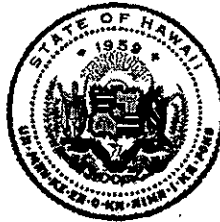


LINDA LINGLE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
919 Ala Moana Blvd. 4th Floor
Honolulu, Hawaii 96813

CLAYTON A. FRANK
DIRECTOR

DAVID F. FESTERLING
Deputy Director of
Administration

TOMMY JOHNSON
Deputy Director
Corrections

JAMES L. PROPOTNICK
Deputy Director
Law Enforcement

No. _____

TESTIMONY ON SENATE BILL 2213 SD2
A BILL FOR AN ACT RELATING TO
COUNTIES

Clayton A. Frank, Director
Department of Public Safety

Committee on Public Safety
Representative Faye P. Hanohano, Chair
Representative Henry J.C. Aquino, Vice Chair

Committee on Health
Representative Ryan I. Yamane, Chair
Representative Scott Y. Nishimoto, Vice Chair

Thursday, March 11, 2010, 10:45 AM
State Capitol, Room 309

Representative Hanohano, Yamane and Members of the Committees:

The Department of Public Safety does not support Senate Bill 2213 SD2 that proposes to amend Section 46-1.5 relating to general powers and limitations of the counties by allowing Hawaii's four counties to independently develop and establish dispensaries for the distribution of marijuana for medical use to qualifying patients and primary caregivers registered under section 329-123 HRS. This could result in four separate sets of rules and regulations set by the counties that would have to be regulated and enforced, without any clarification as to which government entity is to regulate this practice. Senate Bill 2213 SD2 requires the Department of Public Safety to annually register these compassion centers, although it is not clear if the Department or the counties will be tasked with the collection and dispersment of the \$5000.00 registration fee, nor does the

bill allocate any manpower or funds to implement this new program. Since the establishment of Hawaii's Medical Use of Marijuana program within the Narcotics Enforcement Division (NED) in 2000 there have been no positions allocated by the Legislature to operate this program, NED has performed all these functions in addition to its normal operations pursuant to this unfunded mandate.

On page 5, lines 4 through 10 of Senate Bill 22313 SD2 proposes language to allow the compassion centers the ability for person's possessing medical marijuana permits or authorization from programs outside of the State to purchase marijuana from compassion centers. Presently Hawaii's Medical Use of Marijuana Program does not honor permits or certificates from programs outside the State of Hawaii due to the impossible task of compassion centers and/or law enforcement being able to verify the validity of these out of state permits.

Senate Bill 2213 SD2 also proposes to amend section 237-24.3 relating to additional amounts not taxable under section 237-34 by adding language to section 237-24.3(7), which would subject dispensaries to the general excise tax and make inapplicable the exemption for amounts received from sales of prescription drugs or prosthetic devices.

The Department feels that the amendments being proposed by Senate Bill 2213 SD2 are premature and state emphatically that Federal law has not changed and that Federal law enforcement agencies are still making arrests and conducting raids on these so called state registered medical marijuana dispensaries, in other states. In August of 2009, Hawaii's Legislative Reference Bureau research Attorney Lance Ching, in response to Act 29, First Special Session Laws of Hawaii 2009, wrote a white paper on the "Access, distribution, and security components of state medical marijuana programs. His conclusion

after researching the medical use of marijuana programs in all 13 states permitting medical marijuana was as follows:

“Clearly, policies and procedures are being developed to address the issues of access, distribution, and security with regard to the medical use of marijuana. **However, these policies and procedures appear to be in a very early stage of development and do not, as yet provide an established model with a proven ability to successfully address these issues—seeing how they develop, how they approach the obstacles they are likely to encounter, what methods are successful versus what methods prove problematic—will, no doubt, prove informative and valuable in determining how Hawaii chooses to address the issues of access, distribution, and security with regards to its own medical marijuana program.**”

A white paper done in 2009 by the California Police Chiefs Association’s Task Force on Marijuana Dispensaries on California’s Medical use of marijuana program and marijuana dispensaries had the following conclusions:

“In light of the United States Supreme Court’s decision and reasoning in *Gonzales v. Raich*, the United States Supremacy Clause renders California’s Compassionate Use Act of 1996 and Medical Marijuana Program Act of 2004 suspect. No state has the power to grant its citizens the right to violate federal law. People have been, and continue to be, federally prosecuted for marijuana crimes. The authors of this White Paper conclude that medical marijuana is not legal under federal law, despite the current California scheme, and wait for the United States Supreme Court to ultimately rule on this issue.

Furthermore, storefront marijuana businesses are prey for criminals and create easily identifiable victims. The people growing marijuana are employing illegal means to protect their valuable cash crops. Many distributing marijuana are hardened criminals. Several are members of stepped criminal street gangs and recognized organized crime syndicates, while others distributing marijuana to the businesses are perfect targets for thieves and robbers. They are being

assaulted, robbed, and murdered. Those buying and using medical marijuana are also being victimized. Additionally, illegal so-called "medical marijuana dispensaries" have the potential for creating liability issues for counties and cities. All marijuana dispensaries should generally be considered illegal and should not be permitted to exist and engage in business within a county or city's borders. Their presence poses a clear violation of federal and state law; they invite more crime; and they compromise the health and welfare of law-abiding citizens."

The white paper also discussed problems posed by Marijuana Dispensaries. The report found that in California marijuana dispensaries are commonly large moneymaking enterprises that will sell marijuana to almost anyone who produces a physician's written recommendation for its medical use. These physician's recommendations can be secured by paying unscrupulous physicians a fee and claiming to have any malady, even headaches. While the dispensaries will claim to receive only donations, no marijuana will change hands without an exchange of money. These operations have been tied to organized criminal gangs, they foster large grow operations, and are often multi-million-dollar profit centers.

Because these dispensaries generally store valuable marijuana crops and large amounts of cash, numerous dispensaries have been regularly burglarized or robbed. In addition, several operators of dispensaries have been attacked and murdered by armed robbers both at their storefronts and at their homes. Drug dealing, sales to minors, loitering, heavy vehicle and foot traffic in retail areas, increased noise, and robberies of customers just outside dispensaries are also common ancillary byproducts of their operations. To repel store invasions, firearms are often kept on hand by the operators inside dispensaries, and firearms are often used to rob the proprietors. These dispensaries are either

SB2213 SD2
March 11, 2010
Page 5

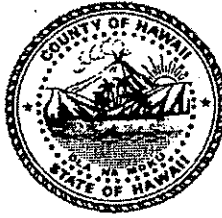
linked to large marijuana grow operations or encourage home grows by buying marijuana to dispense. Destructive fires and unhealthy mold in residential neighborhoods have been found to be the result of large indoor home grows designed to supply dispensaries. Money laundering is also a natural byproduct from the dispensaries' likely unlawful operations.

For these reason the department does not support Senate Bill 2213 SD2 and ask that it be held.

Thank you for the opportunity to testify on this matter.

JAY T. KIMURA
PROSECUTING ATTORNEY

CHARLENE Y. IBOSHI
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OFFICE OF THE PROSECUTING ATTORNEY

TESTIMONY ON SENATE BILL 2213 A BILL FOR AN ACT RELATING TO COUNTIES

Jay T. Kimura, Prosecuting Attorney
County of Hawai'i Office of the Prosecuting Attorney

Committee on Public Safety
Representative Faye P. Hanohano, Chair
Representative Henry J.C. Aquino, Vice Chair

Committee on Health
Representative Ryan I. Yamane, Chair
Representative Scott Y. Nishimoto, Vice Chair

Thursday, March 11, 2010, 10:45am
State Capitol, Room 309

Representatives Hanohano, Yamane, and Members of the Committees:

The County of Hawai'i Office of the Prosecuting Attorney does not support Senate Bill 2213 that proposes to amend Section 46-1.5 relating to the general powers and limitations of the counties by allowing Hawai'i's four counties to independently develop and establish dispensaries for the distribution of marijuana for medical use to qualifying patients and primary caregivers registered under section 329-123 HRS.

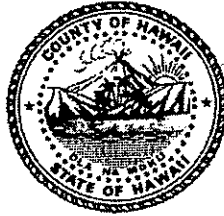
In looking at other location that have enacted similar laws and/or who have taken a similar approach to the one recommended in this bill we have seen a dramatic increase in organized crime, and crime in general.

For many years Amsterdam has been touted by the marijuana lobby as a Utopia, where marijuana was sold openly from neighborhood coffee/pot houses. However, because of the increase in organized crime as well as other social factors, in 2009, the government stepped in and closed the open marijuana coffee/pot houses.

In 2002, Mendecino County, California, relax there laws relating to marijuana. By 2008, the community voted the changes out because of the increase in organized and other crime.

JAY T. KIMURA
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OFFICE OF THE PROSECUTING ATTORNEY

After California started allowing marijuana dispensaries such as the ones expressed in SB 2213, the police in nearly every California Jurisdiction which had the dispensaries, reported an upswing in crime related to the locations. Examples include Murders, Attempted murders, Robberies, Burglaries, Aggravated Assaults, Thefts etc. In addition, many of the businesses located near many of the dispensaries complained about the smells of people smoking marijuana illegally on the premises, and the kinds of people hanging around the dispensaries. Further complaints from citizens and businesses revolved around quality of life offenses.

Allowing marijuana dispensaries will also result in more children obtaining marijuana.

As you are aware, marijuana usage by high school students is high in the state of Hawaii.

- According to the National Survey on Drug Use and Health, the percentages of youth engaging in delinquent behaviors was higher among past year marijuana users than among those who had not used marijuana.¹
- Also, for all delinquent behaviors examined by this survey, the percent of youth engaging in the delinquent behavior rose with increasing frequency of past year marijuana use.
- Marijuana and underage drinking are linked to higher dropout rates. Students who drink or use drugs frequently are up to five times more likely than their peers to drop out of high school²
- Marijuana use is three times more likely to lead to dependence among adolescents than among adults. Research also indicates that the earlier kids start using marijuana, the more likely they are to become dependent on this or other illicit drugs later in life³

As marijuana laws have relaxed in the United States, marijuana related visits to emergency rooms have gone up. According to the United States Department of Health and Human Services DAWN report, in 2008 there was an estimated 374,435 marijuana related visits to emergency rooms in the United States. During that same period there was an estimated 656,892 visits that were alcohol related, of which only 132,842 were for alcohol alone. In 2002 the estimated number of emergency room visits related to marijuana was 129,546. Thus, as the marijuana laws in our nation have relaxed so have the harmful effect of marijuana.

For these reasons the Hawaii County Office of the Prosecuting Attorney does not support Senate Bill 2213 and asks that the Bill be held.

Thank you for the opportunity to testify on this matter

¹ The National Survey on Drug Use and Health: The NSDUH Report, January 9, 2004.

² The National Center on Addiction and Substance Abuse at Columbia University (CASA). Malignant neglect: Substance abuse and America's schools. New York: Columbia University, 2001.

³ Youth Marijuana Prevention Initiative: The NCADI Report. U.S. Department of Health and Human Services, October 2002.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
TWENTY-FIFTH LEGISLATURE, 2010**

ON THE FOLLOWING MEASURE:

S.B. NO. 2213, S.D. 2, RELATING TO COUNTIES.

BEFORE THE:

HOUSE COMMITTEES ON PUBLIC SAFETY AND ON HEALTH

DATE: Thursday, March 11, 2010 **TIME:** 10:45 a.m.

LOCATION: State Capitol, Room 309

TESTIFIERS:

Mark J. Bennett	Attorney General
Clayton A. Frank	Director of Public Safety
Louis M. Kealoha	Chief, Honolulu Police Department
Harry S. Kubojiri	Chief, Hawaii County Police Department
Darryl D. Perry	Chief, Kauai Police Department
Gary Yabuta	Chief, Maui Police Department
Benjamin M. Acob	Prosecuting Attorney, County of Maui
Peter B. Carlisle	Prosecuting Attorney, City and County of Honolulu
Shaylene Iseri-Carvalho	Prosecuting Attorney, County of Kauai
Jay T. Kimura	Prosecuting Attorney, County of Hawaii

Chairs Hanohano and Yamane and Members of the Committees:

We testify together to express our strong and unified opposition to this bill.

This bill would amend chapter 46, Hawaii Revised Statutes, which sets forth the general powers delegated to the counties, to authorize the counties to establish and regulate "compassion centers" to cultivate and sell marijuana to qualifying patients and primary caregivers. In addition, this bill would amend chapter 329, regarding narcotics, to allow counties to authorize the establishment of "compassion centers."

If this bill is passed, it will legalize extremely serious conduct that is currently prohibited under class A, class B, and class C felony statutes. Although this has been promoted as

bill concerning medical marijuana, in reality, this bill would allow any private individual or entity to establish a money-making enterprise involving cultivation, processing, distribution, and sale of marijuana, even if the person or entity has no medical need. Such marijuana enterprises would be extremely difficult to regulate, would promote criminal activity, and would result in great social costs.

We strongly oppose this bill for the following reasons:

1. This bill would legalize extremely serious criminal conduct.

This bill would legalize conduct that currently is prohibited as Commercial Promotion of Marijuana in the First Degree (a class A felony), Commercial Promotion of Marijuana in the Second Degree (a class B felony), and Promoting a Detrimental Drug in the First Degree (a class C felony). By legalizing this felony conduct, this bill would allow any individual or entity to establish a money-making enterprise involving the cultivation, processing, distribution, and sale of marijuana. By way of example, section 712-1249.4 (Commercial Promotion of Marijuana in the First Degree) currently prohibits, in relevant part, the knowing possession of marijuana having an aggregate weight of 25 pounds or more, the knowing distribution of marijuana having an aggregate weight of 5 pounds or more; and the knowing possession, cultivation, or control of 100 or more marijuana plants. This conduct will become legal if this bill is passed.

Hawaii's current medical marijuana law was written with great care to prevent the qualifying patients and caregivers from engaging in this type of conduct. In contrast, this bill proposes to allow any person or entity to engage in this

conduct, regardless of any need for medical marijuana. This would have a tremendous negative impact across the state.

2. Marijuana distribution is illegal under federal law.

Unless federal law is changed, there cannot be any legal distribution of marijuana in Hawaii. Although this bill could legalize conduct that is currently prohibited under state law, federal law cannot be ignored. Federal law enforcement agencies make arrests and conduct raids on medical marijuana dispensaries operating in other jurisdictions.

3. Jurisdictions that have established marijuana dispensaries have experienced serious negative effects.

Jurisdictions that allow marijuana dispensaries have experienced increased crime and a significant decrease in the quality of life in the areas surrounding the dispensaries.

For many years, Amsterdam was touted by the marijuana lobby as a "Utopia" where marijuana was sold openly from neighborhood coffee shops. But in 2009, because of the increase in organized crime as well as other social factors, the government stepped in and closed the coffee shops where marijuana was sold.

In 2002, Mendocino County, California, relaxed its marijuana laws. By 2008, the community voted the changes out because of the increase in organized crime and other crime. After California started allowing marijuana dispensaries, the police in nearly every California jurisdiction that had dispensaries reported an upswing in crime in those areas. There were more murders, robberies, burglaries, aggravated assaults, and thefts.

