Board:

Please be advised that I have decided to surrender my license to practice pharmacy in the State of Maryland, License Number 10050. I understand that I may not give pharmacy advice or counseling to any individual, with or without supervision and/or compensation, cannot dispense medications or otherwise engage in the practice of pharmacy as it is defined in the Pharmacy Practice Act (the "Act"), Md. Health Occ. ("H.O.") Code Ann. § 12-101, *et seq.*, (2005 Repl. Vol. and 2007 Supp.). In other words, as of the date of this letter, the effective date of this surrender, I understand that the surrender of my license means that I am in the same position as an unlicensed individual.

I understand that this Letter of Surrender is a **PUBLIC** document.

My decision to surrender my license to practice pharmacy in Maryland has been prompted by an investigation of my licensure by the Board.

The Board's investigation resulted in the issuance of a Notice of Intent to Revoke my license based upon the following:

1. On June 12, 2007, I entered into a plea offer with the United States Attorney's Office for the District of Columbia, whereby I agreed to waive Indictment and to plead guilty to a one-count information charging me with a violation of Title 18, United States Code, Section 669 (theft or embezzlement in connection with health care) based on a "Statement of the Offense." The Statement was filed on December 10, 2007.

2. On January 9, 2008, I pled guilty to theft or embezzlement in connection with health care for an offense that was committed on or about July 1, 2003 through on or about October 24, 2006. On May 18, 2008, I was sentenced to 24 months

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imprisonment, and, upon release, am to be on supervised probation for three years.

As a result, via a Notice of Intent to Revoke, the Board charged me with the commission of prohibited acts under H.O. § 12-313 of the Act as follows:

- (b) In general. - Subject to the hearing provisions of § 12-315 of this subtitle, the Board, on the affirmative vote of a majority of its members then serving, may . . . reprimand any licensee, place any licensee on probation, or suspend or revoke a license of a pharmacist if the . . . licensee:
- (22) Is convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside [;].

I affirm that I was served with a copy of the Notice of Intent to Revoke and have otherwise been advised on the Board's actions through communications with representatives of the Office of the Attorney General and my legal counsel.

I have decided to surrender my license to practice pharmacy in Maryland to avoid further prosecution of the aforementioned charges. The basis for the charges against me include the findings of the investigations described above, and by virtue of this Letter of Surrender, I waive any right to contest those charges and findings. I wish to make it clear that I have voluntarily, knowingly and freely chosen to submit this Letter of Surrender. **I understand that by executing this Letter of Surrender, I am waiving any right to contest these findings in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and to all other substantive and procedural protections provided by law, including the right to appeal.**

I understand that the Board will advise any National Practitioners Data Bank of this Letter of Surrender, and in any response to inquiry, that I have surrendered my license in lieu of disciplinary action under the Act as resolution of the matters pending against me. I also understand that in the event I would apply for licensure in any form in any other state or jurisdiction, that this Letter of Surrender, and all underlying documents, may be released or published by the Board to the same extent as a final order that would result from disciplinary action pursuant to Md. State Gov't Code Ann; §10-611, et seq., (2004 Repl. Vol. and 2007 Supp.).

I further recognize and agree that, by agreeing to this Letter of Surrender, my license will remain surrendered until such time as I apply for reinstatement and comply with the terms and conditions set forth in this Letter and those determined by the Case Resolution Conference panel and/or the Board subsequent to my application for

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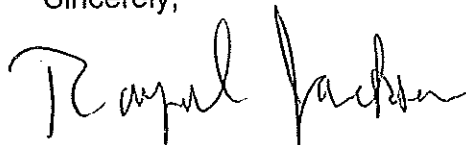
reinstatement. In the event that I apply for reinstatement of my Maryland license or for the issuance of a new Maryland pharmacist license, I understand that the Board may set terms and conditions that shall apply to my receiving a reinstated pharmacist's license or a new Maryland pharmacist license. I also understand that if I apply for reinstatement or for a new Maryland pharmacist license that I bear the burden of demonstrating to the Board that I am competent to practice pharmacy and possess good moral character, as specified in Md. Health Occ. Code Ann. § 12-302, and meet any requirements in effect at that time for reinstatement. I understand that, if I determine that if I would like once again to practice pharmacy in Maryland, I will approach the Board in the same posture as one whose license has been revoked on the above charges.

I understand that, if I petition the Board for reinstatement of my license, the Board will review my case and determine my fitness to have my license reinstated. I understand that the Board can deny such application based solely on the allegations contained in the Notice of Intent to Revoke, dated August 28, 2008, and/or any findings of the (criminal action) investigation by the Board. I understand that the Board will only consider my petition for reinstatement five years from the effective date herein, if I have first met the following conditions:

That I will neither work in a pharmacy, in any manner, nor apply for registration as a Pharmacy Technician during the time that my license is surrendered. Furthermore, that I must present an affidavit with my Petition for Reinstatement or new licensure that I have not practiced pharmacy, as a pharmacist or pharmacy technician, or worked in any capacity in a dispensing pharmacy.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have consulted with an attorney before signing this Letter of Surrender. I understand both the nature of the Board's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Sincerely,

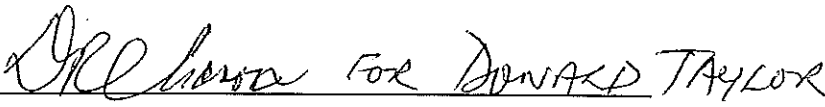
A handwritten signature in cursive script that reads "Raymond Jackson".

Raymond Jackson, Pharm.D.

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ACCEPTANCE

ON BEHALF OF THE BOARD OF PHARMACY, on this 25th day of
November, 2008, I accept Raymond Jackson's public Letter of Surrender
of his license to practice pharmacy in the State of Maryland.


Donald Taylor, P.D. Chair
Board of Pharmacy

cc: LaVerne Naesea, Executive Director
Board of Pharmacy

Roberta Gill, Assistant Attorney General
Administrative Prosecutor

Linda Bethman, Assistant Attorney General
Board Counsel

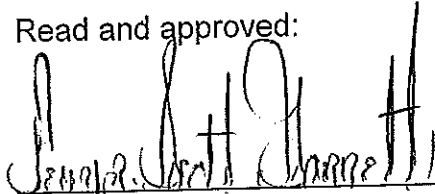
Timothy J. Paulus, Deputy Counsel

Dorcas A. Taylor, Pharm.D., J.D., Compliance Officer

Lewyn Garrett, Esquire
Attorney for Respondent

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Read and approved:



Lewyn Garrett, Esquire
Attorney for Raymond Jackson, Pharm.D.

NOTARY

STATE OF West Virginia
CITY/COUNTY OF Preston

I HEREBY CERTIFY that on this 6th day of October 2008,
before me, Tammy R. Titchenell, a Notary Public of the State and City/Country
(Print Name)
~~Raymond Jackson~~, and declared and affirmed under
aforesaid, personally appeared Raymond Jackson, and declared and affirmed under
the penalties of perjury that signing the foregoing letter of surrender was his
voluntary act and deed.

AS WITNESS my hand and notarial seal.



Notary Public

My Commission expires 7/16/2017

