

STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

Testimony in OPPOSITION to HB 2709
RELATING TO MEDICAL MARIJUANA

REPRESENTATIVE DELLA AU BELATTI, CHAIR
REPRESENT COMMITTEE ON HEALTH

REPRESENTATIVE KARL RHOADS, CHAIR
REPRESENT COMMITTEE ON JUDICIARY

Hearing Date: February 12, 2016

Room Number: 329

1 **Fiscal Implications:** To implement the provisions of this measure, additional funds of
2 approximately \$100,000 will be needed for medical marijuana registration systems development,
3 testing and deployment, and possibly for one additional clerical staff. The Department of Health
4 (DOH) respectfully defers to the Governor's Executive Budget for the DOH's appropriations and
5 personnel priorities.

6 **Department Testimony:** The Department of Health (DOH) opposes HB 2709. This measure
7 requires the DOH to issue a temporary registration certificate to patients upon receipt of their
8 written certification form and payment, which is valid for 45 days or until the department issues
9 or denies the permanent registry certificate. The intention is to reduce the wait time for patients
10 to be able to use medical marijuana.

11 Currently, the DOH sends medical marijuana registration cards directly to patients within
12 three to five days of receipt of a complete online application and payment. Use of a temporary
13 registration certificate, presumably generated electronically after the patient and physician
14 submit information, would not permit law enforcement's online verification of patient, care
15 giver, or grow site. It would not permit the tagging of plants using the patient registration
16 number and expiration date as required in administrative rules. As this temporary registration
17 cannot be electronically verified, it can be easily duplicated, altered, or used illegally by non-

1 registered patients. This will potentially create friction between patients and law enforcement
2 and not protect legitimate patients. Similarly, dispensaries will not be able to electronically
3 verify patients with temporary certificates or be able to track and stop purchase when the four
4 ounce per month purchase limit for any patient has been reached. In addition, it is not clear how
5 the Department would be able to stop the use of a temporary registration certificate if a patient's
6 application is denied.

7 Temporary certification will require the DOH to essentially maintain two registry
8 systems at the same time with the additional one for temporary certificates. This will require
9 significant changes to the electronic registration system and major software development, as well
10 as testing and training by a contractor, which will necessitate additional funding and staffing.
11 This process will ultimately lead to extended delays in processing and issuing registration cards
12 that will penalize all patients.

13 Importantly, this bill could unintentionally force the DOH into a position of authorizing
14 activity that is illegal under both State and Federal law.

15 Thank you for the opportunity to testify.

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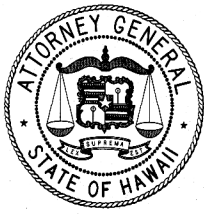
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TESTIMONY OF THE DEPARTMENT OF THE ATTORNEY GENERAL TWENTY-EIGHTH LEGISLATURE, 2016

ON THE FOLLOWING MEASURE:

H.B. NO. 2709, RELATING TO MEDICAL MARIJUANA.

BEFORE THE:

HOUSE COMMITTEES ON HEALTH AND ON JUDICIARY

DATE: Friday, February 12, 2016

TIME: 9:30 a.m.

LOCATION: State Capitol, Room 329

TESTIFIER(S): Douglas S. Chin, Attorney General, or
Jill T. Nagamine, Deputy Attorney General

Chairs Belatti and Rhoads and Members of the Committees:

The Department of the Attorney General opposes this bill.

This bill would amend the medical use of marijuana registration requirements in section 329-123, Hawaii Revised Statutes (HRS), to require the Department of Health (DOH) to issue a temporary registration certificate to allow the use and possession of marijuana by a person who applies for a medical use of marijuana registration, provides a written certification from a physician, and pays any applicable registration fees. It bypasses the current requirement where the DOH determines whether a person is indeed a qualifying patient before issuing a registration card. The temporary registration certificate created by this bill would be considered valid for up to forty-five days, even in situations where the person may not actually qualify as a patient. There is no requirement that temporary registration certificates be returned to the DOH if the DOH subsequently determines the temporary registration certificate is invalid because the person is not a qualifying patient, and there are no means for the DOH to prevent the use of invalid temporary registration certificates.

This bill does not address the process that is needed to determine if the patient is qualified. The current process involves evaluating the supporting documents¹ submitted in the application. Without an opportunity to evaluate the application and its supporting documents, there is no way for the DOH to determine if a patient qualifies for the medical use of marijuana.

¹ Supporting documents include the patient's valid identification, a caregiver certification and caregiver identification, if applicable, a grow site verification for either the patient or the caregiver, a completed physician's statement certifying the patient for the medical use of marijuana, and a signed agreement by the physician on file with the DOH that allows the physician to use the electronic application process.

To force the DOH to approve the use of marijuana for someone who may not qualify is tantamount to forcing the DOH to enable marijuana use by unqualified applicants and risk federal scrutiny.

Because marijuana is a Schedule I controlled substance and illegal to produce, possess, sell, or use according to the federal government, federal guidelines mandate that a state regulatory system be consistent with federal law enforcement priorities. The U.S. Department of Justice (DOJ) issued its Memorandum for All United States Attorneys dated August 29, 2013 (the Cole Memo), providing guidance regarding marijuana enforcement. The DOJ has confirmed that it will enforce the Controlled Substances Act consistent with Congress' determination that marijuana is a dangerous drug. Notwithstanding this, the Cole Memo sets forth the DOJ's expectation that states that have enacted laws that authorize marijuana-related conduct must implement strong and effective regulatory and enforcement systems to address threats to public safety, public health, and other law enforcement interests. The DOJ enforcement priorities include prevention of state-authorized marijuana activity from being used as a cover or pretext for illegal activity. The regulatory scheme of the current law is designed to accomplish that, but as stated in the Cole Memo, "[i]f state enforcement efforts are not sufficiently robust to protect against the harms set forth above, the federal government may seek to challenge the regulatory structure itself in addition to continuing to bring individual enforcement actions, including criminal prosecutions, focused on these harms." We believe that the DOH's screening requirements to determine if a patient qualifies for the medical use of marijuana must be unambiguous and consistent with the priorities set forth in the Cole Memo. Allowing a person who has not been determined qualified to nonetheless possess and use marijuana under a nearly automatic state approval process for a temporary registration certificate is not consistent with a robust enforcement scheme.