A 2009 White Paper on Marijuana Dispensaries by the California Police Chiefs Association's Task Force on Marijuana Dispensaries included the following conclusions:

[S]torefront marijuana businesses are prey for criminals and create easily identifiable victims. The people growing marijuana are employing illegal means to protect their valuable cash crops. Many distributing marijuana are hardened criminals. Several are members of stepped criminal street gangs and recognized organized crime syndicates, while others distributing marijuana to the businesses are perfect targets for thieves and robbers. They are being assaulted, robbed, and murdered. Those buying and using medical marijuana are also being victimized. Additionally, illegal so-called "medical marijuana dispensaries" have the potential for creating liability issues for counties and cities. All marijuana dispensaries should generally be considered illegal and should not be permitted to exist and engage in business within a county or city's borders. Their presence poses a clear violation of federal and state law; they invite more crime; and they compromise the health and welfare of law-abiding citizens.

As marijuana laws have relaxed in the United States, the harmful effects of marijuana have increased significantly. According to the United States Department of Health and Human Services DAWN report, in 2002, the estimated number of marijuana-related visits to emergency rooms in the United States was 129,546. In 2008, there were an estimated 374,435 marijuana-related visits to emergency rooms.

4. This bill fails to address critical details regarding the establishment and regulation of compassion centers.

If this bill were passed, it would be extremely difficult to regulate and control the resulting cultivation, processing, storage, and distribution of marijuana. Instead of addressing

these issues of statewide concern, this bill defers them to individual counties. Additionally, this bill contains numerous legal and technical problems.

While section 3 of the bill allows the counties to authorize the establishment of compassion centers, the bill does not address the existing criminal prohibitions in chapter 712, Hawaii Revised Statutes, discussed above. Subsection (e) of the bill, on page 4, lines 20-22, provides that "[a] sale of marijuana pursuant to this section shall not constitute a criminal offense unless the sale exceeds the amount determined under subsection (d) (1)." But this ambiguous provision only addresses the sale of marijuana, not its cultivation, possession, or distribution. Moreover, subsection (d) (1) does not specify an amount. There is nothing to suggest that the amount must be limited to the "adequate supply" defined in section 329-121. Furthermore, this provision seems to indicate that sale of marijuana is not criminal if a certain amount is not exceeded, even though the buyer may not be a qualifying patient or caregiver.

On page 4, at lines 9-11, this bill allows counties to provide for the amount of marijuana that may be dispensed in any single sale. But it does not indicate how many sales may take place in a day.

On page 4, at lines 14-19, this bill suggests that the counties can regulate the amount of marijuana that may be stored on the premises. But it does not address how much marijuana can be stored at the cultivation or processing sites, or at any other location.

On page 5, at lines 1-3, this bill provides that each compassion center shall cultivate and grow its own supply of marijuana. But it does not indicate how much can be grown, or

where it can be grown - for example, it is unclear whether it may grow in the backyard or basement of a private residence, or in a downtown warehouse.

On page 5, at lines 4-10, this bill allows for the sale of marijuana to a person who has a medical marijuana certificate from another jurisdiction, provided "that the person is not a resident of Hawaii and has no intention of living in this State." But it would be impossible to verify this information and intention.

This bill ignores the serious law enforcement and social issues that are certain to arise out of the proliferation of "compassion centers."

We strongly oppose this bill and respectfully ask that it be held.



CHARMAINE TAVARES
MAYOR

OUR REFERENCE
YOUR REFERENCE

POLICE DEPARTMENT

COUNTY OF MAUI

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WAILUKU, HAWAII 96793
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GARY A. YABUTA
CHIEF OF POLICE

CLAYTON N.Y.W. TOM
DEPUTY CHIEF OF POLICE

March 9, 2010.

The Honorable Faye P. Hanohano, Chair
And Members of the Committee on Public Safety
House of Representatives
State Capitol
Honolulu, HI 96813

The Honorable Ryan I. Yamane, Chair
And Members of the Committee on Health
House of Representatives
State Capitol
Honolulu, HI 96813

SUBJECT: S.B. No. 2213 SD2, Relating to Counties; Compassion Centers

Dear Chair Hanohano, Chair Yamane, and Members of the Committees:

The Maui Police Department does not support S.B. No. 2213. This bill proposes to give Hawaii's four counties the power to establish medical marijuana dispensaries to qualifying patients and primary caregivers registered with the Department of Public Safety. It also proposes to amend HRS Section 237-24.3 (relating to additional amounts not taxable under HRS Section 237-34) by adding language that would exempt dispensaries from being taxed.

Modeled after the California practice that is currently under reform, the impression that these dispensaries are selling marijuana exclusively to medical marijuana patients has not been validated. Rather, what may be perceived to be a medical marijuana dispensary is probably no more than a storefront for marijuana with or without a prescription. In our opinion, the decree of treating only those patients requiring prescribed marijuana for medical benefit does not exist in California's medical marijuana dispensaries, and the damage that these dispensaries have imposed on its surrounding neighborhoods are evident-rural, and tranquil communities very much like Maui have been erased from what once was, and are now plagued, with a marijuana-driven culture that has manifested violence. In the end, should this bill become an act, law enforcement will be faced not only with the unregulated sales of marijuana, but the criminality evolving from the climate of these dispensaries in our community.

The Honorable Faye P. Hanohano, Chair
And Members of the Committee on Public Safety
The Honorable Ryan I. Yamane, Chair
And Members of the Committee on Health
March 9, 2010
Page 2

The Maui Police Department asks for your support in opposing S.B. No. 2213.

Thank you for the opportunity to testify.

Sincerely,



for: GARY A. YABUTA
Chief of Police



CHARMAINE TAVARES
MAYOR

OUR REFERENCE
YOUR REFERENCE

POLICE DEPARTMENT
COUNTY OF MAUI

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GARY A. YABUTA
CHIEF OF POLICE

CLAYTON N.Y.W. TOM
DEPUTY CHIEF OF POLICE

March 10, 2010

The Honorable Faye P. Hanohano, Chair
And Members of the Committee on Public Safety
House of Representatives
State Capitol
Honolulu, HI 96813

The Honorable Ryan I. Yamane, Chair
And Members of the Committee on Health
House of Representatives
State Capitol
Honolulu, HI 96813

SUBJECT: S.B. No. 2213, Relating to Counties; Compassion Centers

Dear Chair Hanohano, Chair Yamane, Chair Karamatsu, and Members of the Committees:

My name is Gerald M. Matsunaga, Captain of the Maui County Police Department, Vice Division. I am taking this opportunity to submit written testimony expressing my profound opposition to the passage of S.B. No. 2213, Relating to Counties; Compassion Centers. I believe that other law enforcement entities throughout the State of Hawaii will also oppose these bills.

The value of smoked medicinal marijuana is suspect at best. The Food and Drug Administration (FDA), and the United States Supreme Court do not recognize medical marijuana. Marijuana is still considered a controlled substance under Federal and Hawaii state law. Thus, it is still a federal crime to possess, and distribute marijuana whether it is for medicinal, profit, or recreational purposes. If such a bill is passed, the State of Hawaii would be legally and civilly liable for breaking federal law.

The State of California has taken the lead in the nation to legalize medical marijuana dispensaries. While these laws to legalize dispensaries had good intentions, it has turned into a nightmare for the good citizens of California. The dispensaries have attracted crime and out right drug dealing, money laundering, and violence in the communities that they are operating in. Marijuana is being sold to anyone who produces a physician's written recommendation, some of which are forged documents or are written by unscrupulous physicians who accept a fee to formulate the recommendation for any type of ailment. Because of the value of the marijuana, and the large

The Honorable Faye P. Hanohano, Chair
And Members of the Committee on Public Safety
The Honorable Ryan I. Yamane, Chair
And Members of the Committee on Health
March 10, 2010
Page 2

amounts of marijuana and cash being stored at the dispensaries, there have been numerous burglaries and armed robberies at these locations. Firearms are also being kept at these dispensaries for protection against these intruders. Other drugs have been sold in the area of the dispensaries, along with marijuana being sold to minors. Heavy foot and vehicular traffic, along with noise nuisance have taken over the neighborhoods where these dispensaries have been authorized to operate. Citizens and neighboring businesses have expressed numerous amounts of concerns and complaints with law enforcement and the politicians.

Part of the rationale to legalize marijuana dispensaries in California was to have the taxes they generate to assist the state in the economic crisis. California with legal medical marijuana dispensaries, and some forms of legalized gambling are in the worst financial crisis in their state's history, and probably the worst in the nation. Therefore, legalizing marijuana dispensaries in Hawaii would not help our financial woes.

The Maui Vice Division has investigated a medical marijuana dispensary a few years ago in Maui County, and it revealed what California is presently experiencing. Organized crime was involved, complaints about heavy traffic in the area were received, assaults occurred, sales of marijuana to people who didn't produce a medical marijuana permit occurred, marijuana related products were sold such as marijuana candies and hashish, and a home invasion was also involved.

We have also experienced several cases where marijuana growers had firearms at the marijuana grow sites to protect their crops. There were also several home invasions in the past few years that involved suspects trying to steal marijuana, and in the process physically assaulted residents who required medical treatment. Many of our crystal methamphetamine investigations have resulted in the recovery of marijuana along with the ice, which depicts poly-drug use, and an association of marijuana users and ice users.

From 2007 through 2009 Maui County experienced 63 motor vehicle accidents which involved in a death. Of these 63 accidents, tetrahydrocannabinol (THC) the active ingredient in marijuana was found in 13 of the drivers. For the same time period there were 13 vehicle accidents that involved a near fatality. Of these 13 accidents, 2 drivers had THC in their blood at the time of the accident. We don't need to add anymore contributing factors to our fatal traffic accidents.

We don't know of any neighborhood in Hawaii that would wish to inherit these types of problems, nor would our tourist industry be happy with the type of reputation Hawaii would gain with the problems associated with marijuana dispensaries.

The Honorable Faye P. Hanohano, Chair
And Members of the Committee on Public Safety
The Honorable Ryan I. Yamane, Chair
And Members of the Committee on Health
March 10, 2010
Page 3

The National Institute on Drug Abuse (NIDA) has stated that marijuana smoke "contains 50 percent to 70 percent more carcinogenic hydrocarbons than does tobacco smoke." Just take a step back to common sense, and realize what the legalization of tobacco and alcohol has done to our country. Billions of dollars have been spent on treatment, education, and enforcement. The taxes generated from these two entities haven't kept our great country out of an economic depression.

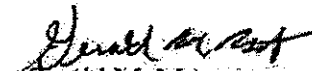
There is another alternative to marijuana in the form of Marinol, which is a legal prescribed drug that is a synthetic form of THC. Sativex is also currently being studied in the United States as another alternative, and its active ingredient is actually derived from the marijuana plant itself. Sativex is currently legal in the United Kingdom and Canada. Let science and the pharmaceutical companies conduct the research needed to develop proper medications, and make their recommendations based on their studies.

If this bill is passed, there is an immense potential for abuse by people trying to legalize it, and those trying to make a profit by selling and distributing it. There is also the potential for more violence and illicit drug abuse as has been demonstrated in California, and is in its infancy stages in Hawaii. The potential for addiction will also increase exponentially if dispensaries are established, as marijuana will be more readily available. The State of Hawaii Department of Health, Annual Report for Fiscal Year 2004, states that 60.8% of our adolescents admitted for substance abuse treatment was for marijuana followed by 27.7% for alcohol, and 9% for methamphetamine. Our community doesn't need to have marijuana more readily available to contribute to this statistic.

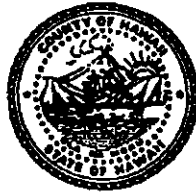
I humbly ask for your favorable support in opposing S.B. No. 2213. Passage of this bill will considerably enhance the potential for marijuana abuse, and violence relating to marijuana. Hawaii does not need the negativity that is associated with a safe haven for medical marijuana users. Open marijuana use has always been a concern of our tourists and residents alike, and we need not project a drug haven atmosphere that could have a negative impact on tourism, and our quality of life. We need to protect our communities from these detrimental entities and build a prosperous and safe community for our future generations.

Thank you for the opportunity to submit testimony on this bill.

Sincerely,


Gerald M. Matsunaga
Captain, Vice Division

William P. Kenoi
Mayor



Harry S. Kubojiri
Police Chief

Paul K. Ferreira
Deputy Police Chief

March 10, 2010

County of Hawai`i

POLICE DEPARTMENT
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Representative Faye P. Hanohano
Chair and Members
Committee on Public Safety
State Capitol
415 South Beretania Street, Room 309
Honolulu, Hawai`i 96813

Re: Senate Bill 2213, SD2, Relating To Counties

Dear Representative Hanohano and Members:

The Hawai`i Police Department strongly opposes the passage of the following Senate Bill:

- **SB 2213, SD 2, Relating to Counties; Medical Marijuana Dispensaries:** Provides that each county has the power to establish compassion centers for the dispensing of medical marijuana. Requires that compassion centers shall only provide service to qualified patients and primary caregivers registered with the department of public safety. Makes compassion centers subject to the general excise tax by making inapplicable the exemption for amounts received from sales of prescription drugs or prosthetic devices. Imposes a general excise tax on marijuana sales.

If history is indicative of things to come, we need only to look at the states that currently allow marijuana dispensaries and the resulting social ills that have arose with legislation to allow the existence of these dispensaries. The State of California is now faced with an *increase* in violent and other ancillary crimes associated directly to marijuana dispensaries. (© 2009 California Police Chief's Association).

Even in tough economic times, the huge budgetary deficit California has been under for several years have failed to improve or generate and realize revenues for the state with the proliferation of legalized "medical marijuana" dispensaries.

With respect to allowing marijuana dispensaries to operate (whether or not the State of Hawai`i Legislature changes the name to "Compassion Centers"), there still arguably exists liability of aiding and abetting criminal violations of Federal law. Marijuana advocates have opposed the pharmaceutical Tetrahydrocannabinol (THC) solution to address those patients that find relief in medicinal marijuana, yet support a "for-profit" solution of marijuana dispensaries. It is abundantly clear that the marijuana advocates are using "medical marijuana" laws to legalize the illicit drug for purposes other than for the treatment of pain and/or eating disorders associated with debilitating medical conditions. The carcinogens found in smoking only exacerbate medical ailments. While the THC may provide pain relief, the cost to the tax payers to support treatment for the unintended side effects of smoking will be enormous. Once again, if we are to learn anything from recent history, we have only to look at the damaging health care costs associated with smoking tobacco.

Representative Faye P. Hanohano
Chair and Members
Committee on Public Safety
Page 2

Our statewide statistics cannot be ignored and readily indicate we have an inordinate amount of people using marijuana for treatment of "pain" symptoms, as opposed to what the initial intent of medicinal marijuana was intended for. Marijuana is still not recognized as a legitimate form of medicine by the American Medical Association.

In *Gonzales v. Raich* (2005), the United States Supreme Court held that the federal government has the constitutional authority to prohibit marijuana for all purposes. Thus, federal law enforcement officials may prosecute medical marijuana patients and their caregivers, even if they grow their own medicine and even if they reside in a state where medical marijuana use is protected under state law.

