

# SB2176

**Measure Title:** RELATING TO THE HAWAII MEDICAL MARIJUANA OVERSIGHT COMMISSION.

**Report Title:** Medical Marijuana; Oversight Committee; Department of Health

**Description:** Establishes the Hawaii medical marijuana oversight committee. Requires the committee to evaluate the implementation of medical marijuana, including the impact on patients, the effectiveness of regulatory safeguards, and possible areas of expansion for the medical marijuana program. Effective January 1, 2017.

**Companion:**

**Package:** None

**Current Referral:** CPH, WAM

**Introducer(s):** ESPERO, Baker, Ruderman



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

TO: Senate Committee on Commerce, Consumer Protection and Health  
FROM: Carl Bergquist, Executive Director  
HEARING DATE: 4 February 2016, 9AM  
RE: SB2176, Relating to Hawai'i Medical Marijuana Oversight Commission, **STRONG SUPPORT**

Dear Chair Baker and Vice Chair Kidani:

The Drug Policy Forum of Hawai'i (DPFHI) **strongly supports** this measure to create an inclusive oversight committee with a broad mandate to monitor, evaluate and make recommendations regarding medical marijuana in our state. With the dawn of a medical marijuana dispensary system soon upon us, pursuant to Act 241 (2015), and then the transfer last year of the medical marijuana registry program from the confines of the Department of Public Safety to its rightful home in the Department of Health, we are entering a new era for Hawai'i's patients and all of us who work to serve them. Of overarching importance is that the registry program operates seamlessly for the patients who should then be able to either continuing growing their own medicine or as of as early 15 July 2016, buy medicine at an affordable price from a dispensary near them.

At DPFHI, we often receive input from current and potential patients, caretakers, nurses, physicians as well as those who wish to become involved in the medical marijuana dispensary system. The queries are wide-ranging, from which conditions qualify as a "debilitating condition", to where one would find a doctor to how one becomes a subcontractor. Within the limits of our 501(c) non-profit status, we do our utmost to educate and provide information. We also regularly communicate with the Department of Health, currently only regarding the registry program and not about the upcoming dispensary system. In that sense, we act as a conduit and a depository of information and queries that we try to address or pass along. The proposed committee with its numerous stakeholders would be such a forum, but on a larger, statewide scale. As such, it will serve as an irreplaceable contribution to constantly nurturing and improving a system that so many rely on to get by in their daily lives. The addition of dispensaries is welcome and long overdue, but it is another moving part that makes the committee even more crucial.

In particular, we welcome the stated goal of evaluating edible forms of medical marijuana, which for many patients is the easiest way to ingest their medicine. Finally, we would ask the committee to take a look at the similarly minded HB 2534 as it suggests the inclusion of a patient-oriented group like ours and the Hawai'i Dispensary Alliance on the committee. This would further ensure that the voices of the many patients are represented and heard.

Mahalo for the opportunity to testify.



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

**TO:** SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION & HEALTH

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

**DATE:** FEBRUARY 04, 2016, 9:00 a.m., ROOM 229

**RE:** S.B. 2176 RELATING TO THE HAWAII MEDICAL MARIJUANA OVERSIGHT COMMISSION – **IN SUPPORT**

Good morning, Chair Baker, Vice Chair Kidani, and members of the Committee. My name is Pam Lichty and I'm President of the Drug Policy Action Group (DPAG), the government affairs arm of the Drug Policy Forum of Hawaii.

DPAG supports the concept of an Oversight Commission for the State's medical marijuana program. I have chaired the state's Syringe Exchange Oversight Committee for many years and have been involved with it since its inception in 1990.

Through the years, the SEOC has monitored the implementation of the law and has frequently made recommendations based on their observations, on research, and on input from state and national experts. These recommendations have proven useful and have without exception been incorporated into the program. I believe the proposed medical marijuana commission could serve a similarly useful function.