If it is an urgent health concern to provide a means for some patients with debilitating medical conditions to be able to legally possess and use marijuana within a short time after being advised by their physician that the potential benefits of the medical use of marijuana would likely outweigh the health risks for that particular patient, we suggest it would be preferable to provide a means for the DOH to expedite its evaluation of appropriate cases. Otherwise, the

State may appear to undermine the law enforcement priorities of the United States Department of Justice.

We respectfully request that this bill be held.



ON THE FOLLOWING MEASURE:

H.B. NO. 2709, RELATING TO MEDICAL MARIJUANA

BEFORE THE:

HOUSE COMMITTEES ON HEALTH AND ON JUDICIARY

DATE: Friday, February 12, 2016

TIME: 9:30 a.m.

LOCATION: State Capitol, Conference Room 329

TESTIFIER(S): Antoinette Lilley, President, or Christopher Garth, Executive Director

Honorable Chairs Belatti and Rhoads and Members of the Committees:

The Hawai'i Dispensary Alliance submits the following testimony in **SUPPORT of H.B. 2709 RELATING TO MEDICAL MARIJUANA**, requiring the Department of Health to issue a receipt that shall serve as a temporary registration certificate for the medical use of marijuana upon receipt of a written certification form completed by or on behalf of a qualifying patient. Increases penalty for fraudulent misrepresentation to a law enforcement official relating to the issuance of a written certificate by a physician.

Your Committees may recall that the comments of the Hawai'i Dispensary Alliance were solicited on this matter at an Informational Briefing before the Joint Committees on Health, on December 28, 2016. The Alliance provided brief comments that addressed the transfer of the State of Hawai'i's medical marijuana program from the Department of Public Safety (DPS) to the Department of Health (DoH). The former program, under the direction of the Department of Public Safety, registered and qualifying patients were provided a temporary registration certificate for the use of medical marijuana by the department. The transition of this program, from one department to the next, removed a critical component of compassionate care to new patients attempting to register with the MMJ program.

The Hawai'i Dispensary Alliance stands in strong agreement with the tone and intent of the language provided to return this right to patients who may not have any other means of living out their final days in a pain free manner. Additionally, an individual suffering from minor or excruciating pain should be granted immediate access to pain relief after receiving the appropriate certifications. Anecdotally, the delay in accessing or purchasing medicine to treat pain or other ailments is not contingent upon filing and processing of additional paperwork by any state department. An individual can seek relief immediately after receiving a prescription and simply walking into or driving through a pharmacy. These realities should be afforded in the same compassionate manner to those who seek relief through MMJ products.

The Hawai'i Dispensary Alliance stands in **SUPPORT of H.B. 2709 RELATING TO MEDICAL MARIJUANA**, requiring the Department of Health to issue a receipt that shall serve as a temporary registration certificate for the medical use of marijuana upon receipt of a written certification form completed by or on behalf of a qualifying patient. Increases penalty for fraudulent misrepresentation to a

law enforcement official relating to the issuance of a written certificate by a physician, and recommends that it be moved forward for further discussion.

Thank you very much for the opportunity to provide testimony on this measure.



Dedicated to safe, responsible, humane and effective drug policies since 1993

TO: House Committees on Health and Judiciary
FROM: Carl Bergquist, Executive Director
HEARING DATE: 12 February 2016, 9:30AM
RE: HB2709, Relating to medical marijuana, **STRONG SUPPORT**

Dear Chairs Belatti and Rhoads, Vice Chairs Creagan and San Buenaventura, Members:

The Drug Policy Forum of Hawai'i (DPFHI) **strongly supports** this measure to ensure that the thousands of medical marijuana patients of Hawai'i have access to their medicine without undue delay. As the state gears up for the launch of the dispensary system created by Act 241, the Department of Health (DOH) is expecting significant growth in the number of registered patients. In addition, Act 241 added post-traumatic stress disorder (PTSD) to the list of qualifying conditions, and the Legislature is considering others during the current session. Accordingly, to offset any current or future backlogs it is prudent to allow the receipts sent out by DOH to serve as temporary registration certificates. In addition, for those patients and physicians who have disability waivers regarding use of the electronic application system, these temporary certificates can help during lengthier processing of their paper applications.

While the current wait time for a new patient to receive their medical marijuana registry card is reportedly down to a week or less, and the renewals for current patients is less than that, it is well documented that until recently that wait was much longer. Indeed, we are familiar with many cases of up to two-three month delays for patients who, to the best of their knowledge, had all their ducks in a row. There may be a whole host of good reasons for such delays, from understaffing to errors on applications, but there is no reason whatsoever to delay the eligibility to use a life-improving medicine. The 45 days limit on the validity of a temporary certificate based on a DOH receipt, and the substantial fine of \$2,500 for fraudulent representation regarding such a certificate appropriately combine to safeguard against abuse and to act as a deterrent. However, we would respectfully suggest amending the attendant language in HRS 329-128 (b) to read "knowingly fraudulent representation".

Mahalo for the opportunity to testify.

From: mailinglist@capitol.hawaii.gov
Sent: Thursday, February 11, 2016 6:25 AM
To: HLTtestimony
Cc: milesw@hawaii.edu
Subject: *Submitted testimony for HB2709 on Feb 12, 2016 09:30AM*

HB2709

Submitted on: 2/11/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Miles W. Tuttle	Kush Bottles Hawaii	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 10, 2016 5:12 PM
To: HLTtestimony
Cc: andreatischler@yahoo.com
Subject: Submitted testimony for HB2709 on Feb 12, 2016 09:30AM

HB2709

Submitted on: 2/10/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Andrea Tischler	Americans for Safe Access Big Island Chapter	Support	No

Comments: Big Island Chapter of Americans for Safe Access support this bill. It will give a greater sense of safety and peace of mind to patients that they might believe they are out of compliance if their certification card does not arrive on time.