Marijuana is still a controlled substance under both Federal and Hawai'i state law. Therefore, it would be hypocritical for law enforcement to support the passage of a law seeking to circumvent federal and state laws. The message could be interpreted as the State of Hawai'i Legislature empowering county government to legalize drug trafficking within the state.

By allowing each county to establish medical marijuana dispensaries and expand present medical marijuana laws from their current restrictions only empowers those individuals now growing marijuana illegally and generating huge profits by utilizing this proposed legislation to aid in avoiding detection. Passage of this bill would further hamper law enforcement organizations in their efforts to control this drug and the related crimes that come with it.

For the reasons above, we urge this committee to reject this piece of legislation.

Thank you for allowing the Hawai'i Police Department to testify on this bill.

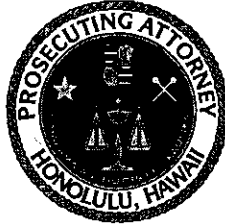
Sincerely,


HARRY S. KUBOJIRI
POLICE CHIEF

DEPARTMENT OF THE PROSECUTING ATTORNEY
CITY AND COUNTY OF HONOLULU

ALII PLACE
1060 RICHARDS STREET, HONOLULU, HAWAII 96813
AREA CODE 808 • 786-6407

PETER B. CARLISLE
PROSECUTING ATTORNEY



DOUGLAS S. CHIN
FIRST DEPUTY
PROSECUTING ATTORNEY

**THE HONORABLE FAYE HANOHANO, CHAIR
HOUSE COMMITTEE ON PUBLIC SAFETY
THE HONORABLE RYAN YAMANE
HOUSE COMMITTEE ON HEALTH
Twenty-fifth State Legislature
Regular Session of 2010
State of Hawai'i**

March 11, 2010

RE: S.B. 2213, S.D. 2; RELATING TO COUNTIES.

Chair Hanohano and members of the House Committee on Public Safety and Chair Yamane and members of the House Committee on Health, the Department of the Prosecuting Attorney submits the following testimony in opposition to S.B. 2213, S.D. 2.

The purpose of this bill is to amend Hawaii Revised Statutes (HRS) chapter 46 which sets forth the general powers delegated to the counties to authorize the counties to establish compassion centers to dispense medical marijuana. In addition, the bill amends HRS chapter 329 to set forth the requirements and criteria for the compassion centers.

Hawaii's medical marijuana law, established in 2000, was specifically designed to require a one to one relationship between the designated patient and the caretaker who may provide the marijuana; the state law purposely required the one to one relationship to avoid the problems other states and cities are having with burgeoning numbers of marijuana dispensaries. In Los Angeles, it is estimated that there are 800 to 1,000 marijuana dispensaries. Los Angeles county officials have asserted that most of dispensaries are for-profit enterprises which often sell marijuana to persons who are not legitimately qualified under state law. Complaints from

residents in areas with multiple medical marijuana dispensaries about a decreased quality of life and an increase in crime around the dispensaries have resulted in an effort by Los Angeles to place a cap on the number of dispensaries and suing dispensaries to close them. At least 120 cities and eight counties in California have moved to ban dispensaries. Given these problems, we believe that it is inadvisable to permit medical marijuana dispensaries in Hawaii.

Furthermore, we note that the bill states that the counties may authorize by ordinance the establishment of compassion centers for the **legal** distribution of marijuana. Since marijuana the distribution of marijuana is still illegal under federal law, we believe that until federal law is changed, there cannot be any **legal** distribution of marijuana.

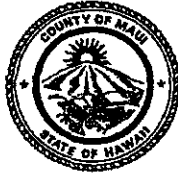
We also observe that section 3 of the bill provides that the sale of marijuana pursuant to this section shall not constitute a criminal offense unless the sale exceeds the amount determined under subsection (d) (1) of section 3. Since there is no amount provided in subsection (d) (1) of section 3, we believe this provision is flawed. In addition, subsection (d) of section 3 of the bill allows for the county ordinance to provide for the amount of marijuana that may be dispensed at any single sale; this provision may be in conflict with the current provisions of HRS section 329-121 which permits the caregiver and patient to jointly possess no more than four ounces of usable marijuana as an "adequate supply." Under subsection (d) of section 3, the counties could theoretically permit joint possession of more than four ounces of usable marijuana.

Lastly, we feel that the provision that the sale of marijuana pursuant to this section shall not constitute a criminal offense unless the sale exceeds the amount determined under subsection (d)(1) of section 3 is further flawed by being absurdly narrow. Under its language, the sale of marijuana to a person who violates provisions of subsection (c) or even under the current medical marijuana provisions of part IX of chapter 329, could not be charged with a criminal offense; thus for example, if the dispensary sold medical marijuana to someone they knew was not certified to use medical marijuana under state law, the language suggests the buyer could not be charged for the illegal possession of marijuana and the dispensaries could not be charged with the illegal distribution of marijuana.

For these reasons, we oppose the passage of S.B. 2213, S.D. 2 and respectfully request that it be held.

Thank you for this opportunity to testify.

CHARMAINE TAVARES
Mayor



BENJAMIN M. ACOB
Prosecuting Attorney
PETER A. HANANO
First Deputy Prosecuting Attorney

DEPARTMENT OF THE PROSECUTING ATTORNEY
COUNTY OF MAUI
150 S. HIGH STREET
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PHONE (808) 270-7777 • FAX (808) 270-7625

March 9, 2010

HONORABLE FAYE P. HANOHANO, CHAIR
HONORABLE HENRY J.C. AQUINO, VICE CHAIR
COMMITTEE ON PUBLIC SAFETY

HONORABLE RYAN I. YAMANE, CHAIR
HONORABLE SCOTT Y. NISHIMOTO, VICE CHAIR
COMMITTEE ON HEALTH

HOUSE OF REPRESENTATIVES
THE TWENTY-FIFTH LEGISLATURE
REGULAR SESSION OF 2010
STATE OF HAWAII

TESTIMONY OF BENJAMIN M. ACOB,
PROSECUTING ATTORNEY FOR THE COUNTY OF MAUI,
IN OPPOSITION TO S.B. NO. 2213, SD2
RELATING TO COUNTIES

The Honorable Chairpersons and Committee Members:

The Department of the Prosecuting Attorney for the County of Maui strongly opposes S.B. 2213, SD2 Relating to Counties.

We have serious concerns about the County of Maui sanctioning the distribution of marijuana. Having a county agency involved in the distribution of medical marijuana, would likely cause conflicts with federal law. See Gonzales v. Raich, 545 U.S. 1, (2005) (Congress' Commerce Clause authority includes the power to prohibit the local cultivation and use of marijuana in compliance with California law).

Under Federal law, marijuana is still classified as a Schedule I substance based upon its high potential for abuse, no accepted medical use, and no accepted safety for use in medically supervised treatment. See Gonzales v. Raich. Thus, under federal law, the manufacture, distribution, or possession of marijuana remains a criminal offense. See 21 USC § 841(a)(1).

Finally, we are extremely troubled by the suggestion that the tax revenue generated from the distribution of this illegal drug can help balance the State's budget. Indeed, as other law enforcement agencies have testified, the severe negative impact on the community must not be ignored (ie. decrease in quality of life, increase in crime, etc.). We should not be tempted into balancing the budget by legitimizing what is presently an illegal activity under state and federal law.

Accordingly, for the reasons discussed above, our Department strongly opposes S.B. 2213, SD2. Thank you for the opportunity to testify.

(S.B. 2213, SD2, Relating to Counties)



Advocates For Consumer Rights

Working for Hawaii's consumers since 1994

George Fox, President

808- 447-9424 afcr@hawaii.rr.com

March 10, 2010

COMMITTEE ON Public Safety, Chair

Rep. Faye P. Hanohano, Chair

Rep. Henry J.C. Aquino, Vice Chair

TESTIMONY ON SB2450 RELATING TO MARIJUANA

COMMITTEE ON HEALTH

Rep. Ryan I.C. Aquino, Vice Chair

Rep. Scott Y. Nishimoto, Vice Chair

DATE: THURSDAY, FEBRUARY 11, 2010

TIME: 10:45A.M.

PLACE: Conference Room 309

State Capitol

415 South Beretania Street

Honorable Chairs, Vice Chairs, and members of the Committees; **Advocates For Consumer Rights strongly support SB2213, SD2**, Relating to Marijuana.

Faced with the task of testifying on Cannabis Bills this session, I realized I knew almost nothing about the subject so I spent many hours doing research. Here are the important things I learned:

- Cannabis has been cultivated for 5,000 years.
- Egyptians grew cannabis over 3,000 years ago for it's medicinal value.
- Marijuana has been smoked for 1,000s of years, all over the world!
- No-one has ever died from ingesting marijuana, **no-one!** Meanwhile aspirin is blamed for approximately 7,000 deaths per year.
- No-one has ever overdosed on cannabis, **no-one!** **Meanwhile an estimated 108,000 people die each year from doctor prescribed drug interactions, according to a 1998 JAMA article.**
- Drugs prescribed by doctors are the 4th leading cause of death in the industrialized world.

- All patients I've interviewed say that the use of cannabis has shown no side effects and greatly reduces or eliminates the side effects from their doctor prescribed drugs.
- Marijuana was wrongfully classified as a Class 1 drug during the 1960's after a thirty-year PR campaign claimed marijuana makes people into drug crazed maniacs.

HOW IT ALL BEGAN

- During the mid-thirties the E.I. DuPont Company was big in the **FIBER** business, the new profit threat coming down the road was **HEMP (marijuana, high fiber, cheap to grow & Process)**
- DuPont went to the U.S. Government for help and a new **Agency was formed with the charge of killing Hemp. A PR Firm was hired and editorials began appearing all over the country warning of the dangers of marijuana.**
- When I was a child (early 1940s) the great jazz drummer, Gene Krupa was busted for smoking marijuana. The headlines in the New York Papers screamed "sex maniac busted"!
- So, we went from "maniacs" to "sex crazed maniacs" in one smooth PR Press Release!
- By the mid sixties, with all the stories about marijuana being bad and no stories about any good to be derived, marijuana was classified a "CLASS ONE NARCOTIC" They could just as easy classified butter to be a narcotic.
- **With all the anecdotal evidence & no opposition it was a no-brainer to misclassify marijuana as a CLASS ONE Narcotic!**

Bottom line: NO addictions, NO overdoses and, more importantly, NO DEATHS!

SB2213, SD2 allows the counties to open dispensaries for the purpose of delivering to patients a quality product in a controlled environment. The current Medical Marijuana law leaves much to be desired, i.e. Patients can legally have 5 mature plants and 3 immature plants, however, it is against the law to have, sell, and purchase seeds, cuttings, and clones which are required in order to grow a legal plant; 5 plants may, or may not be sufficient for a given patient, no-one knows because no studies have been performed.

More importantly, SB2213, SD2 provides for taxing dispensary sales. This could be crucial for balancing this, and future years budgets.

We understand the concern about children gaining access to marijuana under and slacking of the current law, This is just another bogus scare tactic because teenagers already have total access! When marijuana is controlled and TAXED (like cigarettes) teenagers will have less access than they now do!

A young man, about 30 years old, with a Masters in Sociology, told me that when he was a teenager, "his father, uncles and he would hang out on the week-end talking story and smoking marijuana, it was a cultural thing".

Please pass SB2213, SD2!

I will be happy to answer any questions.

Sincerely,

(signed)
George Fox,
President



Committees: Committees on Public Safety and Health
Hearing Date/Time: Thursday, March 11, 2010, 10:45 a.m.
Place: Room 309
Re: Testimony of the ACLU of Hawaii in Support of S.B. 2213, S.D. 2,
Relating to Counties

Dear Chairs Hanohano and Yamane and Members of the Committees on Public Safety and Health:

The American Civil Liberties Union of Hawaii ("ACLU of Hawaii") writes in support of S.B. 2213, S.D.2.

The ACLU of Hawaii encourages legislative actions that end punitive drug policies that cause widespread violations of constitutional and human rights as well as unprecedented levels of incarceration. In furtherance of that goal, we support legislation like S.B. 2213 that seeks to ensure that sick and dying individuals have safe and legal access to medical cannabis.

As a member of the Medical Cannabis Working Group, the ACLU of Hawaii is aware of the many problems that patients have with the medical marijuana program. S.B. 2213 attempts to address their concerns by making the program more accessible to patients and doctors, while protecting their safety and privacy. Attached is the Medical Cannabis Working Group Executive Summary. Please also review the full report, which Senator Espero has emailed to you. The full report is also available at <http://www.acluhawaii.org/downloads/1002MCWG.pdf?PHPSESSID=b857c7b7bf0f343a9f52afaa2349f609>.

The mission of the ACLU of Hawaii is to protect the fundamental freedoms enshrined in the U.S. and State Constitutions. The ACLU of Hawaii fulfills this through legislative, litigation, and public education programs statewide. The ACLU of Hawaii 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 Hawaii has been serving Hawaii for over 40 years.

Thank you for this opportunity to testify.

Sincerely,
Laurie A. Temple
Staff Attorney

American Civil Liberties Union of Hawaii
P.O. Box 3410
Honolulu, Hawaii 96801
T: 808.522-5900
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www.acluhawaii.org

EXECUTIVE SUMMARY

The Medical Cannabis Working Group (“MCWG”) convened in October 2009 to conduct a study and make recommendations to the 2010 Hawai‘i State Legislature to improve the state’s ten-year-old medical marijuana program.

The MCWG, tasked with completing the mission of Act 29, establishing the Medical Cannabis Task Force, which was enacted over a veto by Governor Lingle but never convened, examined current state statutes, state administrative rules, and all county policies and procedures relating to the medical marijuana program. Further, it examined issues and obstacles that qualifying patients, physicians, caregivers, and law enforcement officials have encountered with the medical marijuana program. MCWG also compared and contrasted Hawaii’s medical marijuana program with all other states’ medical marijuana programs.

Based on the results of its study and a public survey, MCWG recommends that the following immediate actions be taken by the Legislature to improve Hawaii’s medical cannabis program:

1. Create a distribution system so that patients do not need to resort to the black market to obtain their medicine;
2. Increase the allowable number of plants and the amount of usable cannabis to ensure that patients have an adequate supply of their medicine;
3. Allow caregivers to care for at least five patients to ensure that patients are assured of an adequate supply and a competent caregiver; and
4. Transfer medical marijuana program oversight from the Department of Public Safety – a law enforcement agency -- to the Department of Health.

Additionally, MCWG recommends that the Legislature take action to ensure that the program addresses patient needs such as enhanced confidentiality, presumptive eligibility, faster certification, and access to forms and other necessary documents on the program website.

MCWG also urges the Legislature to facilitate the development and implementation of policies and procedures to facilitate inter-island transport of medical cannabis, and direct the counties and relevant administrative agencies to educate law enforcement and public safety officers on the medical cannabis law as a whole.

Other recommendations address healthcare matters such as creating a protocol for adding new covered medical conditions; expediting coverage for hospice patients; and extending the validity of program certification for more than one year for patients with chronic conditions.

Finally, since not all of the problems with the program need to be addressed by legislative action, MCWG recommends that the Medical Cannabis Working Group be permanently convened to identify and help implement strategies, both legislative and administrative, to improve Hawaii’s program.

