

**Before the
New Hampshire Board of Mental Health Practice
Concord, New Hampshire 03301**

In the Matter of:
William Spidaliere
LCMHC License #141

Docket No. 21-ENF-Spidaliere-792

**VOLUNTARY SURRENDER OF
LICENSE**

Recognizing that professional misconduct allegations are now pending against me before the New Hampshire Board of Mental Health Practice (“Board”), I, William Spidaliere, LCMHC, hereby voluntarily surrender my New Hampshire license (#141) effective on the date that the Board accepts this offer of voluntary surrender.

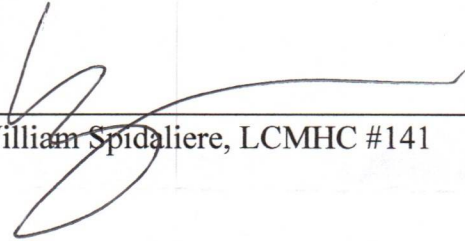
By voluntarily surrendering my license, I understand that:

1. I relinquish all rights and privileges to practice as a Licensed Clinical Mental Health Counselor in the State of New Hampshire effective upon the Board’s acceptance of this voluntary surrender.
2. I acknowledge that this voluntary surrender of license has occurred in settlement of pending misconduct allegations in violation of RSA 330-A:27, II(c) as outlined in a complaint received by the Board on July 20, 2021.
3. I admit to no violations of RSA 330-A:27 but recognize that the fact of my voluntary surrender will be distributed by the Board in the same manner as a final disciplinary action.

4. I understand that this voluntary surrender shall become a permanent part of my file, and will be maintained by the Board as a public document.
5. Should I again seek licensure in the State of New Hampshire, I must meet and shall bear the burden of proving compliance with all of the standards and prerequisites then required by the Board for new applicants, including professional character requirements.
6. I understand that the pending misconduct allegations shall be resolved in any future licensure application I may submit in New Hampshire, and that I shall bear the burden of proof. I hereby specifically waive any statute of limitations or laches defense which might then be available as to these misconduct allegations, including, but not limited to, those contained in RSA 332-G:8 and 9.
7. I voluntarily submit this surrender of license to the Board and state that no promises or representations have been made to me other than those terms and conditions expressly stated herein.

[Signatures follow on next page]

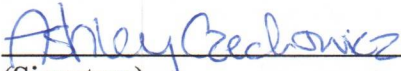
IN WITNESS WHEREOF, I hereby affix my signature on this 4TH day of NOVEMBER, 2021.

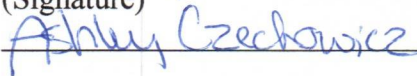


William Spidaliere, LCMHC #141

ACCEPTED BY THE BOARD OF MENTAL HEALTH PRACTICE on this 19th day of November, 2021.

Date: 11/19/2021



(Signature)


Board Administrator of the
NH Board of Mental Health Practice