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PO Box 83, Honolulu, HI 96810 ~ (808) 853-3231

Hawaii's Voice for Sensible, Compassionate, and Just Drug Policy

TO: HOUSE COMMITTEES ON HEALTH & JUDICIARY

FROM: PAMELA LICHTY, M.P.H., PRESIDENT

DATE: FEBRUARY 12, 2016, 9:30 a.m., ROOM 329

RE: H.B. 2709 RELATING TO MEDICAL MARIJUANA – **IN SUPPORT**

Good morning, Chairs Belatti, Chair Rhoads; Vice Chairs Creagan and San Buenaventura, and members of the Committees. My name is Pam Lichty and I'm President of the Drug Policy Action Group (DPAG), the government affairs arm of the Drug Policy Forum of Hawaii.

DPAG is in strong support of this measure which addresses a concern, expressed by many patients - whether new or existing. The first two paragraphs of this measure explain the dilemma well. While it is true that at present the wait time for receipt of a new card is reported to be about two weeks, this is not a static situation. As the number of applicants for a medical marijuana card inevitably grows in anticipation of the opening of dispensaries, there will be a much higher volume of applications to process.

Having a receipt to serve as a temporary registration card will give great peace of mind to many patients. Some of them may be postponing critical health procedures such as chemotherapy until they have official word that they are permitted to do so. Most of the qualifying patients are reluctant to break the law. This is, after all, why they are seeking a card in the first place.

In Section 3 the addition of a \$2500 fine along with a misdemeanor charge for a physician who fraudulently misrepresents "any fact or circumstance" surrounding the issuance of a certificate seems quite harsh. Perhaps if the word "knowing" was inserted before misrepresentation this would make more sense and remove some ambiguity.

Notwithstanding this reservation, we urge this committee to move the measure on to on FIN. Mahalo for hearing this measure today and for giving us the opportunity to testify.



Committee: Committees on Health and Judiciary
Hearing Date/Time: Friday, February 12, 2016, 9:30 a.m.
Place: Room 329
Re: Testimony of the ACLU of Hawai'i in Support of H.B. 2709, Relating to Medical Marijuana

Dear Chair Belatti, Chair Rhoads, and Members of the Committees on Health and Judiciary:

The American Civil Liberties Union of Hawaii ("ACLU of Hawai'i") writes in support of H.B. 2709, which allows the Department of Health to issue a temporary registration certificate for the medical use of marijuana.

Currently, patients cannot access medical marijuana prior to receiving a permanent registration certification from the Department of Health. Issuance of the certificate may take "thirty calendar days . . . or as soon thereafter as is practicable." See Hawai'i Administrative Rules (HAR) §11-160-20 (effective July 18, 2015). Under this rule, patients may be forced to wait months — or, theoretically, even longer — before being included in the official Department of Health registry of medical marijuana patients. This constitutes a significant burden on patients who require immediate medication. H.B. 2709 would resolve this problem and allow patients immediate access to safe and necessary medication.

Thank you for this opportunity to testify.

Mandy Finlay
Advocacy Coordinator
ACLU of Hawai'i

The mission of the ACLU of Hawai'i is to protect the fundamental freedoms enshrined in the U.S. and State Constitutions. The ACLU of Hawai'i fulfills this through legislative, litigation, and public education programs statewide. The ACLU of Hawai'i is a non-partisan and private non-profit organization that provides its services at no cost to the public and does not accept government funds. The ACLU of Hawai'i has been serving Hawai'i for 50 years.

American Civil Liberties Union of Hawai'i
P.O. Box 3410
Honolulu, Hawai'i 96801
T: 808.522-5900
F: 808.522-5909
E: office@acluhawaii.org
www.acluhawaii.org

Testimony in Opposition to HB 2709 – Relating to Medical Marijuana
Hearing on February 12, 2016 at 9:30 am
Conference Room 329 of the State Capitol

TO: Committee on Health
Rep Della Au Belatti, Chair
Rep Richard Creagan, Vice Chair

Committee on Judiciary
Rep Karl Rhoades, Chair
Rep Joy San Buenaventura, Vice Chair

FR: Alan Shinn, Executive Director
Coalition for a Drug-Free Hawaii
1130 N. Nimitz Hwy., Suite A259
Honolulu, HI 96817
(808) 545-3228 x29

Please accept this testimony in opposition to HB 2709 – Relating to Medical Marijuana, that would require DOH to issue a temporary registration certificate for the medical use of marijuana until a written certificate is produced. It also increases penalty for fraudulent misrepresentation to a law enforcement official.

Act 241 tried to provide for a well-regulated and compassionate medical marijuana dispensary system. By allowing temporary registration certificates increases the chances of the use of counterfeit certificates especially by youth and young adults. We understand that DOH has already cut down on the waiting period to receive a medical marijuana card which should be enough.

Thank you for the opportunity to provide comment on HB 1808.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 09, 2016 4:19 PM
To: HLTtestimony
Cc: Alana.Ross@hotmail.com
Subject: *Submitted testimony for HB2709 on Feb 12, 2016 09:30AM*

HB2709

Submitted on: 2/9/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
AlanaRoss	Individual	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 09, 2016 3:50 PM
To: HLTtestimony
Cc: j.bobich@tcu.edu
Subject: *Submitted testimony for HB2709 on Feb 12, 2016 09:30AM*

HB2709

Submitted on: 2/9/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joseph A. Bobich	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Medical Marijuana is Good for the Public Health Recreational Marijuana is Good for the Public Safety

The War on Drugs turned out to be:

- a War on Marijuana,
- a War on Healthcare and
- a War on Public Safety

Fortunately not so much Hawaii, but on the mainland our Nation is plagued by pill popping culture of pharmaceutical abuse and flooded with waves of off shore cheap Heroin. The current Governor of NJ, a former Federal Prosecuting Attorney emptied out and shut down the jail turned it into a medical drug rehabilitation clinic and turned the Heroin epidemic around.