SB2213 Relating to Counties Provides that each county has the power to establish compassion centers for the dispensing of medical marijuana. Requires that compassion centers shall only provide service to qualified patients and primary caregivers registered with the department of public safety. Makes compassion centers subject to the general excise tax by making inapplicable the exemption for amounts received from sales of prescription drugs or prosthetic devices. Imposes a general excise tax on marijuana sales. Eff 8/7/2012. (SD1)

COMMITTEE ON PUBLIC SAFETY Rep. Faye P. Hanohano, Chair; Rep. Henry J.C. Aquino, Vice Chair
COMMITTEE ON HEALTH Rep. Ryan I. Yamane, Chair; Rep. Scott Y. Nishimoto, Vice Chair

Thursday, March 11, 2010: 10:45 a.m.; Conference Room 309

HAWAII SUBSTANCE ABUSE COALITION

GOOD MORNING CHAIR HANOHANO, CHAIR YAMANE AND DISTINGUISHED COMMITTEE MEMBERS:

My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide hui of more than twenty non-profit treatment and prevention agencies.

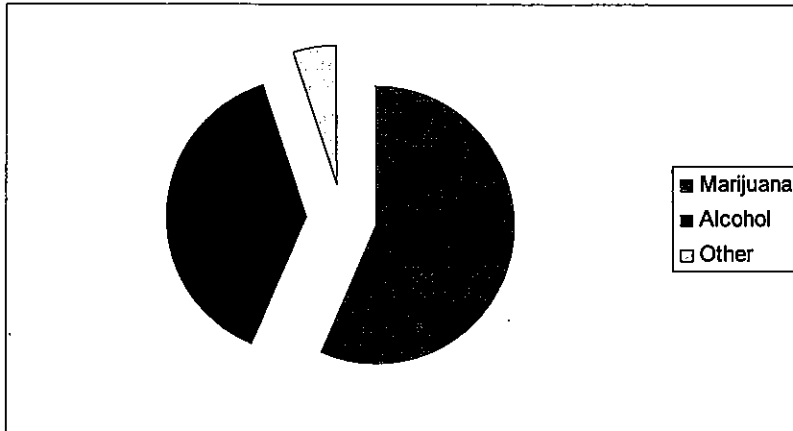
HSAC Provides Information on Use and Addiction:

All forms of marijuana are mind-altering. In other words, they change how the brain works. They all contain THC (delta-9-tetrahydrocannabinol), the main active chemical in marijuana and more than 400 other chemicals. Marijuana's effects on the user depend on its strength or potency, which is related to the amount of THC it contains. The THC content of marijuana has been increasing since the 1970s.¹

Today's marijuana is estimated to be 300 times more potent than in the 1970s.²

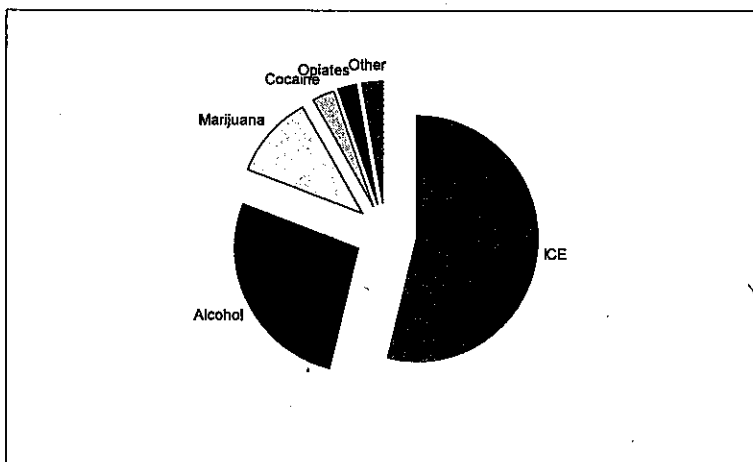
Adolescent marijuana use is up for those students admitted to treatment facilities. In a sample across Oahu and Kauai of 800 students, it is reported that marijuana is abused more than alcohol. This sample reports the first time that marijuana abuse is higher than alcohol abuse in students ranging from high school to middle school.

ADOLESCENT PRIMARY DRUG USAGE IN SCHOOL-BASED TREATMENT GROUPS IN 2009



In treatment for adults, marijuana is the 3rd leading primary drug of choice for those having an addiction meeting criteria for dependency and treatment need.

ADULTS IN TREATMENT: PRIMARY DRUG OF CHOICE 2009



While alcohol is legal and can be very addictive, we note that marijuana addiction can also be addictive and such addiction is on the rise. We appreciate the opportunity to testify today and are available for questions, if needed.

References

1. U.S. Department of Health and Human Services. National Institute on Drug Abuse. (2001, March 13). Marijuana: Facts for Teens Washington, DC: U.S. Government Printing Office. Retrieved October 03, 2002 from the World Wide Web: <http://www.nida.nih.gov/MarijBroch/Marijteenstxt.html#What>
2. Strengthening Professional Identity: Challenges of the Addictions Treatment Workforce, December 2006. <http://www.samhsa.gov/Workforce/WorkforceReportFinal.pdf> The University of Mississippi's 2000 Marijuana Potency Monitoring Project showed that commercial grade marijuana tetrahydrocannabinol (THC) levels rose from under 2 percent in the late 1970s and early 1980s to 6.1 percent in 2000 (DEA, 2003).

**Testimony in Favor of SB 2213, Before Hawaii's Joint House
Committee on Health and Public Safety**

March 11, 2010 □

By Paul Armentano □

Deputy Director □

NORML | NORML Foundation

I applaud the members of the House committees on Health and Public Safety for holding this hearing regarding Senate Bill 2213, which seeks to amend Hawaii's nearly ten-year-old medical marijuana law.

Senate Bill 2213 allows for the establishment of licensed 'compassion centers' to engage in the regulated and controlled production and distribution of medical cannabis to state-authorized patients. This is a sensible and long-overdue amendment to existing law.

Under present law, qualified patients have the legal option to possess and use marijuana therapeutically, if it is done so under their doctor's supervision. (To date, approximately 7,100 patients qualify to use marijuana under the law.) However, this law fails to provide these patients with safe, legal, consistent above ground access to their medicine.

Senate Bill 2213 seeks to rectify this situation by providing patients with access to medical marijuana in a strictly controlled, state regulated manner. Passage of this measure would provide authorized patients with the safe access they desire, while discouraging abuse or the diversion of marijuana to the underground market. Similarly regulated facilities are operating in

New Mexico, and will soon be implemented in New Jersey, Maine, and Rhode Island.

Further, passage of SB 2213 will also result in raising needed state and county funds by imposing a \$30 per ounce excise tax on the retail sale of cannabis – half of which will be earmarked to the state and half of which will be earmarked to the county where the transaction occurred. Compassion centers will also be required under this act to pay an annual registration fee. These fees would help to alleviate the state's projected \$1.2 billion budget shortfall, and help to provide Hawaii residents with necessary programs and services.

In summary, the goal of SB 2213 is not to encourage the broader use or availability of marijuana among the general public, but rather to provide seriously ill patients with an alternative to the criminal black market. Senate lawmakers recently passed this measure by a 20 to 4 vote. NORML encourages House members to show similar support in favor of this common sense and fiscally responsible proposal.

END

Paul Armentano is the deputy director of the National Organization for the Reform of Marijuana Laws (NORML), and is the co-author of the book Marijuana Is Safer: So Why Are We Driving People to Drink? (Chelsea Green, 2009). His writing on marijuana policy has appeared in over a dozen anthologies and in over 500 newspapers and magazines. He is a former consultant to Health Canada

BATTLE & EDENFIELD, P.L.L.C.

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March 10, 2010

Representative Faye P. Hanohano
Chair and Members
Committee on Public Safety
House of Representatives
State Capitol, Room 310
Honolulu, HI

Re: Senate Bill 2213 SB2

Dear Rep. Faye and Members:

I write to you regarding the above referenced Senate Bill at the invitation of Senator J. Kalani English.

By way of introduction, I am an attorney licensed to practice in the States of Florida, New Mexico, Colorado and Montana. I maintain offices in both Florida and Montana and practice laws in all four of these States. I am also a Florida State Licensed Professional Engineer with a Bachelors Degree in Engineering [Civil Option] and a Masters Degree in Environmental Engineering. **I am not a Medical Marijuana Caregiver or Patient. I personally have never used any form of cannabis, legal or illegal.** However, I do provide legal advice to Caregivers, Patients and Medical Marijuana Dispensaries in the State of Montana and I have represented various persons charged with illegal possession of various illicit drugs over my 29+ years of legal practice.

I am 56 years old, grew up in Florida, and graduated from high school in the State of Florida in 1971. Therefore, you can see that I grew up during the days that illicit drug use of many kinds was rampant and the Florida School System was showing us films like "Reefer Madness" which were intended to indoctrinate us against use of any drugs other than prescription drugs. The Florida School System was certainly successful in that endeavor with me because I stayed completely away from all illegal drug use as well as tobacco. Unfortunately, this indoctrination program went so far that it "demonized" marijuana and put it in a class in the public eye with heroin, cocaine, LSD, illegal Methamphetamines and others. This has created a stigma concerning any use of medical marijuana which stigma is slow to dissipate despite increasing, and I might suggest overwhelming, evidence that marijuana has a significant medical benefit for many medical conditions with essentially none of the harmful side effects of many other medications.

It is also very curious to me that medical cocaine [used in a number of medical procedures including dilation of sinuses during surgery], medical opiates like morphine, and synthetic painkiller substitutes like Percocet and OxyContin, all of which unlike medical marijuana carry the potential of addiction, severe side effects, and death from overdose, are considered acceptable medical prescriptions by virtually all citizens, while many continue to demonize medical marijuana. However, demonizing medical marijuana because some may abuse it, or illegally distribute it makes no more sense than banning Percocet, Morphine, or OxyContin would make for the same reasons. OxyContin is perhaps the most abused prescription painkiller today and is sold illegally on the black

market more than any other legal prescription drug. But we haven't outlawed its sale and use because it has demonstrable medical value.

Here in Montana many people are trying to effect a *de facto repeal* of Medical Marijuana Laws by addressing at the local government level through zoning and business license ordinances various illegal activities they associate with organized crime, the presence of marijuana, and the presence of cash. They opine that having marijuana dispensaries leads to the presence of large amounts of the product which has great value and cash at the dispensary sites. This they urge should be a basis for making the dispensaries illegal in their communities to avoid robberies and illegal resales of medical marijuana to persons not licensed to use it. From the testimonies already up on your website, it looks like a similar movement is taking place in Hawaii. I suggest to you that all of these arguments are simply "red herrings" strewn about to attempt to contravene State law. We don't ban banks, pharmacies, county fairs, or department stores to avoid someone attempting to rob them. Yet each of these types of facilities are widely recognized as places with relatively free access to the public that contain large amounts of valuable goods and large amounts of cash. Our society utilizes our police departments and judicial system to enforce the law by catching and prosecuting any criminals that attack patrons coming or going from these facilities as well as those who would rob the facilities directly. We don't ban the legal activities like banks, pharmacies, county fairs, or department stores to avoid crime. Rather, we direct our law enforcement institutions to enforce the law for the benefit of all citizens. Our law enforcement agencies should enforce medical marijuana laws with the same vigor as they enforce the right to purchase

prescription drugs at pharmacies without being robbed of your money or prescription drugs as you come and go.

The real issue for you in considering Senate Bill 2213 should be much simpler than worrying about the evils associated with any kind of unlawful activity. The State of Hawaii, along with others including my present home State of Montana, have decided that medical use of marijuana is an acceptable treatment method for many medical conditions. Thus, Medical marijuana by definition is now a legal medical product under your State's laws. With that determination having already been made, it seems the focus should shift to how to make medical marijuana legally and readily available to the largest number of *bona fide* patients at reasonable costs. The fact that some people may choose to break the law should not deter you from making any legal medical product readily available to patients needing it and making it available at a reasonable cost.

I urge you to pass Senate Bill 2213, but to consider several changes. First, require your State's Counties to allow more than one dispensary operation per county to avoid an artificial inflation of prices and ease availability to Patients. Second, require that dispensaries be allowed in all locations that pharmacies dispensing prescription pharmaceuticals are allowed and require that grow operations be allowed in any location that similar agricultural operations are allowed. Medical marijuana is a medicine. It should be handled like one in land use regulations and not dealt with like the recreational alcohol, tobacco and gambling. Third, do not allow any Patients to use medical marijuana on premises of a dispensary unless that dispensary is located within a hospital or resident care type facility where the Patient is an inpatient. Unless the patient is a resident at a hospital or in-patient care facility, there is little reason to allow the patient to

medicate on premises. And fourth, require a uniform statewide standard in all counties for regulating the location and operation of dispensaries and grow operations. This will go a long way toward stopping anti-medical marijuana activists from pressuring local government officials to contravene state law at the local government level.

Thank you for the opportunity to provide your Committee with the foregoing thoughts. I am available at your convenience to discuss any aspect of this communication and any other issues facing your Committee as it struggles in dealing with Medical Marijuana issues for the benefit of Hawaii's citizens.

Very truly yours,



Maxwell G. Battle, Jr.

CC: Hawaii State Senator J. Kalani English

Hearing: Thursday, March 11, 2010 at 10:45am in Conference Room 309

Committee on Public Safety
Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair

Committee on Health
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair

In Support of SB2213 Relating to Counties

The Hawaii Medical Marijuana Act of 2000 provided for patients to grow marijuana plants, but the act failed to recognize that most patients do not have the expertise and or ability to cultivate their own plants. Most of the other states that allow medical marijuana have also failed to address this dilemma. California allows for medical marijuana dispensaries but the implementation of these dispensaries has come under criticism. Rhode Island also recognized this dilemma and amended their medical marijuana act last year to provide for compassion centers. SB2213 is modeled in part after the Rhode Island statute which provides stronger controls and restrictions than California.

I urge you to pass SB2213 which addresses one of the major oversights in the original Hawaii Medical Marijuana Act.

Representative Joe Bertram III
415 South Beretania Street Room 311
Honolulu, Hawaii 96813
(808) 586-8525

Dr. Gregory Hungerford

To: COMMITTEE ON PUBLIC SAFETY

Rep. Faye P. Hanohano, Chair

Rep. Henry J.C. Aquino, Vice Chair

COMMITTEE ON HEALTH

Rep. Ryan I. Yamane, Chair

Rep. Scott Y. Nishimoto, Vice Chair

NOTICE OF HEARING

DATE: Thursday, March 11, 2010

TIME: 10:45 a.m.

Re; SB2213 SD2 (SSCR2480) RELATING TO COUNTIES, Compassion Centers

I strongly support this bill.

Let's consider The Preamble to the United States Constitution.

"We the People of the United States, in Order to form a more perfect Union, establish Justice, insure domestic Tranquility, provide for the common defense, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America."

Justice, tranquility, welfare and blessings of liberty says it all. The people of Hawaii have already spoken. Without "Compassion Centers" medicinal marijuana patients will continue to seek out illegal growers. Many patients may not know how to grow their own medicine or may be unable to for various reasons. Certainly, a patient purchasing their medicine from illegal growers does not bring about tranquility to one's life.

