

From: Karen Gilman <gilperson2@gmail.com>
To: <yoko.saxon@lacity.org>
Date: 11/15/2009 9:01 PM
Subject: Fwd: Support of 5th Draft Ordinance/proposed code modifications for Medical Marijuana Collectives 08-0923

For the Monday morning PLUM committee hearing together with Public Safety, on the MMC's.

----- Forwarded message -----

From: Henrietta Cosentino <henrietta3@sbcglobal.net>
Date: Sun, Nov 15, 2009 at 8:58 PM
Subject: Support of 5th Draft Ordinance/proposed code modifications for Medical Marijuana Collectives 08-0923
To: David.berger@lacity.org, Barbara.Greaves@lacity.org
Cc: Renee Weitzer <Renee.Weitzer@lacity.org>, Doug Mensman <doug.mensman@lacity.org>, Greater Wilshire Neighborhood Council <info@greaterwilshire.org>

City Planning Department
City of Los Angeles
200 N. Spring Street
Los Angeles, CA 90012

Dear Commissioners,

We write to request your support the 5th Draft Ordinance, following the recommendations of the latest City Attorney's Report (presented to the City Council last Friday) and in cognizance of the impact statements of various Neighborhood Councils.

My husband and I are staggered by the near-overnight proliferation of medical marijuana collectives up and down Western Avenue and along Melrose Avenue, many within walking distance of the many schools, churches and community centers that are concentrated in our neighborhood; and, by the way, walking distance from our house. While we recognize and strongly support the use of medical marijuana for the medically needy, it very clear that the recent influx of such facilities result from some other phenomenon--the ease of using medical marijuana centers as a cover (barely disguised) for selling recreational marijuana. As long as marijuana is illegal except for medical use, it needs to be more carefully regulated.

Not surprisingly, many centers--fly-by-night, and dealing in cash only--have become a flashpoint for criminal activity. That many of these facilities are lack devotion to the mission of medical healing is evidenced by 'outreach' that includes putting fliers on parked cars in the close proximity of junior high and elementary schools.

Until or unless marijuana becomes a legal substance subject to quality control regulation and taxation, we count on our City Planning Department to recognize the urgent need for more stringent regulation as regards the placement of these centers. The medical marijuana needs of the cancer and glaucoma patients are more than abundantly met. Now it is a matter of the health and well-being of the larger community; please protect us from the unintended consequences of allowing rogue mmc's to proliferate!

Respectfully,

Henrietta and Donald Cosentino
107 South Gramercy Place
Los Angeles, CA 90004

From: Karen Gilman <gilperson2@gmail.com>
To: <yoko.saxon@lacity.org>
Date: 11/15/2009 9:04 PM
Subject: Support 4th Draft Ordinance 08-0923 re MMC's

Dear Ms. Saxon,
Please include our testimony in the packets for the committees' members on Monday morning. We now support the Fifth Draft Ordinance's provisions regarding medical marijuana dispensaries.
Thank you,
Karen Gilman

----- Forwarded message -----

From: Karen Gilman <gilperson2@gmail.com>
Date: Fri, Nov 13, 2009 at 2:02 PM
Subject: Support 4th Draft Ordinance 08-0923 re MMC's
To: barbara.greaves@lacity.org, david.berger@lacity.org
Cc: Renee Weitzer <renee.weitzer@lacity.org>, Doug Mensman <doug.mensman@lacity.org>, Karen Gilman <GiLpErsOn2@aol.com>, Greater Wilshire Neighborhood Council <info@greaterwilshire.org>, gilperson2@gmail.com

Karen and Michael Gilman

4941 Elmwood Ave.

Los Angeles, CA 90004

City Planning Department
City of Los Angeles
200 N. Spring St.
Los Angeles, CA 90012

Re: Support 4th Draft Ordinance/proposed code modifications for Medical Marijuana Collectives 08-0923 with reference to City Attorney's most recent report

Dear City Planning Commissioners:

I am writing to request that the Commission vote to support the 4th Draft Ordinance, taking into consideration the recommendations of the City Attorney's Report #R09-0360, dated October 20, 2009, and the neighborhood councils' community impact statements.