The Facts and the Stats:

(Total Annual Arrests by Year and Category) Although the intent of a 'War on Drugs' may have been to target drug smugglers and 'King Pins,' according to the FBI's annual Uniform Crime Reports, of the 1,561,231 arrests for drug law violations in 2014, 83.1% (1,297,383) were for mere possession of a controlled substance. Only 16.9% (263,848) were for the sale or manufacturing of a drug. Further, the majority (44.9%) of drug arrests in 2014 were for marijuana -- a total of 700,992. Of those, an estimated 619,809 arrests (39.7% of all drug arrests) were for marijuana possession alone. By contrast in 2000, a total of 734,497 Americans were arrested for marijuana offenses, of which 646,042 (40.9%) were for possession alone. –

(Effect of Medical Marijuana Legalization On Crime Rates) "In sum, these findings run counter to arguments suggesting the legalization of marijuana for medical purposes poses a danger to public health in terms of exposure to violent crime and property crimes. To be sure, medical marijuana laws were not found to have a crime exacerbating effect on any of the seven crime types. On the contrary, our findings indicated that MML precedes a reduction in homicide and assault. While it is important to remain cautious when interpreting these findings as evidence that MML reduces crime, these results do fall in line with recent evidence [29] and they conform to the longstanding notion that marijuana legalization may lead to a reduction in alcohol use due to individuals substituting marijuana for alcohol [see generally 29, 30]. Given the relationship between alcohol and violent crime [31], it may turn out that substituting marijuana for alcohol leads to minor reductions in violent crimes that can be detected at the state level. That said, it also remains possible that these associations are statistical artifacts (recall that only the homicide effect holds up when a Bonferroni correction is made)."

Source:

Robert G. Morris, Michael TenEyck, JC Barnes, and Tomislav V. Kovandzic, "The Effect of Medical Marijuana Laws On Crime: Evidence From State Panel Data, 1990-2006," *PLoS ONE* 9(3): e92816. March 2014. doi: 10.1371/journal.pone.0092816
<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0092816>

(Marijuana Use and Violent Behavior) "Laboratory studies also find no link between THC intoxication and violence. Most people who ingest THC before performing a competitive task in the laboratory do not show more aggression than people who receive placebos; occasionally they show decreased hostility. Numerous scientific panels sponsored by various governments invariably report that marijuana does not lead to violence.(751)"

Source:

Carter, Gregory T.; Earleywine, Mitchell; McGill, Jason T., "Exhibit B: Statement of Grounds," Rulemaking petition to reclassify cannabis for medical use from a Schedule I controlled substance to a Schedule II (Office of Lincoln D. Chafee, Governor Rhode Island and Office of Christine O. Gregoire, Governor of Washington: Letter to Michelle Leonhard, Administrator of the Drug Enforcement Administration, November 30, 2011), p. 38.
<http://big.assets.huffingtonpost.com/chafee.pdf>

Sociopolitical Research

(1972 National Commission on Marihuana and Drug Abuse) "Rather than inducing violent or aggressive behavior through its purported effects of lowering inhibitions, weakening impulse control and heightening aggressive tendencies, marihuana was usually found to inhibit the expression of aggressive impulses by pacifying the user, interfering with muscular coordination, reducing psychomotor activities and generally producing states of drowsiness lethargy, timidity and passivity."

Source:

Shafer, Raymond P., et al, *Marihuana: A Signal of Misunderstanding*, Ch. III, (Washington DC: National Commission on Marihuana and Drug Abuse, 1972).
<http://druglibrary.net/schaffer/Library/studies/nc/ncc3.htm>

Not only Studies and Reports

**But also REAL WROLD CRIME STATISTICS
Demonstrate a REDUCTION in Violent Crimes following
the Legalization of Recreational Marijuana.**

Status Report:

Marijuana Legalization in Colorado After One Year of Retail Sales and Two Years of Decriminalization



Since the first retail marijuana stores opened on January 1st, 2014, the state of Colorado has benefitted from a decrease in crime rates, a decrease in traffic fatalities, an increase in tax revenue and economic output from retail marijuana sales, and an increase in jobs.

Arrests and Judicial Savings

According to data from the Colorado Court System, marijuana possession arrests have dropped 84% since 2010. In 2010, 9,011 people were arrested for marijuana possession. Using the same data we are projecting 1,464 possession arrests for 2014. Given that arrests such as these cost roughly \$300 to adjudicate, it is reasonable to infer that the state is saving millions in adjudicatory costs for possession cases alone in 2014 compared to 2010. Over the same period, arrests for cultivating and distributing marijuana have also dropped by more than 90%.

Decrease in Crime Rates

According to data released by the city of Denver, violent crime and property crime in Denver decreased in 2014.ⁱ Violent crime in Denver went down by 2.2% in the first 11 months of 2014, compared with the first 11 months of 2013. In the same period, burglaries in Denver decreased by 9.5% and overall property crime decreased by 8.9%.

Tax Revenue

Data released by the state Department of Revenue reveal that tax revenue from retail marijuana sales amounted to \$40.9 million between January 2014 and October 2014, not including revenue from medical marijuana and licenses and fees.ⁱⁱ

Of the marijuana tax revenue already collected, the Colorado joint budget committee set aside \$2.5 million to increase the number of health professionals in Colorado public schools.ⁱⁱⁱ In November 2014, the state awarded the first \$975,000 in grants to Colorado schools to be used to hire health professionals.^{iv} The funds help fill a critical gap in Colorado school districts, which suffer from a shortage of school health workers due to 2011 budget cuts.^v Many of the newly hired health workers, including nurses and social workers, will focus on mental health support and on programs to educate students about drug use.^{vi}

Decrease in Traffic Fatalities

Traffic fatalities went down in 2014, according to data released by the Colorado Department of Transportation,^{vii} challenging claims that the legalization of marijuana would lead to an increase in traffic fatalities.

In the first 11 months of 2014, the state had 436 traffic fatalities, a 3% drop from the 449 fatalities in the first 11 months of 2013. The decline in fatalities in 2014 marks a continuation of a 12-year long downward trend in traffic fatalities in the state of Colorado.^{viii}

Economic Benefits

Colorado has the fastest growing economy in the United States,^{ix} and Colorado's unemployment rate is at a six-year low.^x

According to the Department of Revenue, 16,000 people were licensed to work in the marijuana industry as of December 31, 2014,^{xi} though not all those with licenses may be actively working in the industry.