I have read the testimony opposing this bill. I noticed that there were NO private citizens opposed to this bill. That is a very loud and clear message! Perhaps the opposition is concerned about job security. Think about all the cost incurred to arrest, prosecute and incarcerate just one offender. The officer(s), jail guards/staff, judges, clerks, attorneys, probation officers, rehab counselors and various other personnel. That's BIG business. Rather than fighting the decriminalization of marijuana and compassion centers, those resources saved could be put to better use. For instance, the "ice" problem in Hawaii is ridiculous! If any group of drug abusers need our help it is them. How about using those resources saved to go after rapist, child molesters, murderers and other violent crimes? I highly recommend 2 movies, American Drug War The Last White Hope and How Weed Won The West, very enlightening.

An old saying, "Evil flourishes when good men do nothing". I am encouraged these steps have been taken to get qualified patients the medicine they need. Regulation and taxation makes perfect sense. As a doctor I see firsthand the many benefits of medicinal marijuana. It is my opinion, much more needs to be done in the way of patient access and decriminalization. However, this bill is a huge step in the right direction. I applaud all responsible for this courageous bill.

Let's take a lesson from our past, prohibition does not work! Prohibition NEVER works as well as regulation and control. I strongly support this bill as well as SB2450.

Mahalo Nui Loa,

Dr Gregory Hungerford

Dr. Myron Berney, ND Lac
NaturalCancerWellness.com
Thursday, March 11th, 10:45am , Conference Room 309

SB2213_SD2—Relating to Counties; Compassionate Centers of Sale of Cannabis

May I suggest, in honor of the Hawaiian Heritage that we use the term “Pono Pakalolo” in describing our motivation on these issues along with the sincere wish that we may reduce and free beings from suffering especially the suffering of illness, physical, mental, emotional and spiritual. This is the supreme attitude of Bodhichitta, please give rise to it and listen.

In Support of SB 2213 SD 1 however there is at least one technical problem in the GET tax language would suggest a \$10 tax stamp required per oz and the standard GET on the total sale. KISS—keep it simple, don't mess with the GET it will be confusing and a veto point for the Governor, just add your additional fee like on tobacco products and alcohol by requiring a Tax Stamp, call it whatever seems suitable, make it easy to collect the revenue by collecting both you avoid GET confusion making it simpler not more complicated.

Repeal the “paraphernalia laws” in HRS 329. They have been found to be somewhat unconstitutional in other States.

When the Founding Fathers “looked out the window, what did they see?” [That's the legal question used by the Supreme Court in their decision making process.]; they saw fields and fields of their own Cannabis plantations and farms. The Founding Fathers were fully aware of Black Markets, Smuggling, Piracy, and other Crimes; The Founding Fathers did not give the Government the Right to create crime, criminal empires, drug lords or civil and social wars directed against citizens. Regulation of Interstate Commerce does not include suppression to create black markets and violent crimes. Regulation of Interstate Commerce does not include home based gardens, local farms, plants grown in Hawaii and sold in Hawaii. Interstate Commerce does not involve commerce wholly within the an individual State.

The entire marijuana laws should be repealed. But sadly that is all too much for you being totally confused by political rhetoric instead of being clear on the scientific, medical and social facts concerning effective drug policy.

Not only do we have the most expensive and least effective Health Care System on the Planet, we also have the most expensive and least effective and most socially harmful War on Drug drug policy on the Planet.

Why? All this for the benefit of the Drug lords, black markets and pharmaceutical companies. It is not for the benefit of consumers, citizens, or for reduction in crimes. Your drug policy and drug laws harm the public and support violent crimes.

Some may suggest [I did earlier] to Change use of the word marijuana to cannabis through out bill. However, the HRS 329 definition of marijuana exempts certain parts of the Cannabis plant, e.g. the fibrous stalk as being a dangerous drug. This is good since the marijuana laws use weight as a criteria in the law concerning crime and punishment. That language is probably better but the official drug is only the dried flowering parts not the leaf, stems or seeds, not the whole plant. Any changes to the language of HRS 329 should restrict the drug to the dry weight of the Cannabis flowers,

not the rubbish. The definition of marijuana in HRS 329 being only the drug part is better than using "Cannabis" which would include the whole plant instead of just the drug part.

"Marijuana" means the dried flowers of the Cannabis plant.

Do we need to bribe the government to get back our Constitutional Rights? Yes, it seems that, at this time, taxation is the key. Currently, the political and emotional confusion labeling marijuana as being a dangerous drug far outweighs the scientific, medical and social facts concerning the medical use and safety of marijuana. The drug policy should not be more socially and individually harmful than the natural God-given herb itself.

Currently drug policy causes much more and much greater harm than the personal and traditional use of the herb itself.

Jesus never said anything bad about marijuana. Neither did Buddha, Moses or Mohammed have anything bad to say about marijuana. Marijuana is a traditional indigenous medicinal herb used for food, medicine and fiber products world wide for over 5,000 years without any social or individual harm.

Please permit a technical question on language:

Is the \$30 per oz. GET in addition to or in lieu of the 4 to 5% GET on consumer products. This is unclear in the bill. Please clarify language to avoid Governor and the Dept of Taxation confusion.

The \$5,000 registration fee seems kind of steep, way over the top. What is the registration fee for sale of tobacco or beer/wine or spirits?

Marijuana when compared to tobacco and alcohol comes up safer. Marijuana does not affect judgment, coordination, or cause emotional and domestic violence; marijuana does not cause cancer, it treats both the nausea associated with chemotherapy and a non-psychoactive fraction has been shown to kill Cancer cells in the lab and in cancer patients. Population studies show that persons smoking both tobacco and marijuana have less lung cancer than tobacco smokers alone.

Guidelines that protect society from the harmful effects of beer/wine, alcohol and tobacco products would be equally effective in protecting society from the less harmful effects of pakalolo.

Pono Pakalolo!

The \$5k biannual registration would tend to select for out of state big business establishments instead of supporting the local economy, local small business and local growers.

We should support the small individual small business, the local established industry, the local farms and local institutions including farmers' markets, such as the Saturday KCC Farmers Market.

The consuming public is served by free and fair trade, competition in the marketplace is key to cost control and the improvement of products and services.

We want free and fair trade not Black Markets. Support the local growers and local markets.

The overwhelming success of local farmers' markets, such as the internationally acclaimed KCC Saturday Market speaks to this return to local agriculture and local marketing.

(4) Pay an annual registration fee of [~~\$5,000~~]100 for each county in which the compassion center conducts business; provided that of the [~~\$5,000~~]100 of each registration fee collected:

(A) [~~\$2,500~~]50 shall be deposited into the state general fund; and

(B) [~~\$2,500~~]50 shall be deposited into the general fund of the county in which the compassion center conducts business.

I'm personally not clear on why the State needs to defer to the Counties to establish "Compassion Centers" for the sale of cannabis or medical marijuana. Why not enact a Statewide plan developed by DBET with the same minimal restrictions on sales that the State has promulgated for the sale of Tobacco products. Since Tobacco is a much more dangerous drug compared to cannabis, **consumer, commercial and public safety guidelines that has served well in regulating the sale of Tobacco products would work well for the consumer, commercial and public safety guidelines concerning Cannabis and medical marijuana.**

Other bills under consideration seek to limit the involvement of the Department of Public Safety. Current Law requires registration with DPS. Requiring citizens to testify against themselves seems to be at least in the "gray" area of Constitutional Rights, the Fifth Amendment.

Furthermore, historically, there has been serious ongoing problems and corruption concerning the county liquor commission; we don't need a duplication of this public corruption on the medical use or personal adult use of cannabis products.

Better to set up a State wide model developed by DBET and allow the Counties to use their zoning powers for commercial distribution and agricultural production in farms and gardens. Public safety will be assured by following the same minimal standards for the distribution of tobacco products and alcohol.

Public Health and Safety would be best served if marijuana use were restricted similar to tobacco and alcohol.

Cannabis products do not medically, scientifically or socially present the same or similar types of behavioral or criminal problems associated with the use of alcohol products or synthetic pharmaceutical, prescription or illegal chemical drugs. Cannabis often improves behavioral and social interactions and does not impair judgment or coordination as does alcohol and synthetic drugs. Cannabis is use to reduce stress and improve behavior, patients mellow out instead of getting drunk, abusive and violent. Cannabis does not make women or men "loose" sexually or socially.

I think that one can come up with a better State wide plan but this one is OK to start the ball rolling but don't count on the counties actually getting the job done.

Mostly this bill is about taxation and leaves the structural design to the Counties. That would probably work well for the Big Island but may not effect any positive changes on other islands.

Since this is what is being offered as a first step in harmonizing the marijuana laws with patients and consumers, it is the best first step. Although clarification of the GET tax structure would be important for clear implementation.

State Cannabis Data Sheet

Medical Conditions Approved by various State Laws for Cannabis use include:
 Alzheimer's, Amyotrophic Lateral Sclerosis, Anorexia, Anxiety, Arthritis, Cancer, Crohn's disease, Chronic Pain, Epilepsy, Glaucoma, Hepatitis C, HIV/AIDS, Inflammatory bowel disease, Multiple Sclerosis, Migraines, Muscle spasms, Muscular dystrophy, Nausea or Vomiting, Pain, Post Traumatic Stress Disorder, Seizures, Stress, Weight loss or Loss of appetite.

State	Year	Useable Herb (oz)	Plants	Mature Plants	Fee
Alaska	1998	1	6	3	\$25/\$20 renewal
California	1996	8	18	18	\$33-\$66
Colorado	2000	2	6	3	\$90.00
Hawaii	2000	3	7	3	\$25.00
Maine	1999	2.5	6		0
Michigan	2008	2.5	12		\$25 (Medicare)-\$100
Montana	2004	1	6		\$25.00
Nevada	2000	1	7	3	\$165-\$192
New Jersey	2010	2	0	0	0
New Mexico	2007	6	16	4	0
Oregon	1998	24	24	6	\$20 (low inc.) -\$100
Rhode Island	2006	2.5	12		\$10 (Medicare)-\$75
Vermont	2004	2	9	2	\$50.00
Washington	1998	24	15		No registration req.

Oz	# of State permitting
1	3 [HI now]
2	3
2.5	3
3	1
5	[Hawaii pending]
6	1
8	1
24	2

Total Plants	# of State permitting
0	1
6	4
7	2 [HI now]
9	1
10	[Hawaii pending]
12	2
15	1
16	1
18	1
24	1

Mature Plants	# of States permitting
3	4 [HI]
2	1
4	1
6	1
10	[Hawaii pending]
18	1

Big Island of Hawaii—Adult Personal Use
 Lowest level of law enforcement
 24 plants per adult

The Department [of Public Safety] feels that the amendments being proposed by Senate Bill 2213 is premature and that Federal law has not changed and that Federal law enforcement agencies are still making arrest and conducting raids these so called state registered medical marijuana dispensaries.

However, **We must defend State's Rights and protect the citizens of Hawaii from Constitutional violations beyond the limitations of "regulation of interstate commerce" and Privacy, as well as, indigenous beliefs and practices held worldwide prior to the Harrison Drug Act of 1924.**

August of 2009, Hawaii's Legislative Reference Bureau research Attorney Lance Ching, fall short of presenting meaningful and successful suggestions for the Legislature. I would respectfully submit for your consideration that **the Tobacco and Alcohol legal models, since they are successful in controlling and protecting the public and social use of these more dangerous drugs, then should be equally successful in controlling and protecting the public and social use of these less dangerous drugs.**

KISS-Keep it Simple—now isn't that a easy and acceptable guideline for the Legislature? Coyp what

is already acceptable and successful.

The big lie is that although it is true that "No state has the power to grant its citizens the right to violate federal law.", Federal Law stops at interstate commerce. Commerce wholly within the State of Hawaii is not regulated by the Federal Constitutional Powers. The Right of Privacy retains this right not granted to the federal government.

The AG's of the various States need to stake out their position prior to the Supreme Court rulings. FDA has been consistently demonstrated to be corrupt.

Good Law prevents crime; bad law makes crime. Current marijuana laws make things worse all around. Why do you want to destroy people's lives with marijuana laws?

Legal Point of Sale and Legal Production facilities, free competition in the marketplace, immediately eliminates the Black Market and drug related crimes. Bad drug policy harms society turning normal law abiding citizens into criminals to exercise their innate human rights to God given herbs and medicines. All for the benefit of the Big Pharmaceutical Drug Industry and the Black Market Drug Barons and gangs.

The report found that in California marijuana dispensaries are commonly large moneymaking enterprises that will sell marijuana to most anyone who produces a physician's written recommendation for its medical use. Yes, that the Law and that's the Constitutional Right.

Free Competition eliminates "ties to organized criminal gangs," And will "foster large [legal] grow operations," But will control "multimillion-dollar profit centers." Free Competition and adequate supply will eliminate crimes directed against patients, caregivers, growers, Point of Sale operations. Good Law Good People

Stop the Criminal Drug Empires—Eliminate the Black Markets, support local business, protect patients, PROMOTE AND PROTECT THE PUBLIC HEALTH!

From: Richard S. Miller [rmiller@aya.yale.edu]
Sent: Wednesday, March 10, 2010 1:48 PM
To: PBStestimony
Subject: Compassion Centers SB 2213. SD2 Relating to Counties

Richard S. Miller
Professor of Law, Emeritus

E-mail: rmiller@aya.yale.edu
Tel.: (808) 254-1796

To:
Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair and Members of the Committee on Public Safety

To:
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and Members of the Committee on Health

Re: SB 2213, SD2 Relating to Counties
Hearing: Thursday, March 11, 2010, 10:45 a.m, Room 309 (3 copies)
Position: Support

This bill allows each county to license medical marijuana dispensaries

Passage of this bill would fill an important void and eliminate an anomaly in our current medical marijuana law, a measure with important compassionate purposes. Under current law, medical marijuana must be grown either by the certified patient or his or her registered caregiver. Unfortunately, growing marijuana for medical use is a difficult task which exceeds the ability and/or the growing capacity of many caregivers and certified patients. This forces many of them either to seek and purchase marijuana on the black market, which unfortunately removes them from the protection of the law, or forego the important benefits of marijuana use for debilitating conditions.

Lest there be any doubt about the potentially beneficial effects of medical marijuana, I reproduce here a chart with the breakdown of Peer-reviewed studies which demonstrate that most of that research has been pro-medical marijuana. The chart may be found on the web site of ProCon.org, a non-partisan, non-profit organization that seeks to present balanced and accurate information about a wide variety of controversial topics. (ProCon.org says that its information has now been used by 1,009 schools in 26 countries and all 50 US states. They "are thrilled to have 176 elementary and middle schools, 435 high schools, and 398 colleges and universities using the free nonpartisan research we provide to stimulate critical thinking.")

65 Peer-Reviewed Studies on Marijuana

Medical Studies Involving Cannabis and Cannabis Extracts (1990 - 2009)

Studies are listed as Pro, Con, or Not
Clearly Pro or Con, based on their
conclusions regarding cannabis'
potential medical benefit. Extracts,

such as Sativex, are derived directly from the plant, and are not synthetically created.