We are pleased that the measure calls for four patient representatives, because in our view, the effectiveness of the program in serving registered patients is of paramount importance. We also support the appointment of an RN and two physicians, but would prefer to see it specified that they be knowledgeable about the nature of medical cannabis and familiar with the Hawaii program.

A similar measure in the House (HB 2534) names our sister organization, the Drug Policy Forum of Hawaii, as a member of the Commission. We would be pleased if our organization could be added here since we have been involved

with the program since it was first conceived in the late 1990s. The addition of a different community-based organization or individual knowledgeable about public health programs would, of course be desirable as well.

As to the mandate of the Commission, we are pleased to see that the issue of “timely access” to medical marijuana is listed first. We also support the evaluation of whether the program is meeting the overall needs of patients and caregivers – including education and support services.

We are glad to see there is the possibility of subcommittees to delve deeper into the many aspects of the program. In particular we’re pleased to see the issue of edible manufactured products will be included. We were disappointed to see that edibles are excluded from the initial administrative rules. I know from personal experience with relatives and colleagues that edibles with their slow and sustained onset are uniquely useful in some situations such as pain control at night to help ensure a good quality of sleep. Issues of packaging and appearance and appeal to minors are easily addressed in our view.

The effectiveness of the “current distribution system” in comparison with other states should be useful as well because we believe that the number of dispensaries on Hawaii Island in particular will prove inadequate for the projected demand. We like the provision of potential research into new qualifying conditions since this is already part of DOH’s kuleana and I’m sure they would welcome assistance with the rapidly evolving body of research.

The similar House version, asks the Commission to look at affordability issues too. This seems wise to us since patients cannot get reimbursement from insurers for these products. Some states have instituted sliding fee scales and/or special funds to improve affordability.

Mahalo for hearing this measure today, for taking our views into consideration, and for giving us the opportunity to testify.

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**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Wednesday, February 03, 2016 7:25:36 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Matthew Brittain, LCSW	Effective Change, LLC	Support	No

Comments: I speak on behalf of approximately 2,000 current medical marijuana card holders, as their medical care coordinator related specifically to DOH certification services. This bill is the logical next step in the implementation of a functional medical marijuana industry in Hawaii. This bill will create the advisory body to integrate all affected stakeholders' needs into one process. Without this group of dedicated professionals there would, undoubtedly, be much "jockeying for position" and other conflict. The decision-making group that this bill creates will greatly assist in the development of a functional economic system, supporting methods to safeguard public safety, assure an affordable and adequate supply of medicine for patients, the creation of administrative rules for the safeguarding of public health, and the platform to advise future, unforeseen, industry sectors as they develop.  
Respectfully submitted, Matthew Brittain

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**Date:** Wednesday, February 03, 2016 10:57:02 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Leilani Maxera	The CHOW Project	Support	No

Comments:

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Maria Guardino	Individual	Support	No

Comments:

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Mark Gordon	Individual	Support	No

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**Date:** Wednesday, February 03, 2016 11:57:27 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Matt Binder	Individual	Support	No

Comments:

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Agnes Marti Kini	Individual	Support	No

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
elizabeth blalock	Individual	Support	No

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Georgina Mckinley	Individual	Support	No

Comments:

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Joseph A. Bobich	Individual	Support	No

Comments:

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Kristi Manguchei	Individual	Support	No

Comments:

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Myron Berney	Individual	Support	Yes

Comments: Marijuana is Kosher under Jewish Law

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Dr. Myron Berney, ND Lac  
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3 February 2016

SB 2176

RELATING TO THE HAWAII MEDICAL MARIJUANA OVERSIGHT COMMISSION.

Although this bill has a noble intention, the makeup of the committee makes the committee already DYSFUNCTIONAL.

These same people making up the majority of the Committee already have the responsibility of protecting and defending the TWO CONSTITUTIONS including protection and promoting the public health INCLUDING Medical Marijuana Health Care.

Public Health depends upon availability, accessibility and affordability of healthcare.