Jack Strauss, an economist at the University of Denver, assessed the economic impact of two dispensaries in Denver, Evergreen Apothecary and Colorado Harvest Company.^{xii} Workers at the two dispensaries receive an average wage of \$17 per hour. Strauss found that the economic impact of the two dispensaries amounted to 280 jobs and \$30 million in total economic output between January 1, 2014 and June 30, 2014, and that the two dispensaries contribute 10 times the tax revenue of either a typical restaurant or retail store.

Youth Prevention Efforts

The state has allocated more than \$8 million in retail marijuana tax revenue for youth prevention and education, mental health and community-based developmental programs.^{xiii} In addition to the \$2.5 million allocated to fund health workers in Colorado schools, \$2 million of marijuana tax revenue has been allocated to help fund community-based youth services programs that offer mentoring and focus on drug prevention and school retention, and over \$4.3 million will fund school-based outreach programs for students using marijuana.

ⁱhttp://www.denvergov.org/Portals/720/documents/statistics/2014/UCR_Citywide_Reported%20_Offenses_2014.pdf

ⁱⁱ<https://www.colorado.gov/pacific/revenue/colorado-marijuana-tax-data>

ⁱⁱⁱ<http://www.colorado.gov/ccjdir/Resources/Resources/Leg/2014/SB14-215.pdf>

^{iv}http://www.denverpost.com/news/ci_26926069/colorado-hands-out-975-000-pot-funds-schools

^vhttp://www.denverpost.com/news/ci_25044133/student-counselor-ratios-bring-challenges-mental-health-support

^{vi}http://www.denverpost.com/news/ci_26926069/colorado-hands-out-975-000-pot-funds-schools

^{vii}<http://www.coloradodot.info/library/traffic/traffic-manuals-guidelines/safety-crash-data/fatal-crash-data-city-county>

^{viii}http://www.coloradodot.info/library/traffic/traffic-manuals-guidelines/safety-crash-data/fatal-crash-data-city-county/Colorado_Historical_Fatalities_Graphs.pdf/view

^{ix} <http://www.businessinsider.com/state-economic-growth-rankings-2014-8>

^x<https://www.colorado.gov/pacific/cdle/news/november-2014-colorado-employment-situation>

^{xi}Email communication from Natriece Bryant, Communications Specialist, Colorado Department of Revenue, Executive Director's Office, January 5, 2014.

^{xii}http://static.squarespace.com/static/53af57cfe4b07bdcd67a25e/t/53eaaae7e4b07639494363e7/1407888103203/CHC-EA_EconomicImpactStudy_080814+%281%29.pdf

^{xiii}http://www.leg.state.co.us/clics/clics2014a/csl.nsf/fsbillcont3/A9002841A8B1E5A087257CB4007E3F99?Open&file=215_e nr.pdf

Support HB1808 with modifications

Delete:

12 ... shall not be visible from any street or
13 road used by the public nor visible to adjoining landowners.

This limitation does not serve any legitimate purpose and merely limits suitable locations for no good reason.

Better to require the Oath of Office and Apply the Rule of Lenity.

A few years ago the Supreme Court of the State of Hawaii ordered broad based medical marijuana reform. The minority opinion was that the lack of access to medical marijuana was an ABSURDITY. And last session the Legislature moved forward the first legislation giving patients access to medical marijuana through dispensaries.

The Constitution empowers the State to protect and promote the public health. The 3 A's of "availability, accessibility and affordability" of health care set the public health standards. The dispensaries provide for the availability of some kind of product but may fall short of availability, accessibility and affordability of Pharmaceutical Quality medicine. The lack of an effective competition and stifling the free market will harm consumers in all aspects

However the majority opinion on Medical Marijuana Reform has not been addressed. The Majority Opinion of the Court found that the Medical Marijuana Laws were IRRECONSIABLY CONFLICTED. The Court ruled that conflicts in the statutes would be resolved under THE RULE OF LENITY. [The Rule of Lenity: in construing an ambiguous criminal statute, a court should resolve the ambiguity in favor of the defendant.] The Court declared that any conflict in the law would be resolved in favor of the defendant ordering an acquittal.

The Rule of Lenity: in construing an ambiguous criminal statute, a court should resolve the ambiguity in favor of the defendant. A court may also look at: the common usage of a word, case law, dictionaries, parallel reasoning, and punctuation.

In a similar fashion the Legislature should avoid wasting Judiciary Resources, Police Resources and Individual Lives and due their due diligence and apply the Rule of Lenity.

The first conflict to look at is HRS 329-14 Schedule 1 (20) marijuana and HRS 329 Part IX Medical Marijuana beginning at HRS 329-121.

HRS 329 part IX holds that medical marijuana is a necessary, appropriate and relatively safe medicine whereas Schedule 1 is for the most dangerous substances.

Clearly one medicine cannot be both a necessary, appropriate and relatively safe medicine and one of most dangerous substances. The irreconcilable conflict created in the statutes under the

Rule of Lenity the courts should resolve this ambiguity in favor of the defendant and order an acquittal. The Legislature should avoid irreconcilable conflicts and absurdity in making law.

HRS 329-14 Schedule 1 (20) marijuana under the Rule of Lenity is **inferior** to the Medical use of marijuana where marijuana is declared as being a necessary, appropriate and relatively safe medicine

HRS 329-14 Schedule 1 (20) marijuana should be deleted from the books:-

Then like a house of cards all the criminal code on marijuana falls again without the support of Schedule 1.

The Legislature should not waste judicial and police resources by maintaining irreconcilable conflicts in the statutes. The responsible act is to streamline the law and eliminate irreconcilable conflicts.

If we examine these irreconcilable conflicts we see that there are two sides,

1. the law enforcement side and
2. The medical need patient side.

The Rule of Lenity favors the medical need patient side. Therefore the law enforcement side must be deleted under the Rule of Lenity.

In addition the Oath of Office requires Legislators and others to support and defend the Constitution of the United States, and the Constitution of the State of Hawaii, and that I will faithfully discharge my duties as to best of my ability.