It is my understanding that a major reason why the total number of such studies is not higher is that for many years the U.S. government has prevented would-be qualified researchers from acquiring medical marijuana of a quality necessary for successful studies.

Type of Study	# of studies	% of total	# of studies	% of total	# of studies	% of total	# of studies	% of total
I. Double-Blind Random Studies	8	47.06%	7	41.18%	2	11.76%	17	100%
II. Human Studies	17	38.64%	15	34.09%	12	27.27%	44	100%
III. Animal Studies	4	100%	0	0%	0	0%	4	100%
TOTALS	29	44.61%	22	33.85%	14	21.54%	65	100%

From the point of view of fairness and compassion, making medical marijuana available to certified patients or their caregivers through licensed and regulated dispensaries, as provided in SB2213, SD1, will eliminate a serious and frustrating situation which has, in all too many cases, undermined the therapeutic purposes of the medical marijuana law.

Allowing counties to charge up to \$30 per ounce GET for medical marijuana would not only fund the program, but would be likely help to finance other programs that are today suffering because of adverse economic conditions.

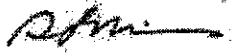
However, I do recommend that the following section (3) be amended to place a reasonable limit on the number of years (I recommend not more than two years) that records on marijuana purchases from dispensaries may be retained. There is no fair or appropriate reason for retaining such records for a longer period, and to do so might well discourage certified patients and their caregivers from purchasing needed medical marijuana.

“(3) That the compassion center make a record, to be kept for not less than two years following the sale, of every sale of marijuana or marijuana plant with the name, address, and patient identification number of the purchaser as appears on the written

certification, and other identifying information as may be required by ordinance;"

Thank you for considering my testimony.

With much Aloha,



Richard S. Miller

The views expressed here are my personal views. They are not necessarily the views of UH or its Law School.

Richard S. Miller, Prof. of Law, Emer. and former Dean,

E-mail: rmiller@aya.yale.edu

Phone: 808-254-1796

From: Aloha Da Kine [hiloprosocial@hotmail.com]
Sent: Tuesday, March 09, 2010 10:11 AM
To: PBStestimony
Subject: \$11,000,000 TAX

Committee on Public Safety - Chair Hanohano
Committee on Health - Chair Yamane
Hearing date: March 11, 2010 at 10:45am
SB 2213 SD 2 - Relating to Counties
Position: STRONG SUPPORT

Honorable Hanohano/Yamane;

\$11,000,000 per year will go into the General Fund through the \$30/ounce tax plus excise tax on legal medicinal cannabis. This is based on 2 ounces per month per patient, with only twice the current number of patients (currently we have 5,000 patients or so; 10,000 patients will definitely be registered with the program once the dispensary system is approved). The assumed cost per ounce is \$350.

In addition to this revenue, the estimated value of the cannabis (\$76,000,000) will be legitimate and regulated, and will no longer be in the underground, illegal economy. When this amount of money is removed from the criminal underground there will be a vast shift of value away from other illegal activities. The overall public safety and public health will vastly improve.

From health, public safety and financial responsibility perspectives, the medicinal cannabis laws found in SB 2141 related to changes in the medicinal cannabis law and SB 2213 relating to dispensary licensing are simply the right things to do.

I live in Puna and interface with thousands of medicinal cannabis patients every year. I helped the peaceful Sky Alliance with its effort to get the Lowest Law Enforcement Priority of Cannabis ordinance approved by the voters.

From a Democratic, will-of-the-people perspective, polls consistently show that greater than 60% of the electorate support medicinal cannabis. It is wise, from a voting-public perspective, to support this issue.

Sincerely,

Matthew Brittain, LCSW
Licensed Clinical Social Worker
808-934-7566

March 9, 2010

House Committee on Public Safety– Chair Hanohano
House Committee on Health– Chair Yamane

Hearing: March 11, 2010 at 10:45am

SB 2213 SD 2 Relating to Counties – licensing of medical marijuana dispensaries

Position: SUPPORT

I am a medical marijuana patient residing on the Big Island and a member of Americans for Safe Access.

I do support licensing of compassion centers to distribute medical marijuana to the more than 5,000 patients living in Hawai'i. For a variety of reasons, some patients are unable to grow their own medicine, and having a safe place to go, where good quality medicine is available at a fair price is essential.

I want to point out that a tax on medical marijuana will impose a hardship on patients who are on disability or Social Security. My Lipitor is covered by insurance, and therefore costs me only \$20 a month. My medical marijuana is not covered by insurance, and costs me about \$300-400. The tax on one ounce would add about \$45 to my monthly cost. But, many patients smoke two or three ounces a month, which could add up to \$1600 in additional expenses per year. Without a substantial drop in the price of the medicine, this would be prohibitive.

I would like to take issue with some of the testimony in Senate hearings on this bill submitted by Hawai'i County Police Chief Kubojiri. He writes that dispensaries make baked goods and candies that could entice children. His implication is that expanding the medical marijuana program will lead to more drugs ending up in schools. The opposite in fact seems to be true.

Mitch Earleywine, PhD, Associate Professor of Psychology at the State University of New York at Albany, and Karen O'Keefe, JD, Attorney and Legislative Analyst for the Marijuana Policy Project, stated in their Sep. 2005 report "Marijuana Use by Young People: The Impact Of State Medical Marijuana Laws":

"Nine years after the passage of the nation's first state medical marijuana law, California's Prop. 215, a considerable body of data shows that no state with a medical marijuana law has experienced an increase in youth marijuana use since their law's enactment. All have reported overall decreases of more than the national average decreases – exceeding 50% in some age groups – strongly suggesting that enactment of state medical marijuana laws does not increase teen marijuana use...."

When states consider proposals to allow the medical use of marijuana under state law, the concern often arises that such laws might 'send the wrong message' and therefore cause an increase in marijuana use among young people.

The available evidence strongly suggests that this hypothesis is incorrect and that enactment of state medical marijuana laws has not increased adolescent marijuana use."

And, this table came from the website ProCon.org:

Percentage of Teen Marijuana Use in 10 States with Legal Medical Marijuana

Ten states had legalized medical marijuana by 2006; seven of those ten passed the laws between 1999 and 2006, the years for which the teen use data are available for all states.

Four of the seven states that passed medical marijuana laws between 1999 and 2006 had a decrease in average teen marijuana use the year after the law was passed. The other three states showed an increase the year after the law was passed. Six of the seven states had a lower percentage of teen use in 2006 than the year in which they legalized medical marijuana.

Eight of the ten states that had legalized medical marijuana as of 2006 had a lower percentage of teen use in 2006 than in 1999, while the other two ended with higher average teen use percentages in 2006 than in 1999.

Average Past Month Teen Marijuana Use (%) in States with Legal Medical Marijuana 1999-2006									
State (year legalized)	1999	2000	2001	2002	2003	2004	2005	2006	↓ ↑ (1999-2006)
Alaska (1999)	10.40	8.65	9.88	9.44	11.08	12.02	9.71	8.26	↓ (-2.14%)
California (1996)	7.70	7.50	8.16	7.60	7.66	8.52	7.50	6.51	↓ (-1.19%)
Colorado (2000)	10.30	10.80	10.96	9.87	9.82	9.83	9.24	7.44	↓ (-2.86%)
Hawaii (2000)	8.30	8.72	9.32	9.30	10.23	9.71	7.61	7.04	↓ (-1.26%)
Maine (1999)	7.20	9.25	11.12	9.60	10.56	11.69	12.27	10.99	↑ (+3.79%)
Montana (2004)	11.40	9.26	9.32	11.64	12.07	10.00	9.50	10.56	↓ (-0.84%)
Nevada (2000)	11.60	9.54	9.32	11.24	9.58	7.82	6.98	7.57	↓ (-1.03%)
Oregon (1998)	9.60	9.39	9.07	8.72	9.31	9.74	9.30	8.36	↓ (-1.24%)
Vermont (2004)	8.40	10.62	13.20	13.31	13.32	11.11	10.54	10.08	↑ (-1.68%)
Washington (1996)	9.90	8.70	9.56	8.93	9.11	7.98	6.83	7.70	↓ (-2.20%)

Notes:

1. ProCon.org created the above table using data for past month teen marijuana use from the Substance Abuse and Mental Health Services Administration (SAMHSA) National Household Surveys on Drug Abuse (NHSDA), 1999-2006.

Finally, if the Police are so worried about "diversion" of medicine from patients to others, why not work with patients to implement safe guards and to make the procedures clearly defined? Police Chief Kubojiri highlights the difficulties in Southern California with dispensaries. The problems there were a result of a lack of regulations. Oakland and Berkeley have a limited number of licensed dispensaries, which conform to specific rules. There was cooperation between the dispensaries and the local governments, which enabled them to successfully enact laws that are proving to be effective.

On behalf of the more than 5,000 patients whose pain and suffering are eased through the medical marijuana program in the state of Hawai'i I urge you to pass this bill.

Mahalo

Matthew Rifkin

Hilo, HI

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 1:01 PM
To: PBStestimony
Cc: haikulani@gmail.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Mike Foley
Organization: Individual
Address:
Phone:
E-mail: haikulani@gmail.com
Submitted on: 3/9/2010

Comments:

My uncle is a patient. Dispensaries are necessary so that patients like him will have a safe, reliable source of medicine. Keep my uncle safe!

Date: March 9, 2010

To: Committee on Public Safety

From: Marilyn Mick

Re: SB 2213 Relating to Counties

Hearing: Thursday, March 11, 2010

10:45am, Conf Rm 309, State Capitol, 415 S. Beretania St.

Position: Support

I am in support of this bill, which would allow each county to establish medical marijuana dispensaries and makes dispensaries subject to the general excise tax.

Patients need a safe and legal and reliable source for their medicine. Current law allows patients to grow their own plants yet many patients are too sick or do not have the time or space to provide the care needed for their plants to grow to maturity. And the law is silent as to where patients should acquire seeds or clones to start their own supply. The Dept Of Public Safety has said that the only legal transfer of marijuana is between a registered patient and that patient's caregiver. Caregivers are difficult to find and they are currently limited to assisting only one patient. Thus the obvious need for dispensaries.

I realize it is difficult to find general agreement on taxing medical marijuana. While it may be appropriate to collect fees from the dispensary as a business, medical marijuana patients should not be singled out for excise tax when other medical goods and services are not. Medical marijuana is not covered by health insurance. Many patients suffer from chronic illnesses and should not be burdened with additional expenses.

I urge the committee to pass this measure. Thank you for the opportunity to testify.

Sincerely, Marilyn Mick

PO Box 15158

Honolulu, HI 96830

From: Alfred [wyliea001@hawaii.rr.com]
Sent: Tuesday, March 09, 2010 1:56 PM
To: PBStestimony
Subject: Dispensery

To Whom it concerns,

My name is Alfred L Wylie MA, MFCC ret., OI and I am a 100% disabled Vietnam era veteran due to scars. Also, I have my medical cannabis card.

I wish to comment on SB 2213. First, I absolutely feel that the section that recognizes registration certificates or cards from out of state legal medical cannabis users is an excellent idea from an economic point of view. It will probably increase the willingness of legal out of state medical cannabis users to come to Hawaii for vacation. And we all know how much we need the tourist industry in these hard economic times.

Second, I support dispensers both as a tax revenue for the states and counties and as a place for licensed cannabis users to buy their medicine, clones and seeds. Although I grow my own it has been difficult and at times impossible to produce enough for my own use. This is due to bad weather, spider mites, bud rot, worms, fungus etc. As a consequence I have often resorted to black market sources. I feel that a licensed individual should have a place where they can procure their medical cannabis other than the black market with its stresses. I hate having to sneak around to try to buy illegal buds. Actually, I feel somewhat ashamed of the state because as a man who will be seventy years old on my next birthday and a 100% disabled veteran who shed a lot of blood for his country, I am still treated like a second class citizen concerning medical cannabis. Also, as an educated man I know the alcohol industry is the main opponent of cannabis.

Sincerely,

Alfred

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 3:06 PM
To: PBStestimony
Cc: scharfjscharf@yahoo.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Jay Scharf
Organization: Individual
Address: P.O. Box 10660 Honolulu, Hawaii
Phone: 383-0833
E-mail: scharfjscharf@yahoo.com
Submitted on: 3/9/2010

Comments:

I've had arthritis since I was 12 years old. From prescriptions of NSAIDS to narcotics, there is nothing as good as medical marijuana for treating my chronic condition, and it's wonderful that we have our medical marijuana law in Hawaii.

It is now time to go the next step and make access to this obviously effective medicine safe and reasonable.

Please follow up on the Senate's first step to making access safe. Vote yes.

Mahalo, Jay Scharf

From: Tom Liberty [konaliberty@gmail.com]
Sent: Tuesday, March 09, 2010 3:34 PM
To: PBStestimony
Subject: Re: SB 2213, SD2 Relating to Counties

To:
Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair and
Members of the Committee on Public Safety

To:
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and
Members of the Committee on Health

Re: SB 2213, SD2 Relating to Counties
Hearing: Thursday, March 11, 2010, 10:45 a.m, Room 309 (3 copies)
Position: Support

I am in support of SB 2213 regarding the compassion centers, visitors access and fair taxation as proposed. I have been a resident of Hawaii for over 9 years and have been able to obtain (medical) marijuana.

I believe that there should be compassion centers that would have available medicine, I would not have the fear of "getting caught" and in legal trouble. The possibility of having medicine readily available would "insure" a continuous supply which has been problematic in the past. My lumbar area of my back is severely worn from 10 plus years of truck driving. This was discovered 26 years ago. I participated in chiropractic care with massages and therapy gyms to allow me to handle my constant pain and discomfort. I am able to live my life for the past 26 years with marijuana as the ONLY medicine I have used for my injuries. This is testament to the benefit of medical marijuana and the need for "a decent access to a selection of medicine with a continuous supply. I am thankful that I was recommended marijuana by a friend some 26 years ago.. Without it, I would have been "using" prescription drugs for that same time.. Now that would have been addiction..

I am 120% in support of this bill SB 2213...

--
Aloha,
Tom Liberty
808-333-4003

From: D M [dalefromhi@msn.com]
Sent: Tuesday, March 09, 2010 5:28 PM
To: PBStestimony
Subject: Marijuana Bills

Aloha,
We need to pass all the marijuana bills. I'm a quad and I use Medical marijuana.
Mahalo Dale Marczak.

From: Bert Bautista [bjbautista26@gmail.com]
Sent: Tuesday, March 09, 2010 6:44 PM
To: PBStestimony
Subject: SB2213

support

I need a reliable resource to purchase my medicine. It's very hard for me to buy it on streets.