Our family and our neighbors in the Larchmont Village area need and want greater regulation of the medical marijuana collectives. At the same time, preserving the right of residents truly medically needy to access and benefit from marijuana to help them utilize their treatments for glaucoma, cancer, AIDS and HIV-related conditions, we're concerned about the proliferation of the "collectives" and their proximity to schools, day care centers, rehab facilities, and religious institutions. We are in favor of the 1000 ft. restrictions from such facilities as well as restricting the MMC's proximity to each other.

Thank you for considering our concerns when you hear this matter on Monday,

November 16, 2009.

Sincerely,
Karen Gilman
4941 Elmwood Ave.
Los Angeles, CA 90004

LOS ANGELES MEDICAL CANNABIS DISPENSARIES: RECOMMENDATIONS FOR REGULATIONS

To facilitate consensus between patients, advocates, elected officials, and law enforcement, several priorities must be addressed in medical cannabis dispensary (MCD) regulations. This is the best way to ensure the rapid adoption and implementation of sensible guidelines for medical cannabis collectives and cooperatives. This is important, because research proves that regulations reduce crime and complaints.

1. Provide a realistic legal framework for storefront facilities and sales of cannabis

Incremental reimbursements for the cost and service of providing medicine within the membership are legal under California Health and Safety Code Section 11362.775, regardless of whether they are called sales, donations, or reimbursements. California courts have upheld the legal status of collectives that provide medicine in exchange for reimbursement, even in cases where some members do not participate in growing medicine. Other cities and counties allow for the sale of cannabis in MCDs. They have seen a decrease in crime and complaints, and reap the rewards of sales tax revenue. There is no other realistic model for getting medicine to patients besides storefront collectives.

2. Protect the anonymity of medical cannabis patients

It is legally and ethically questionable to require collectives and their members to give up their due process rights regarding records. Law enforcement can obtain the records through the court via a search warrant, subpoena, or court order if there is just cause. Despite indications of an evolving federal policy, federal prosecutors and DEA agents indicate they will continue to raid medical cannabis patients and providers. Law

enforcement officials have escalated enforcement against medical cannabis providers, indicating they regard all collectives as illegal. Requiring collectives to surrender records on demand will result in lawsuits, confusion, and delay.

3. Adopt workable regulations on where MCDs can locate

A report by the Planning Department indicates that fewer than 25% of the pre-moratorium collectives could meet the unreasonable location criteria in the third revised draft ordinance. The restrictions are even more onerous in the fifth revised draft version, including more sensitive uses and new restrictions on residential housing. It is unlikely that any collective can meet the standards. A more reasonable approach would be to use the same standard already in place for adult oriented businesses, which requires that these businesses be located 500-feet from schools, places of worship, and parks. Adopting location restrictions that are unworkable is tantamount to a de facto ban.

4. Protect collective cultivation

State law does not require that every member of a collective participate in growing medicine. Not everyone has the time, ability, or space to grow cannabis. They may also lack a friend or loved one who meets the extremely narrow definition of Primary Caregiver and can grow for them. That is why the law allows for collective associations. Requiring everyone in Los Angeles to grow their own medicine will mean thousands of new cannabis gardens and increased reliance on the black market. Those are outcomes that community members, law enforcement, and patients do not want.



November 16, 2009

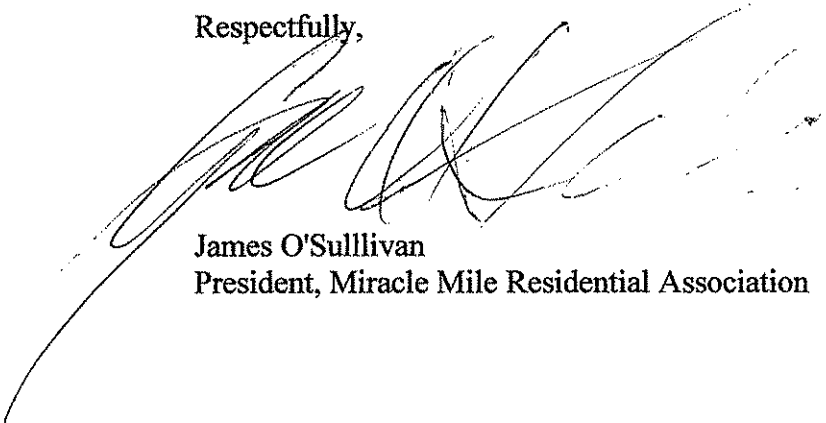
Public Safety Committee
Los Angeles City Hall
200 N. Spring St.
Los Angeles, CA 90012

RE: 5th Draft Ordinance Establishing Regulations Regarding
Medical Marijuana Collectives in the City; Council File 08-0923,

Committee:

On behalf of its membership, the Board of the Miracle Mile Residents Association (MMRA) sends its strongest possible recommendation for the adoption of the above named draft ordinance into permanent law.