The Constitution of the United States, and the Constitution of the State of Hawaii, both support and protect health care. The Right of Privacy has a purpose in this situation. Add to support and protection for the Public Health and Public Safety and the way or Marijuana reform is clear.

Three other States already have Legalized Recreational Marijuana; we need equal protection under the Law.

Law Enforcement testimony must comply with the Oath of Office and protect and promote medical marijuana and health care delivery or they should be sanctioned by the legislature.

Under the court ordered marijuana reform, the State should get busy promulgating law for the legalization and regulation of marijuana and the development of Hawaii in this multi-Billion dollar business.

Complaint against Oath of Office Holders

The Legislature has conveniently exempted themselves from criminal acts while performing their duties as a Legislator. It is not surprising that there isn't any Law that citizens can rely upon to have the Oath of Office enforced and Oath violators removed. We are a Nation of Laws except for Oath holders. Although this Constitutional requirement is for the protection of the People, the Oath holders themselves have been derelict in their duties so as to protect bad people in Government including police officers and prominent government officials.

The Marijuana Laws are for the protection and promotion of Organized Crime and fail to meet the health care needs of the State.

Hawaii Supreme Court has opined that marijuana is a medicine and that lack of access to medical marijuana was an Absurdity. The Court also opined that any conflict in Law would be resolved in favor of the defendant. Any conflict with the Constitution would also be resolved in favor of the Constitution and the defendant's rights to health care.

1. The Right of Privacy is established; we do not need to establish it again.
2. Medical Marijuana is a medicine under HRS 329 Part IX as established by law; we do not need to establish it again.
3. All medicine, all health care, is protected by law and is protected under the Constitution by the Right of Privacy.
4. Due to bad Jurisprudence the Right of Privacy has been by law enforcement and the courts by establishing the Commerce Clause as superior to the Right of Privacy, not in harmony with the Rule of Lenity and subsequently caused the various states to lose their Commerce Clause.
5. The Right of Privacy is absolute; no power is no power.
6. Any and all restrictions on health care delivery by government are violations of the Right of Privacy and a violation of the Oath.
7. Violating the Oath shall result in sanctions.

The State is required to protect and promote the public health including medical marijuana health care. The State is required to apply the Right of Privacy not just with abortions but with all medical care. The State of Hawaii lacks a Commerce clause. The State of Hawaii has failed to provide any scientific or medical evidence that suggests that marijuana is a dangerous drug. We get nothing but a law enforcement web of lies and bad law.

The Rule of Lenity: in construing an ambiguous criminal statute, a court should resolve the ambiguity in favor of the defendant. A court may also look at: the common usage of a word, case law, dictionaries, parallel reasoning, and punctuation.

Although the law states in part under HRS § 329-125, which requires that "the qualifying patient . . . strictly complied with the requirements of [Chapter 329, Part IX].", it should also be known that the law must also strictly comply with both Constitutions and the Right of Privacy.

At the time of my arrest it was Federal Department of Justice policy was to NOT ARREST CANCER PATIENTS GROWING MARIJUANA IN THEIR BACK YARD AS MEDICINE. Arresting and prosecuting a Cancer patient in violation of Department of Justice policy and protocols is not being a person of good moral character. IMHO all violations of Naturopathic Medicine is a Color of Law Crime and a Crime against Humanity for profiteering by corporate America, Big Pharma, AMA and the Insurance industry.

A person of good moral character would protect and promote the public health including Medical Marijuana healthcare.

Currently under Federal Law the State's Rights to promulgate Medical Marijuana laws are recognized and protected under the Budget Law. This is endorsed and supported by the Justice Department. However this law must comply with both the State and Federal Constitution.

A person of good moral character would respect and protect our State and Federal Constitutions and my Right of Privacy. A person of good moral character would respect and protect my right to take care of my own medical needs in harmony with Traditional Naturopathic Medical principles and practices.

Now that the Federal law both recognizes and protects the Right of the various States to promulgate law that for the medical use of Marijuana as a medicine, a clear conflict is established in law concerning medical marijuana not being a medicine.

Again under The Rule of Lenity: in construing an ambiguous criminal statute, a court should resolve the ambiguity in favor of the defendant.

In the past despite the State of Hawaii breaking away from the now illegal federal prohibition of marijuana, law enforcement has demanded violations of the Right of Privacy due to Federal "color of law" crimes against the medical use of marijuana. Now, under the new Budget Law, those days are done. Marijuana as a medicine in the various States is recognized and protected under Federal Law. This is accepted by the Department of Justice policy although not by all of law enforcement. There isn't any reason why medical marijuana shouldn't be protected as a medicine under the Right of Privacy. There isn't any reason why the State of Hawaii should fail to protect and promote the public health including medical marijuana.

In the State of Hawaii, by law, medical marijuana is relatively safe non-prescription drug, although currently grow your own, although soon to be OTC for registered users. The therapeutic benefit of medical marijuana is not based upon the recommendation to use medical marijuana but the medicinal qualities of the herb. The recreational use of marijuana is still therapeutic; there is no reason to deny the general public the public health and public safety benefits of marijuana.

Merely requiring a patient to register with the State is a violation of the Right of Privacy.

Isn't the State requiring strict compliance with an absurd law and unconstitutional law even more absurd?

Bottom line neither the State nor the Federal Government has demonstrated any relative risk concerning marijuana compared to other medicines. Currently the new drug craze is to vape OTC DM cough medicine for out of body experiences. Aspirin is more medically hazardous than medical marijuana on a relative basis.

Bottom line by law Marijuana is a necessary, appropriate and reasonably safe medicine.

Respect it and protect it.

Mr. President



Pardon Me

Honestly, I am a
Very Good Medicine

Oath of Office enforced by FBI on State and Federal Level.

Members of the Legislature, Government the police departments that have taken an Oath of Office must not advocate commission of acts of force or violence to prevent others from exercising their rights under the Constitution or laws of the United States or of any State.

Medical Marijuana is a legal medicine under the Laws of the State of Hawaii.

The Federal Budget Law 2015 and 2016 has recognized and protected the State Right to promulgate Medical Marijuana Laws.