Aloha,
Supporter

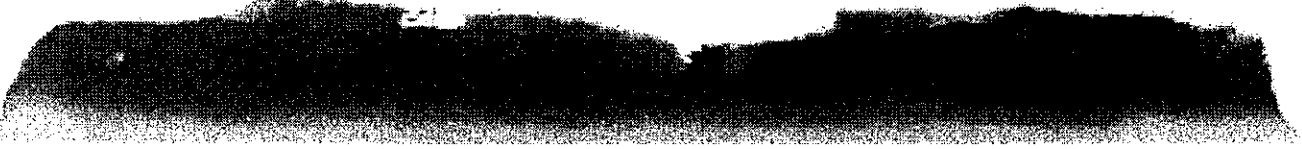
From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 7:14 PM
To: PBStestimony
Cc: anakalena@aol.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Angelica Davis
Organization: Individual
Address: 851 S Kihei Rd #H120 Kihei, HI
Phone: 8084636273
E-mail: anakalena@aol.com
Submitted on: 3/9/2010

Comments:

From: Luna C [manifestyourreality@yahoo.com]
Sent: Tuesday, March 09, 2010 8:04 PM
To: PBStestimony
Subject: hearing the med mj bill
Attachments: --static--bamboo_c.gif



Just a quick note urging you to hear the proposed medical marijuana bills and pass positive change that make life a little easier for patients, and will pave the way for economic and social change.
Thank you!

Warmest aloha!

Luna C

www.myspace.com/IntrinsicImages

and find Intrinsic Images on facebook!



From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 10:28 PM
To: PBStestimony
Cc: Bjneal@Hawaii.edu
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Brent neal
Organization: Individual
Address: Po box 7530 Hilo, HI.
Phone: 808-557-4009
E-mail: Bjneal@Hawaii.edu
Submitted on: 3/9/2010

Comments:
Please help us get the proper Rx we so badly need. Thank you for you time.
Aloha,
Brent Neal

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 10:30 PM
To: PBStestimony
Cc: Bigbucks420@yahoo.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Jeremy Nickle
Organization: Individual
Address:
Phone: 8083587174
E-mail: Bigbucks420@yahoo.com
Submitted on: 3/9/2010

Comments:

Please give us a opportunity to serve the public are centers are needed. This is what the people want, and tax them. I think the tax is to low. 50% and end furlough Fridays with the money.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 09, 2010 10:46 PM
To: PBStestimony
Cc: Brittneal@Live.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Brittany neal
Organization: Individual
Address: Po box 7530 Hilo, HI.
Phone: 808-557-6052
E-mail: Brittneal@Live.com
Submitted on: 3/9/2010

Comments:

Please help us get the proper Rx we so badly need. I am to weak to grow my own, plus it is very hard to get the right strains for my condition . I need 3 or 4 different strains thur out the day, night and while trying to sleep, plus the mold problem is a bit tricky and some time loose whole crop or have to pick way too early and still with mold. Thank you for you time.

Aloha,
Brittany Neal

From: B C [divrb2000@yahoo.com]
Sent: Tuesday, March 09, 2010 10:43 PM
To: PBStestimony; PBStestimony
Subject: Testimony in Support of SB2213

Aloha,

I am urging you to support and pass SB2213 providing the counties of Hawaii the power to establish compassion centers for the dispensing of medical marijuana to qualified and registered patients.

As a patient authorized to use medical marijuana in the state of Hawaii for the last 4 years I know only too well the difficulties faced by patients with obtaining our medicine. As with many patients I am not able to grow enough medicine to provide for my medical conditions and so unfortunately I am forced to seek my medicine on the black market. I do not wish to utilize the black market and support it but because there are no legal and safe establishments in this state which can provide my medicine I have no choice. I would definitely much prefer to go to a legal establishment supported by the state. There are patients in their 70's and 80's authorized to use medical marijuana and to hear of them being forced to utilize the black market, and being ripped off or cheated, is upsetting. It's upsetting when I get ripped off or cheated. If these compassion centers existed this would no longer be a worry and there would be a drastic drop in the need for and support of the black market. This can only be viewed as a plus.

The establishment of compassion centers would also help the state by providing much needed revenues. This of course would come from the general excise tax being proposed on the sales. I personally would feel much better knowing that part of the money I'm spending on my medicine is going to help support the state rather than some black market dealers pocketbook.

The state of Hawaii has for many years supported the use of marijuana for certain medical conditions but has remained silent on how a patient can obtain his medicine. This does result in many difficulties for a patient, some as previous mentioned. It's finally time for the state to improve and expand upon it's support of medical marijuana. Many states currently allow "compassion centers" in support of medical marijuana patients and I am urging you to follow along with them and help the patients of Hawaii. We need a legal and safe environment in which to acquire our medicine and I can only hope that the state of Hawaii, and you, agree with this and that SB2213 will be passed and soon be on it's way to becoming law. It's the compassionate thing to do.

Mahalo and Aloha,
Bill Cox

From: Mark Nelson [mark@solights.com]
Sent: Tuesday, March 09, 2010 11:21 PM
To: PBStestimony
Subject: Senate Bill 2213
Attachments: Michelles letter.docx

Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair and
Members of the Committee on Public Safety

To:
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and
Members of the Committee on Health

Re: SB 2213, SD2 Relating to Counties
Hearing: Thursday, March 11, 2010, 10:45 a.m, Room 309 (3 copies)
Position: Support

Aloha, my name is Mark Nelson. I am a 35 year resident of Hawai'i. I am also a Medical Marijuana Patient & Caregiver for over 8 years.

I am in full support of the SB2213 for many reasons. The 1st would be to allow safe access for Patients, I support this with an attached written testimony from Michelle Bono who I had been her Caregiver for the last 2 years. Michelle passed away February 23rd 2010. She asked that I deliver to the initial Senate hearings on SB2213 and SB2141 her written testimony to carry forward. I gave Michelle my Eagle Scouts Honor I would.

As a long time business owner in and on Hawai'i, I fully support the \$30.00 per ounce Tax on compensation for Medical Marijuana. The State of Hawai'i is in a financial crisis, and though this Tax is not a cure for Hawaii's ill fated budget, it will ease the deficit that already overburdens the residents of Hawai'i. The jobs created from the emerging Medical Marijuana fields will help to create new growth for cottage industries that will invariably sprout up, and bring in millions more of tax base revenue for the ailing Hawai'i counties.

Mahalo for considering & hearing Senate Bill 2213.

Respectfully

Mark Nelson
Southern Lights Sales & Consulting LLC
Cloud 9 Emporium & Gifts
73-5574 Maiau ST # 5
Kailua-Kona Hi 96740
808.326.9000
www.solights.com

"Unless expressly stated in this email, nothing in this message should be regarded as a digital or electronic signature or writing."

From: MJ Bono [mailto:mioibono@gmail.com]
Sent: Tuesday, December 15, 2009 5:37 PM
To: Mark Nelson
Subject: letter

To whom it may concern:

I'd like to take a moment to address the issue of the current state of Medical Cannabis as it affects me on a highly personal level, first, a little about me. I've been a State and National Champion in drug tested bodybuilding in the late 80's and early 90's. I never took any performance enhancing products, and one of the conditions of holding a state or national title as a "Natural" bodybuilder was allowing out-of-contest drug testing - urine or hair - anytime and anyplace. I welcomed this rule as I never had any reason to worry and took it as a compliment. Years passed and I now hold multiple National Championships in Master's Track Cycling and a National Record. As a semi-pro athlete, I am responsible for adhering to all the regulations concerning the UCI (Union Cycliste Internationale) prohibited substances. Using any of the banned products, including marijuana can result in a lifetime ban from cycling.

In 2005, I was "discovered" by ex USA Olympics coach Eddie B on his vacation to Hawaii. Fast forward through many National titles to the summer of 2007, where I was on track to break multiple World Records and bring a World Championship to the United States. I juggled my athletic passion with my business, volunteering for Special Olympics, and life in Hawaii. I guess you could say I was living right, and had been in the "right place at the right time". Then I had a little stomach ache and was diagnosed with a malignant tumor on my pancreas. I had to undergo chemotherapy to first shrink the tumor enough to allow surgery. During the chemotherapy, I was prescribed pharmaceutical products for anti-nausea. The only pill that made a dent in my overall ill feeling cost \$50, and you had to take it every 6 hours. If you don't take the antiemetic exactly on time, it won't work and you are left with the possibility of vomiting and nausea for hours. On top of that, heartburn and gastric reflex were constant. Needless to say, the expensive pill didn't even work on me, and I was left with no recourse but to live with suffering until Medical Cannabis was introduced to me through a caregiver/grower. I had to learn how to use the product as I was completely naive of marijuana use, but within a few minutes of use, I was nausea free.

This brings me to the state of current affairs. First, I admit I would fail any UCI test now for marijuana use. For me to obtain any product, my caregiver/grower and I have to illegally transport, grow, and store marijuana. I would have to resort to the black market, per se, in order to obtain any Medical Cannabis if my caregiver wasn't willing to break the law. It is abhorrent to me that the people I vote into office would allow their constituents to suffer, be in pain, or put themselves in harm's way. I would ask that medical marijuana be made available to those in need through some sort of dispensary, means of delivery, or some other method to protect both parties. I don't want to be in the "wrong place at the wrong time". I wish to experience the remainder of my life in joy, performing acts of kindness, coming from my heart, and giving back to the community that gave so much to me. Please do your part in allaying pain and suffering for those in need by legalizing the means for availability, access, delivery, and distribution. I am available for any questions or discussion on this topic as I am passionate about allaying pain and suffering for those in need. Of course, please keep in mind the immediacy of this issue; I've been given less than a year to put my affairs in order. This email put me in tears. All that I wish to accomplish in my lifetime is to make the world a more tolerant, cooperative, and kind environment in which to live...or die. Once again, I am available to assist you in any way

possible. I'm incredibly pleased that the letter made it over to you, However, the journalist in me sees many areas that could've been stronger....must be that competitive nature in me. I will stress again that if my physical presence (still under 100lbs) could make an impact, hurry to set that up. In actuality, my letter should've stated I was given less than 6 weeks. Hey, what do the docs know? Shiiiiiiitt....

My love to both of you - I remain in gratitude and with love

Michelle

Fiddler on the Roof; crack me up!

Thank you,

Michelle Bono

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 5:37 AM
To: PBStestimony
Cc: somuchsteph@hotmail.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Stephanie Burrows
Organization: Individual
Address: 1750 Kalakaua Ave. Honolulu, HI 96826
Phone: (808) 256-3079
E-mail: somuchsteph@hotmail.com
Submitted on: 3/10/2010

Comments:

Allowing dispensaries would be extremely beneficial to the Hawaii state financial deficit.

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 6:37 AM
To: PBStestimony
Cc: rockett@hawaii.rr.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: Yes
Submitted by: Carlos Trahan
Organization: Individual
Address: 350 Ward Apt. 106-270
Phone: 808 9264080
E-mail: rockett@hawaii.rr.com
Submitted on: 3/10/2010

Comments:

please hear and pass SB2213 we need a place to get our medication in a safe place , we need to correct Hawaii's medical cannabis laws and create access.

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 8:02 AM
To: PBStestimony
Cc: 420isdank@gmail.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: angela starr
Organization: Individual
Address: 11-2145 omeka rd mountainview hi
Phone: 8083154440
E-mail: 420isdank@gmail.com
Submitted on: 3/10/2010

Comments:

Now that we have medical marijuana, it is our duty to provide safe access for patients to obtain this medicine. As it stands now, we say that they are allowed to have it but where are they supposed to obtain it? What about the patients who are too ill to grow it? Where are patients supposed to get seeds and plants legally to grow it? These contradictions of our laws need to be addressed and corrected.

Mahalo,
Angela Starr

From: lionel@cruzio.com
Sent: Wednesday, March 10, 2010 7:02 AM
To: PBStestimony
Cc: HLTtestimony
Subject: Please support Bills SB2213 and SB2141

Please support Bills SB2213 and SB2141. The current medical cannabis laws are inadequate.

Both Dutch Coffee Shops that have sold cannabis to adults for thirty years in the Netherlands cause no social problems, according to Dutch police and the same is true of the Compassion Centers on the mainland.

Prohibition creates the conditions where problems occur.

Intelligent, informed regulation works. Please support Bills SB2213 and SB2141.

Aloha,
Lee Eisenstein
Hawaii

Thank you for your time,

I am in support of Hawaii SB 2213. Sick people of the State of Hawaii, who lack the SPACE, SKILLS, or STRENGTH, are suffering. Having no distribution system in place for medically prescribed cannabis can be perceived as avoidance, instead of addressing this serious issue. The current consideration of SB 2213 shows an honest concern for helping those patients in need.

My name is Miles Wesley Tuttle. I have been a resident of the state of Hawaii for the past 8 years. I have spent the last 4 years researching and working directing within the Medical Marijuana Industry of Los Angeles. I witnessed and experienced the positives and negatives of this process. I owned my own business and followed all laws as that were established.

The largest problems involved with the laws concerning Los Angeles were:

1. "Compassion Center" selection – By making laws that allowed ANYONE to open a dispensary, lawmakers opened the doors for EVERYONE to open a "dispensary". EVERYONE who could find a lawyer and had the money could open a "dispensary". "Dispensaries" out number Starbucks! People with no experience or knowledge of Medicinal Cannabis opened a "dispensary". People who run ILLEGAL marijuana businesses opened a "dispensary" in order to shield themselves under general medical laws. These people opened multiple "dispensaries" and brought an element of ILLEGAL behavior, which tarnished the image and compassion for which these laws were originally intended. By holding a "Compassion Center" to the same guidelines as a Medical Clinic or Pharmacy (as opposed to a Bar or Nightclub), patients will feel safer and trust the medicine was produced with the highest standards.
2. Production – Edibles, Concentrates, Oils, etc. are all suitable methods of medication. These products as well as Clones, Seeds, Tissue Cultures, etc. need to have a specific taxes (ex. \$30 per ounce of dried Medical Cannabis). The "Suppliers" of all of these medical products should be inspected and given a grade by the "Health Inspector", like a restaurant, for the Health and Safety of the Patients.

There were of course many other problems encountered and solutions achieved, however these two caused the greatest concerns. By having too many "questionable" compassion centers, it makes for a difficult situation when law enforcement needs to decipher what is the distribution of a legally prescribed medicine and what is ILLEGAL.

I believe that this law is necessary. Establishing specific regulations and guideline pertaining to these laws can possibly help to avoid the obstacles encountered by other state attempting to assist their sick patients in obtaining LEGALLY prescribed medicines.

And the taxes will help the State and Local Economies.

Thank you for your time,

Miles Wesley Tuttle

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 9:12 AM
To: PBStestimony
Cc: diane@dmillerhawaii.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: diane miller
Organization: Individual
Address: 304 Kaiolohia Kihei, Maui
Phone: 808-757-2616
E-mail: diane@dmillerhawaii.com
Submitted on: 3/10/2010

Comments:

Dear Sirs/Madam:

I am begging you to please pass SB2213 and allow medical marijuana dispensaries. I am a 51 year old woman with a debilitating and painful illness and marijuana is the only medication that allows me to function. Without Marijuana the pain and nausea are overwhelming. I am not able to grow marijuana myself and the anxiety and stress of trying to purchase it illegally are unbearable. I don't want to be a criminal and I don't want to live in pain everyday. Please help me. I am begging you.

Thank you,
Diane Miller
304 Kaiolohia
Maui, HI 96753

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 10:01 AM
To: PBStestimony
Cc: christopherallenwerner@yahoo.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Chris Werner
Organization: Individual
Address: po box 6866 Ocean View
Phone: 8089298489
E-mail: christopherallenwerner@yahoo.com Submitted on: 3/10/2010

Comments:

To Committee on Public Safety - Chair Hanohano Committee on Health - Chair Yamane,

I would like to express my support for SB 2213 SD 2 - Relating to Counties Compassion Centers and I urge you to support this bill as well. This bill needs to be passed.