The dispensary bill falls short of the standard American Economic Safeguards due to Law Enforcement and their hoax or misunderstanding about healthcare and Medical Marijuana specifically.

The Oath of Office has specific requirements to proactively protect not merely to not violate the Constitution. I never heard anything from law enforcement protecting my Right of Privacy or my right to access healthcare. I only here from the Law Enforcement testimony:

- ways to impede health care delivery,
- ways to arrest patients and deny them health care, and
- ways to not have medical marijuana easily available, easily accessible and at a reasonable price.

How is that protecting the Rights of anybody?

They have responded with a public safety argument...that Marijuana is Schedule 1 and causes crimes. That is their color of law crime.

Recreational use of marijuana confers all the same protective advantages as medical marijuana in health and wellness. Recreational marijuana has caused the decrease in violent crimes. Marijuana protects the Public Safety. Public Safety means that I should feel safe in my own home and no be invaded by HPD pre-dawn and have all my medicine confiscated. Why is the State of Hawaii and HPD targeting Cancer patients instead of the Black Market? Why is HPD arresting cancer patients in violation of Federal Law?



Two years ago the Supreme Court came up with Case Law which REFORMED THE MARIJUANA LAWS.

Last year the Legislature took up the minority issue in this Marijuana Law Reform concerning the Dispensary Bill.

The Majority Opinion was not addressed adequately by the legislature. The majority found that the Marijuana Laws were irreconcilably conflicted and that all conflicts shall be resolved in favor of the defendant.

The conflict in the Marijuana Laws results from the conflict between law enforcement and health care delivery. The essence of this conflict is expressed in the conflict between:

- HRS 329-14 Schedule I (20) marijuana, and
- HRS 329 Part IX, specifically HRS 329-122 (2) The qualifying patient's physician has certified in writing that, in the physician's professional opinion, the potential benefits of the medical use of marijuana would likely outweigh the health risks for the particular qualifying patient;

Medical Marijuana cannot be reasonably medically safe, necessary and effective and also be Schedule I. This conflict the Supreme Court ordered resolved in favor of the defendant. The Courts were ordered to hold HRS 329-122 (2) superior to HRS 329-14 (20).

In order to streamline the judicial backlog and overload, and to protect patients' rights, the Legislature should remove and delete from the HRS those laws that the Supreme Court eliminated in their Marijuana Law Reform.

HRS 329-14 (20) should be deleted and the criminal code laws based upon HRS 329-14 (20) should also be deleted from the books. This Marijuana Reform has been ordered by the Supreme Court in order to protect and promote both the public health and medical marijuana health care delivery, availability, accessibility and affordability.

Please ask the Legal Staff to go through the HRS and write a bill that complies with the ruling of the Hawaii State Supreme Court by

1. Identifying the conflicts in the law
2. Identifying what aspects of the Criminal Code, Controlled Substance Act HRS 329, and other statutes must be deleted to resolve the conflict on behalf of the defendant and the defendant's health care.
3. Write a bill that will accomplish the tasks required to comply with the Supreme Courts conflict resolution in favor of the defendant's and the defendant's health care.

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

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

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

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

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

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

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

Clearly one medicine cannot be both a necessary, appropriate and relatively safe medicine and one of most dangerous substances. The irreconcilable conflict created in the statutes under the Rule of Lenity the courts should resolve this ambiguity in favor of the defendant and order an acquittal. The Legislature should avoid irreconcilable conflicts and absurdity in making law.

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

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

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

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

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

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

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

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

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

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

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

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



Medical Marijuana is now PROTECTED UNDER FEDERAL LAW as a medicine under the Budget law of 2015 and again for 2016.

Here is the language you requested from H.R. 83, the Omnibus Spending bill for Fiscal Year 2015. P.L. 113-235. This same language is also in the 2016 laws governing spending.