Although DEA still classifies marijuana as having no medical use, these new law recognizing and protecting the State Right to declare marijuana is a medicine and provide for its medical use for patients means that Federal Law also recognizes and protects marijuana as a medicine. The Rule of Lenity requires resolution of this conflict to find that in fact marijuana is a medicine and subject to Constitutional Protections. Persons advocating acts of force or violence to prevent others from exercising their rights under the Constitution or laws of the United States or of any State are in violation of Executive Order 10450.

Advocating violations of the Right of Privacy by

- prohibiting, restricting medical marijuana health care delivery or
- advocating criminal penalties for persons accessing medical marijuana healthcare or
- restricting availability, accessibility or affordability of medical marijuana healthcare or
- not protecting and promoting the public health [Article IX of the Hawaii State Constitution] by not providing availability, accessibility or affordability of medical marijuana healthcare or
- not actively protecting the Constitutional Rights to access affordable health care on a timely basis

Are all violations of the Oath of Office which shall be enforced by the FBI on both a Federal and State level.

Executive Order 10450--Security requirements for Government employment

Source: The provisions of Executive Order 10450 of Apr. 27, 1953, appear at 18 FR 2489, 3 CFR, 1949-1953 Comp., p. 936, unless otherwise noted.

<http://www.archives.gov/federal-register/codification/executive-order/10450.html>

WHEREAS the interests of the national security require that all persons privileged to be employed in the departments and agencies of the Government, shall be reliable, trustworthy, of good conduct and character, and of complete and unswerving loyalty to the United States; and

WHEREAS the American tradition that all persons should receive fair, impartial, and equitable treatment at the hands of the Government requires that all persons seeking the privilege of employment or privileged to be employed in the departments and agencies of the Government be adjudged by mutually consistent and no less than minimum standards and procedures among the departments and agencies governing the employment and retention in employment of persons in the Federal service:

NOW, THEREFORE,...

Sec. 8. (a)

(5) Knowing membership with the specific intent of furthering the aims of, or adherence to and active participation in, any foreign or domestic organization, association, movement, group, or combination of persons (hereinafter referred to as organizations) which unlawfully advocates or practices the commission of acts of force or violence to prevent others from exercising their rights under the Constitution or laws of the United States or of any State, or which seeks to overthrow the Government of the United States or any State or subdivision thereof by unlawful means.

(d) There shall be referred promptly to the Federal Bureau of Investigation all investigations being conducted by any other agencies which develop information indicating that an individual may have been subjected to coercion, influence, or pressure to act contrary to the interests of the national security, or information relating to any of the matters described in subdivisions (2) through (8) of subsection (a) of this section. In cases so referred to it, the Federal Bureau of Investigation shall make a full field investigation.

Sec. 8. (a) 5 (d) by the use of the word "shall" requires the FBI to make a full field investigation...of any Oath Holder... which unlawfully advocates or practices the commission of acts of force or violence to prevent others from exercising their rights under the Constitution or laws of the United States or of any State.

Since Marijuana has been declared **KOSHER** under Jewish Law, as a minimum, we would greatly appreciate inserting a **RELIGIOUS EXEMPTION** that would provide for the free exercise of the Jewish Faith in healthcare and keeping kosher.

Rabbi Menachem Genack, said:

“Judaism prioritizes health and encourages the use of medicine designed to improve one’s health or reduce pain.

Using medical cannabis products recommended by a physician should not be regarded as a chet, a sinful act, but rather as a **mitzvah, an imperative, a commandment.**”

Medical Marijuana is a **MITZVAH**. Medical Marijuana is both **KOSHER** and a **COMMANDMENT FROM GOD**, a religious duty, an act of human kindness and the fulfillment of that religious duty.

The Primary meaning of mitzvah is "**commandment**", referring to precepts and commandments commanded by God. In its secondary meaning, Hebrew mitzvah, as with English "commandment", refers to **a moral deed performed as a religious duty**. As such, the term mitzvah has also come to express an **act of human kindness**. The tertiary meaning of mitzvah also refers to the fulfillment of a mitzvah.

Medical Marijuana is proven to be Good for the Public Health
Medical Marijuana is a safe and effective natural medicine that treats many diseases safer, more effectively and cheaper than standard prescription drugs. Side effects are minimal and easily treated. Marijuana feeds the endocannabinol system that maintains health and balance of the cells, tissues, organs and glands.

Recreational Marijuana is proven to be Good for the Public Safety.
After the Legalization of Recreational Marijuana in the State of Colorado the violent crime rate dropped for homicide and assault.

1. **Protect the Public Health and Public Safety!**
2. **Increase the General Fund by tens of millions of dollars!**
3. **Put the Black Mark out of business by Capturing the Revenue Stream!**
4. **Provide for a Blanket Religious Exemption for Jewish People from religious persecution and criminal prosecution under the marijuana laws.**

Honorable Hawaii State Legislators

PLEASE INCLUDE LANGUAGE THAT SUPPORTS AND PROTECTS RELIGIOUS
FREEDOMS IN HEALTHCARE



The largest Orthodox Jewish Kosher union has certified a variety of commercial medical marijuana products as Kosher to be sold in the State of NY.

Please inform yourself and your staff that Medical Marijuana is considered Kosher in the Jewish Religion. The Rabbi tells me that in the Bible God says essentially that you should take good care of yourself. The Rabbi says that some people should be encouraged to use medical marijuana and some people should be discouraged from using marijuana. Hopefully something as easy as this should be easy to understand. The difficult part which is not the State's responsibility is to advise individual patients on their health care needs. Individual health care decisions are protected under the Right of Privacy. The State responsibility is to protect and promote the public health by doing their best to make Medical Marijuana health care available, accessible and affordable.

In addition to the Right of Privacy, since medical marijuana is Kosher, please apply both the Right of Privacy and the Freedom of Religion to all HRS laws and rules. After reviewing the HRS and applying the Rule of Lenity as ordered by the Hawaii Supreme Court, submit your findings for approval to the Governor and then to both the Supreme Court for a declaratory

decision and to the Legislature to repair the irreconcilably conflicted law. This will avoid wasting Police, Judicial, and Health Care Resources and tax payer money while protecting both the public health and public safety.

