



STATE OF MAINE  
BOARD OF NURSING  
158 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0158

ANGUS S. KING, JR.  
GOVERNOR

MYRA A. BROADWAY, J.D., M.S., R.N.  
EXECUTIVE DIRECTOR

September 17, 1999

Richard C. Spieldenner  
P.O. Box 283  
Albion, ME 04910

Dear Mr. Spieldenner:


NOTICE OF LICENSURE REVOCATION

**VIA CERTIFIED MAIL**

The Department of Human Services, Division of Support Enforcement and Recovery, has filed a Certificate of Noncompliance with a Support Order against your nursing license. The Maine State Board of Nursing hereby notifies you that, pursuant to 19-A M.R.S.A. Section 2201(6), your nursing license is hereby revoked because you have been certified by the Department of Human Services as a support obligor who is not in compliance with a court order of support. The Board's revocation is deemed a final determination pursuant to 5 M.R.S.A. Section 10002. The Board may consider renewal or reissuance of your nursing license upon receipt of written confirmation of your compliance with the order of compliance issued by the Department of Human Services, Division of Support Enforcement and Recovery.

Please return your nursing license to this agency in the enclosed, self-addressed envelope within 7 days of receipt of this certified notice. Practice of nursing by you after receipt of this notice is punishable as a Class E crime, pursuant to 32 M.R.S.A. Section 2106(5) and (6). The State may bring an action in Superior Court to enjoin a person from unlicensed practice, regardless of whether criminal proceedings have been or may be instituted.

This notice is issued by authority of 19-A M.R.S.A. Section 2201(7) and the Maine Child Support Enforcement Manual, Chapter 21(7).

  
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MYRA A BROADWAY, J.D., M.S., R.N.  
Executive Director  
Maine State Board of Nursing

pc: Kevin W. Concannon, Commissioner,  
Maine Department of Human Services  
Gerald Lindsay, Maine Department of Human Services  
Members, Maine State Board of Nursing  
John H. Richards, Assistant Attorney General



USE RECYCLED PAPER

OFFICES LOCATED AT: 24 STONE ST., AUGUSTA, ME  
PHONE: (207) 287-1133

TDD: (207) 287-1151

FAX: (207) 287-1149

State of Maine  
Department of Human Services (DHS)  
Division of Support Enforcement and Recovery

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CERTIFICATION TO REVOKE LICENSE(S)

To: Myra Broadway  
Executive Director  
Board of Nursing  
158 State House Station  
Augusta, Maine 04333

From: Sarah Keith  
Enforcement Agent  
219 Capitol St.  
Augusta, Maine 04333

624-8020

Re: Richard D. Spieldenner  
P.O. Box 283  
Albion, Maine  
04910

DHS Case ID: 31546160P  
License No: 19993  
SSN: [REDACTED] 6380  
D/O/B: 1/3/46

The person named above has been verified by DHS as an obligor who has not met the terms of a legal Child Support Order. You must:

Revoke the following License(s) issued to the person named above:

Registered Nurse License #19993  
\_\_\_\_\_  
\_\_\_\_\_

Suspend the person's motor vehicle operator's license(s), right to drive a motor vehicle or right to obtain a motor vehicle license.

If you have any questions, contact the person from DHS listed above.

Dated: 8/18/99 Signed: Kevin W. Concannon  
Kevin W. Concannon  
Title: Commissioner

This notice is issued by authority of 19-A M.R.S.A. Sections 2201(6), (13) and/or 2202 (7) and is a final determination under 5 M.R.S.A. Section 10002.