SEC 538. **None of the funds** made available in this Act to the Department of Justice **may be used**, with respect to the States of Alabama, Alaska, Arizona, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, **Hawaii**, Illinois, Iowa, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, Oregon, Rhode Island, South Carolina, Tennessee, Utah, Vermont, Washington, and Wisconsin, **to prevent such States from implementing their own State laws that authorize the use, distribution, possession, or cultivation of medical marijuana.**

In brief:

Since, SEC 538 states that “None of the funds made available may be used, with respect to the States Hawaii, to prevent such States from implementing their own State laws that authorize the use, distribution, possession, or cultivation of medical marijuana.”, this means that HRS 329 Part IX the Medical Use of Marijuana is NOW PROTECTED under Federal Law and not subject to DEA Schedule I or enforcement by the Department of Justice. **Medical Marijuana is now recognized as a medicine and protected as a medicine under this federal law.**

Q.E.D., ipso facto, by these facts thus it is shown that,

1. Medical Marijuana is now recognized and protected under Federal Law;
2. Medical Marijuana is now protected under the Right of Privacy; and
3. Article IX requires the State to protect and promote medical marijuana public health care.
4. The Oath of Office requires compliance with the Constitution in promulgating and enforcing law.

On a State Level the Supreme Court regarding Medical Marijuana earlier declared that the Courts must apply the Rule of Lenity, that all conflicts in the law or statutes must be resolved in the favor of the defendant. This means that the public health issues of availability, accessibility, and affordability of medical marijuana health care products, services and delivery is superior to and eliminates all law enforcement prohibitions and regulations that conflict with the of availability, accessibility, and affordability of medical marijuana health care products, services and delivery.

These are the EXISTING LAWS and CONTROLLING LAWS.

The Legislature has been slow in resolving and eliminating these conflicts in the Law as directed by the Supreme Court in their decision requiring conflict resolution under the Rule of Lenity. Not applying the Rule of Lenity and resolving and eliminating these conflicts in the law are tying up the Courts with arrests that must be later acquitted by the courts. This causes serious harm to the public health and is an abuse of public safety.

Previously, the Legislature has not applied the Right of Privacy due to DEA Schedule I Law and law enforcement testimony.

1. Although, now the Hawaii State Medical Use of Marijuana is recognized and protected under Federal Law.
2. This means that the Federal Government recognizes and protects marijuana as a medicine. Marijuana being a medicine means marijuana is not Schedule 1 under Federal Law anymore.
3. Since Marijuana is a medicine under State and now Federal Budget law, the Right of Privacy fully applies without any doubt.

Based upon the Rule of Lenity the conflict between SAFE AND UNSAFE, between HRS 329 Part IX the Medical Use of Marijuana stating that marijuana relatively safe is resolved by eliminating HRS 329-14 Schedule I (20) marijuana is dangerous.

Medical Marijuana is the State of Hawaii is necessary, appropriate and reasonable not a Schedule I dangerous drug on either a Federal or State level.

Since Marijuana is not schedule 1, the criminal codes based upon schedule 1 also fall away under the Rule of Lenity and under the protection on a Federal Level. This now requires application and enforcement of the Right of Privacy.

Under current State law marijuana is a non-prescription drug merely recommended by a physician. The therapeutic benefits of marijuana do not require a prescription. The recreational use of marijuana still helps to prevent cancer, control pain, reduce hard drug and alcohol abuse. Driving while stoned is no more of a driving risk than being tired and less of a risk than being distracted by texting, using a cell phone or road rage. The violent crime rate in Legalized States has dropped showing that Recreational Marijuana is also GOOD FOR THE PUBLIC SAFETY.

Legalization of marijuana benefits both the Public Health and Public Safety while eliminating Organized Black Market Crime and mainstreams the revenue of the Billion dollar Marijuana black market providing Tax Relief for the General Fund and economic benefit for families and the economy in general.

Hopefully the Legislature can let go of the law enforcement hoax, medical and scientific lies about medical and recreational marijuana.

Hopefully the State can protect the public health by applying the Rule of Lenity and the Right of Privacy as well as Article IX in protecting and promoting the public health with availability, accessibility and affordability of medical marijuana health care.