Please Do Not Allow any further violations of the Oath of Office concerning Medical Marijuana.

Medical Marijuana has always been Kosher in the Jewish Religion. Israel is one of the world leaders in Medical Marijuana research, development and application because it is both Kosher and an Adaptogen and Polycryst. As an Adaptogen, Cannabis balances the cells, tissues and organ functions. Cannabis protects the brain and nervous system from injury, trauma and cell death. As a Polycryst, Cannabis treats many diseases. Because it is Kosher, Marijuana is Holy.

Of course there is Kosher Marijuana in Israel. Kosher marijuana is also sold in Colorado. Now the largest Orthodox Jewish Kosher union has certified a variety of commercial medical marijuana products as Kosher to be sold in the State of NY.

Medical Marijuana is not only **KOSHER** it is a **COMMANDMENT FROM GOD**

Mitzvah

In its primary meaning, the **Hebrew** word ***mitzvah*** (/ˈmɪtsvə/^[1] meaning "commandment", מצוה, [mɪtsˈva], Biblical: *mišwah*; plural מצוות [mɪtsˈvot], Biblical: *mišwoth*; from צוה *šivwah* "command") refers to precepts and commandments commanded by God.

It is used in **rabbinical Judaism** to refer to the **613 commandments** given in the **Torah** at **biblical Mount Sinai** and the **seven rabbinic commandments** instituted later for a total of 620. The 613 commandments are divided into two categories: 365 negative commandments and 248 positive commandments. According to the **Talmud**, all **moral laws** are, or are derived from, **divine commandments**.

In its secondary meaning, Hebrew *mitzvah*, as with English "commandment", refers to a moral deed performed as a religious duty. As such, the term *mitzvah* has also come to express an act of human kindness. The tertiary meaning of *mitzvah* also refers to the fulfillment of a *mitzvah*.

<https://en.wikipedia.org/wiki/Mitzvah>

In Vireo's announcement, the CEO of **OU Kosher**,

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A first in kosher pain relief

By [Jonathan Zalman](#)

Tablet

ORTHODOX UNION CERTIFIES MEDICAL MARIJUANA PRODUCTS, DEEM THEIR USE A 'MITZVAH'

A first in kosher pain relief

By [Jonathan Zalman](#)

December 30, 2015

In July 2014, [five companies were awarded licenses by the New York State Health Department](#) to grow and sell marijuana in the state, and in New York City. One of them, a Minneapolis-based company called [Vireo Health](#), which produces “pharmaceutical-grade cannabis-derived medicine,” announced Wednesday that all of its products had received kosher certification from the Orthodox Union. Vireo’s pot products—intended [by law](#) for use by patients who suffer from a variety of serious illnesses, including cancer, Parkinson’s disease, epilepsy, and HIV/AIDS, among [many others](#)—are apparently the first to have the “OU” trademark attached to it.

That kief, intended to alleviate pain and suffering? It’s kosher. Apparently it’s a mitzvah, too:

In Vireo’s announcement, the CEO of [OU Kosher](#), Rabbi Menachem Genack, said: “Judaism prioritizes health and encourages the use of medicine designed to improve one’s health or reduce pain. Using medical cannabis products recommended by a physician should not be regarded as a *chet*, a sinful act, but rather as a mitzvah, an imperative, a commandment.”

Vireo will operate four dispensaries in New York—in White Plains, Queens, Binghamton, and Albany—all of which are scheduled to open in January 2016. (New York will be [taxing](#) it, of course.)

Previous: [Wake and Bake With Us Is Your Marijuana Ethically Grown?](#)

Related: [A Flourishing \\$40 Million Medical Marijuana Industry Helps Israelis Forget D.C.’s Marijuana Reform Rabbi](#)
[Colorado Activist Mason Tvert Looking for National Impact in Marijuana Legalization](#)

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KOSHER



**MARIJUANA IS KOSHER
IN THE JEWISH BIBLE**





THANK GOD



**MARIJUANA IS
KOSHER**



פער
**לא אהמ
עס**

Recognizing Religious Freedoms
Freedom of Religion

Please insert the following language:

Notwithstanding any law to the contrary, the religious use of Cannabis, Marijuana, is hereby recognized and protected from seed to salvation, including but not limited to, the cultivation, storage, possession, possession of paraphernalia, manufacture, compounding, augmentation, distribution and sales. The religious use of Cannabis shall not be infringed.



From: mailinglist@capitol.hawaii.gov
Sent: Thursday, February 11, 2016 12:17 PM
To: HLTtestimony
Cc: ncsugano@gmail.com
Subject: Submitted testimony for HB2709 on Feb 12, 2016 09:30AM

HB2709

Submitted on: 2/11/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jari S.K. Sugano	Individual	Support	No

Comments: Chairs Au Bellatti & Rhodes, Vice Chairs Creagan & Buenaventura and members of the House Health and Judiciary Committees. Thank you for the opportunity to provide personal testimony in strong support of HB 2709 relating to temporary medical marijuana registration cards. As a caregiver of a medical marijuana (Mmj) patient, I am concerned about the gap in time between Mmj application submittal and registration card receipt. A temporary registration card or clarification on a patient's level of coverage during this wait period would be most helpful. For example: this year it took 8 weeks after submittal to receive my daughter's MMJ card. Thank you for the opportunity to express my strong support of HB 2709.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

HLTtestimony

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 12, 2016 6:44 AM
To: HLTtestimony
Cc: OccupyHiloMedia@yahoo.com
Subject: Submitted testimony for HB2709 on Feb 12, 2016 09:30AM

HB2709

Submitted on: 2/12/2016

Testimony for HLT/JUD on Feb 12, 2016 09:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kerri Marks	Individual	Support	No

Comments: Strong support. It should not take the State 45 days to issue a license, but it's good to know that if it does patients will have a way to prove they are already registered. Thanks you for introducing and hearing this bill and many others up for discussion this session that address the many gaps in Hawaii's medical marijuana patient programs. Please give them your full support. The patients in Hawaii have waited long enough.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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