It is of great urgency that medical marijuana patients in this state have safe and legal access to their medicine when they need it without having to depend on gardening it themselves or having a single caregiver do it and risk violent theft in the act. Dispensaries and collective gardens are necessary because people who are sick and dying are in desperate need of safe, legal, and reliable source of their medicine. Medical patients should not be forced to go to street drug pushers to secure a legal medicine for themselves, risking again the threat of violent theft. The American Medical Association, American Academy of Family Physicians, American Nurses Association, American Public Health Association all have recognized the values of medical marijuana and passage of this bill will only ensure that this medicine stays as medicine in the hands of those who need it and are legally allowed to possess it rather supporting and furthering criminal enterprises within the state by forcing legal patients to go to the black market for their medicine.

Again please support this bill,

Chris Werner
Hawaiian Ocean View Estates, HI

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 10:04 AM
To: PBStestimony
Cc: watsonblake8@gmail.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Blake Watson
Organization: Individual
Address: Lot 144 Liela rd. Glenwood, HI
Phone: (808) 315-9222
E-mail: watsonblake8@gmail.com
Submitted on: 3/10/2010

Comments:

Aloha! Please support this bill, SB 2213. It would provide a much needed method for patients to have safe access to their medicine; as it is now, patients must break the law in order to follow the law, which is inhumane and is causing corruption in our system. Also, Church's like our that provide for the gap in the law out of compassion for the patients will no longer have to get arrested for doing a good deed (as what has happened to me), and they will be able to provide legal medicine to these dispensaries more clearly. This should also be considered a possible new crop in our State's economy, adding to the long list of valuable diversified crops that farmers can grow.

Thank you for listening.

Blake Watson
First Hawaiian Church of the Holy Smoke
...and farmer in Hamakua

From: Wolf Braun [wolf.bear.braun@gmail.com]
Sent: Wednesday, March 10, 2010 10:10 AM
To: PBStestimony
Subject: SB2213, Relating to Counties

TO:
Representative Faye Hanonano, Chair
Representative Henry Aquino, Vice Chair and
Members of the Cpmmittee on Public Safety

To: Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and
Members of the Committee on Health

Honorable Representatives:

I would like to submit the following testimony regarding Senate Bill 2213, relating to county determination on Cannabis (marajuana) dispensaries. This bill allows those patients who are not able to grow their own medicine and are unable to find a caregiver, to acquire their cannabis from a safe reliable source. No longer will I have to find some street dealer who will sell me questionable quality at an outrageous price. I also see that visitors from other states who are licensed by their home state for medical cannabis to acquire at local dispensaries.

I would also like to point out that in these times of economic disruption a new source of revenue for both the State and Counties is a positive thing. While as a licensed cannabis patient, I do not relish paying additional taxes, I would rather see the reduction in government services such as Furlough Fridays at the schools and in government offices restored to their previous levels. If by taxing my medicine, the State and County budgets can be balanced, I say tax away! I would close by thanking you for consideration of this testamony.

Wolf Daniel Braun
P. O. Box 1273
Pahoa Hi 96778
808-895-4383
wolf.bear.braun@gmail.com

From: Sarah Taylor [peacepurpose@yahoo.com]
Sent: Wednesday, March 10, 2010 11:10 AM
To: PBStestimony
Cc: Sarah Taylor
Subject: Testimony for sb 2213 sd2 dispensary
Attachments: The Case of Paul Frontier.doc

Dear Sir or Madam;

Please read 'The case of Paul Frontier' attached. As the author and owner of the copyright you have my permission to print or copy this for the purpose of getting dispensaries in Hawaii.

Furthermore, I am a resident and homeowner in the state of Hawaii. I also have an office in Portland Oregon. What happens when a patient cant buy marijuana is that they are made vulnerable to the following crimes:

In Oregon for example; Growers are ripping off patients. They grow the marijuana and when it is ready, given their own financial crisis, they sell the marijuana which belongs to the patient. In addition, Patients are ripping off growers because they can go to the police and tell them that the plants at the growers site are theirs --- even if some of the plants are for another patient. The police do not know the difference so a patient can claim that the plant with the biggest buds is theirs and the police will allow the patient to take it.

Also in Oregon, where physician assisted suicide is legal, caregivers are getting post traumatic stress as they have many patients who die on them.

Furthermore patients are not allowed to pay cash, must buy lights and equipment for the growers. The whole system makes patients vulnerable. It is like a failed experiment in national socialism. No other farmers in any other industry are prevented from selling their farm products.

Finally, allowing patients with permits to buy marijuana will increase tourism in Hawaii as people with permits vacation where they are safe to use and buy their medicine. Hawaii is so broke, allowing farmers to grow marijuana, to sell marijuana world wide, and to pay taxes could turn our economy around in months!

Thank you for your assistance in correcting this situation!

Sarah Taylor, Owner Brave Ventures

peacepurpose@yahoo.com
(808)756-8225

The Case of Paul Frontier

(name changed for protection) by Sarah Taylor ©2/20/2010

Paul's case is important for taxpayers and legislators alike. It is a worst-case nightmare, exemplifying politics over people; and demonstrating the treacherous impact our conflicting laws have on the brave men and women who sacrifice their lives for us.

President Obama has asked the United States Department of Justice (USDOJ) to issue a memorandum to provide clarification and guidance to federal prosecutors in states that have authorized the medical use of marijuana (THC). This memo however, does not address the most pressing issues for example:

- Current Drug testing for marijuana is NOT scientifically accurate to time and date.
- Feds and States do not address 'off duty' marijuana use for our injured troops, firefighters and police, civil servants and citizens.
- Ramifications of random and scheduled drug testing on the job, given inaccuracy of current available marijuana testing, leads to horrific loss of rights, income, pension, insurance, property (both real and personal) and can cause civil servants to go on welfare, and;
- Politics of marijuana between and amongst big pharmaceutical companies, insurance companies, the FDA, cities, counties, states, feds, unions, foreign relations and treaties affect legislation.
- Failure to allow patients (with pharmaceutical drug intolerance) who have a state Marijuana permit, to purchase it anywhere in the US they travel, or buy it on-line, from Canada, or otherwise, (like other drugs approved by the FDA) is in fact a discrimination.
- Laws and penalties favor patients using pharmaceutical drugs over those patients using Marijuana. We therefore single out a certain segment of the population just as we continue to do in our justice system between Cocaine and Crack.

Are we just pretending to have equal rights and equal protection under the law? The problem with our heroes using prescribed marijuana or being prevented from using prescribed (or self prescribed) marijuana for treatment of medical conditions, is that marijuana drug testing science cannot tell if you smoked or ingested it today, on the job, after work or on holiday 3 weeks ago. That's how inaccurate testing science is for THC in 2010. You may have smoked a joint for an aching back, while on vacation, 20 days before the test, in a country where it was legal. You may have ingested it from a traditional Chinese herb tea mixture from your herbalist or acupuncturist. This is why current testing and resulting consequences from positive THC tests are flawed and do not determine mental status change or if we are "under the influence." Here is where, for a person with a legal medical marijuana permit, given by a doctor who does not want to lose their license, given a drug test which is grossly inaccurate, a sobriety test could be put into place (e.g. eye/ hand/mind/body response time, physical agility, alertness etc).

Some of the things I wonder is: would we rather have our injured troops, firefighters and coast guard on vicadin, hydrochodone, morphine, oxycontyn (oxycodone) and alcohol for their pain, spasms, nausea during chemotherapy, depression and post traumatic stress? Do we care countrymen and women that those who protected us, saved our lives and still keep us safe are being dishonorably discharged and stripped of their rank and medals when they smoke a joint rather than take a pill?

Frankly, I want to know, if the guy in charge of the button which could send us all into nuclear war is on antidepressants or has asthma and is on steroids. Do we really want someone who is having an arthritic flare, or an asthma attack on 10-30 mil of prednisone (a day) in charge of a war or a button, that if pushed, could send us all into nuclear hell?

From: Brian Shaughnessy [attybrian@gmail.com]
Sent: Wednesday, March 10, 2010 12:49 PM
To: PBStestimony
Cc: Rep. Marcus Oshiro; Rep. Karl Rhoads; Rep. Joe Bertram III; Rep. Calvin Say
Subject: SB 2213, SD2 Relating to medical cannabis and Hawaii Counties -- SUPPORT

Representative Faye Hanohano, Chair

Representative Henry Aquino, Vice Chair and

Members of the Committee on Public Safety

&

Representative Ryan Yamane, Chair

Representative Scott Nishimoto, Vice Chair and

Members of the Committee on Health

Representatives:

1. Position: Support

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CANNABIS BILL TESTIMONY

In 1983 I awoke from surgery paralyzed – never having been warned of the possibility. Within a few days of that unending, waking nightmare, I began to experience muscle spasms that would begin in my hip and shoot BOTH down my leg AND up to my chest. These spasms wracked my body and knock the breath out of me. Twenty-seven years

later, these continue and, in bed, my leg will convulse and torment me until someone comes to stop it.

Doctors gave me drugs that either didn't work, made me anxious or put me to sleep. The rehabilitation nurses – perhaps more caring, concerned, connected and compassionate than their superiors – hinted that cannabis helped some.

They didn't call it that, but I will because it deserves the respect of a drug that alleviates the bit of hell I just described, alleviates pain, makes the cancer patient not just comfortable but hungry and grows out of the ground. Or in water.

I am an attorney and a papered and credentialed artist. Did pot **make** me go back to school, earn my masters, start a theatre company for performers with disabilities, graduate law school, get married, write a book and have a son? It made it possible without having to endure the unending spasms certainly didn't **stop** me. It **did not** suck motivation out of me.

Did this medicine lead me cocaine, heroine or crystal- meth? Never.

So, let's dismiss all that fiction right now because I'm telling you, it just ain't so.

In the last year I've devoted a lot of time to learning the laws nationally regarding cannabis law, production, systems of provision and the various strains and concentrates and been certified... in the field

I'm ready to turn my attentions to providing what has yet to be provided to Hawaii's suffering. I support this bill. Please allow an on-line collective that will deliver the medicine to Hawaii's most desperate patients and be aware the glut of dispensaries in California.

--
PS -- See "me" on David Letterman and get my book at www.squeakywheelbook.com
Brian Shaughnessy, Esq.
author of

THE SQUEAKY WHEEL --
An Unauthorized Autobiography
808-277-5917
www.squeakywheelbook.com

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 12:49 PM
To: PBStestimony
Cc: shawnjamesleavey@gmail.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: No
Submitted by: Shawn James Leavey
Organization: Individual
Address: Honokaa, HI
Phone:
E-mail: shawnjamesleavey@gmail.com
Submitted on: 3/10/2010

Comments:

Chair Hanohano, Chair Yamane and members of the committees,

Please pass this bill. 1. This bill would allow for a new stream of tax revenue. 2. Patients wouldn't have to go to the black market if they cannot grow for themselves. 3. Its up to the counties to decide -- homerule for them and minimal political risk for you.

mahalo!
Shawn James Leavey

From: stuart@isseiproductions.com
Sent: Wednesday, March 10, 2010 12:25 PM
To: PBStestimony
Subject: SB 2213, SD2 Relating to Counties

To:
Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair and Members of the Committee on Public Safety

To:
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and Members of the Committee on Health

Re: SB 2213, SD2 Relating to Counties
Hearing: Thursday, March 11, 2010, 10:45 a.m, Room 309 (3 copies)

Position: Support

aloha

Please support SB2213 and put an end to this ridiculous persecution.
While we cannot undo the past injustices of this mindless inquisition, you are in a position to bring some sanity to a crazy situation.

The ignorant fears that haunt this issue should never be more powerful than compassion and care for the many patients who suffer and cannot find safe access to medicine. Please do the right thing and help Hawaii's most vulnerable people.

mahalo
Stuart Hirotsu
808 280-5424

From: Cheryl Nelson [cheryl@solights.com]
Sent: Wednesday, March 10, 2010 1:05 PM
To: PBStestimony
Subject: FW: Senate Bill 2213

Representative Faye Hanohano, Chair
Representative Henry Aquino, Vice Chair and
Members of the Committee on Public Safety

To:
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair and
Members of the Committee on Health

Re: SB 2213, SD2 Relating to Counties
Hearing: Thursday, March 11, 2010, 10:45 a.m., Room 309 (3 copies)
Position: Support

Aloha, my name is Cheryl Nelson. I am a 10+ year resident of Hawai'i. I am also a Medical Marijuana Patient and have been for the last 5 years. I am in full support of the SB2213 for several reasons and I encourage you to review my testimony with an open mind. I feel the #1 reason for supporting this bill and approving Licensing of Medical Marijuana dispensaries would be to allow safe access for Medical Marijuana Patients to obtain their medicines. The importance of having safe access is urgent. I also believe that the tax revenue that would be generated for supporting SB2213 will help the State of Hawaii with its' financial situation, which is very bleak to say the least. I fully support the \$30.00 per ounce Tax on compensation for Medical Marijuana. I believe by supporting this bill it will aid in alleviating a portion of our states deficit.

Thank you for your time and consideration for Senate Bill 2213.

Respectfully,

Cheryl Nelson

From: aina campbell [sacredtrustx3@yahoo.com]
Sent: Wednesday, March 10, 2010 3:56 PM
To: PBStestimony
Subject: Testimony SB2213SD2

Aloha,

I am a medical marijuana patient due to auto accident several years ago in Volcano Hawaii. It has been an arduous experience; finding the proper health care, support systems and medicine to recuperate.

Medical marijuana relieves the gnawing pain and helps me rest through the night. I have a wonderful caregiver that has been very supportive but it has been difficult to provide sufficient amounts because of the laws on quantities allowed for a grower . Please make new laws that would give an outlet to the patient to accomodate our needs.

Mahalo nui loa,
Ina Campbell

Maureen Andrade

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 10, 2010 4:17 PM
To: PBStestimony
Cc: Aron@greenhandsofaloha.com
Subject: Testimony for SB2213 on 3/11/2010 10:45:00 AM

Testimony for PBS/HLT 3/11/2010 10:45:00 AM SB2213

Conference room: 309
Testifier position: support
Testifier will be present: Yes
Submitted by: Aron Gonsalves
Organization: Individual
Address: 2250 noah st honolulu hi
Phone: 808-520-4349
E-mail: Aron@greenhandsofaloha.com
Submitted on: 3/10/2010

Comments:

I am in strong support of bill Sb2213. Dispensaries are necessary so that patients have a safe, reliable source of medicine. As a hydroponic store owner I see people who have a hard time trying to grow there own medicine, a dispensary would make it easy for them and more cost efective. As a cultivator Of medicine I could supply a small dispensary and stay within my 10 plant limit and 50 -100 people would benifit from it.

I am all for the tax but please don't make it to high so that the price is the same as on the black market.

Mahalo for your support and hope you listen to the people

Aron Gonsalves
owner
Green Hands OF Aloha
808-520-4349