Hopefully the police and elected and appointed officials can comply with their Oath of Office.

The Oath of Office requires Protection of medical marijuana and the Right of Privacy. This being absent from law enforcement testimony, from the police and from the DAG, means that these “good” people have failed to protect my constitutional rights and the health care rights and freedoms of 11,000+ seriously ill patients [plus all the patients afraid to register].

## **Freedom of Religion must be addressed-Marijuana is** **Kosher**

Marijuana has always been Kosher under Jewish Law. But now, since 1 January 2016, Marijuana has been certified **KOSHER** by the largest Orthodox Jewish Rabbi organization.





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**Date:** Tuesday, February 02, 2016 10:36:01 PM

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Michael Golojuch Jr	Individual	Support	No

Comments: I support this bill!

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

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**Cc:** [milesw@hawaii.edu](mailto:milesw@hawaii.edu)  
**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Tuesday, February 02, 2016 9:15:07 PM

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Miles W. Tuttle	Individual	Support	Yes

Comments: This committee would be instrumental in properly assessing patient/caregiver access, education, security, and program effectiveness. The research into manufactured edible products and qualifying medical conditions in comparison to differing state experiences is necessary. By continually evaluating the status of this program, it allows for flexibility and understanding pertaining to patient concerns, potential improvements, and possible expansion.

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**Cc:** [blcloutier@yahoo.com](mailto:blcloutier@yahoo.com)  
**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Wednesday, February 03, 2016 12:16:18 PM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Brenda L. Cloutier	Individual	Support	No

Comments: Oregon has had this type of MMJ committee since 2006, before they even considered dispensaries. We need this type of oversight.

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**Cc:** [carolinesdelano@aol.com](mailto:carolinesdelano@aol.com)  
**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Wednesday, February 03, 2016 7:43:35 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Caroline Delano	Individual	Support	No

Comments: I fully support SB 2176. Please assist in passing this bill.

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**Date:** Tuesday, February 02, 2016 11:18:08 PM

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Elijah Ariel	Individual	Comments Only	No

Comments: I'm over 60 years old and the injuries of my youth are a nagging reminder of my age. Please make it as easy as possible for me to get my medicine. Thank you.

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**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Wednesday, February 03, 2016 6:09:34 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Katarina Culina	Individual	Support	No

Comments: Aloha, I support creation of commission with amendment of allowing patients to choose their own representatives. Mahalo, Katarina Culina Po box 2142 Pahoia, HI 96778

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**Subject:** \*Submitted testimony for SB2176 on Feb 4, 2016 09:00AM\*  
**Date:** Wednesday, February 03, 2016 8:00:44 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Teri Heede	Individual	Support	No

Comments:

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**Cc:** [leilani.maxera@gmail.com](mailto:leilani.maxera@gmail.com)  
**Subject:** \*Submitted testimony for SB2176 on Feb 4, 2016 09:00AM\*  
**Date:** Wednesday, February 03, 2016 10:57:02 AM

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**SB2176**

Submitted on: 2/3/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Leilani Maxera	The CHOW Project	Support	No

Comments:

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**Cc:** [wendygibson9@gmail.com](mailto:wendygibson9@gmail.com)  
**Subject:** Submitted testimony for SB2176 on Feb 4, 2016 09:00AM  
**Date:** Tuesday, February 02, 2016 8:37:27 PM

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Wendy Gibson	Individual	Support	No

Comments: This proposed committee could be instrumental in identifying mutually agreeable solutions to any challenges, as we move forward with the addition of a dispensary system to our medical marijuana program. Having this committee would be a great way to keep the lines of communication open between all interested parties. Please support SB2176. Mahalo.

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**Date:** Tuesday, February 02, 2016 10:37:45 PM

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**SB2176**

Submitted on: 2/2/2016

Testimony for CPH on Feb 4, 2016 09:00AM in Conference Room 229

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
steve scott	Individual	Support	No

Comments: I support this bill..it makes good sense...

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