Respectfully,



James O'Sullivan
President, Miracle Mile Residential Association



LOS ANGELES COUNTY POLL - OCTOBER 2009

625 registered voters in Los Angeles County were interviewed October 19-20, 2009 by Mason-Dixon Polling & Research, Inc. of Washington, D.C. All indicated that they vote regularly in county elections. Margin for error is plus or minus 4%.

QUESTION: Do you support or oppose the California law that allows medical patients to use, grow, and purchase medical marijuana to treat their illnesses when medical marijuana is recommended by their doctor?

| | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|---------------|----------------|---------------|------------------|
| COUNTY | 74% | 16% | 10% |

| <u>SEX</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------|----------------|---------------|------------------|
| Men | 78% | 16% | 6% |
| Women | 70% | 16% | 14% |

| <u>AGE</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------|----------------|---------------|------------------|
| 18-34 | 86% | 10% | 4% |
| 35-49 | 76% | 12% | 12% |
| 50-64 | 72% | 19% | 9% |
| 65+ | 67% | 21% | 12% |

| <u>PARTY REG</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------------|----------------|---------------|------------------|
| Democrat | 83% | 7% | 10% |
| Republican | 49% | 38% | 13% |
| Other | 80% | 12% | 8% |

| <u>RACE</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|-------------|----------------|---------------|------------------|
| White | 71% | 20% | 9% |
| Black | 84% | 5% | 11% |
| Hispanic | 74% | 15% | 11% |
| Asian/Other | 79% | 11% | 10% |

QUESTION: Many California municipalities and counties license and regulate the sale of medical marijuana through dispensaries, and the state collects millions of dollars in taxes from the sale of medical marijuana. Some people have expressed concerns about the number, location and visibility of medical marijuana dispensaries in Los Angeles County.

LA County District Attorney Steve Cooley has asserted that all storefront medical marijuana dispensaries are illegal and will be prosecuted and closed.

Alternatively, other officials, including members of the Los Angeles City Council, have proposed creating and enforcing uniform licensing and regulations to address community concerns while still making medical marijuana available to those in need through licensed dispensaries.

Which of one these two alternatives come closest to your view: (ORDER ROTATED)

- Prosecute or close all medical marijuana dispensaries in Los Angeles County, OR
- Create and enforce uniform licensing requirements and regulations for the operation of medical marijuana dispensaries within Los Angeles County.

| | <u>CLOSE</u> | <u>REGULATE</u> | <u>NOT SURE</u> |
|--------------|--------------|-----------------|-----------------|
| COUNTY | 14% | 77% | 9% |
| <u>SEX</u> | <u>CLOSE</u> | <u>REGULATE</u> | <u>NOT SURE</u> |
| Male | 11% | 81% | 8% |
| Female | 17% | 73% | 10% |
| <u>AGE</u> | <u>CLOSE</u> | <u>REGULATE</u> | <u>NOT SURE</u> |
| 18-34 | 10% | 79% | 11% |
| 35-49 | 10% | 79% | 11% |
| 50-64 | 17% | 77% | 6% |
| 65+ | 18% | 75% | 7% |
| <u>PARTY</u> | <u>CLOSE</u> | <u>REGULATE</u> | <u>NOT SURE</u> |
| Democrat | 7% | 83% | 10% |
| Republican | 30% | 62% | 8% |
| Other | 14% | 77% | 9% |
| <u>RACE</u> | <u>CLOSE</u> | <u>REGULATE</u> | <u>NOT SURE</u> |
| White | 18% | 73% | 9% |
| Black | 10% | 77% | 13% |
| Hispanic | 9% | 85% | 6% |
| Asian/Other | 14% | 73% | 13% |

QUESTION: Do you support or oppose making marijuana legal for adults who are 21 or older, and regulating and taxing marijuana similarly to alcohol?

| | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|--------|----------------|---------------|------------------|
| COUNTY | 54% | 33% | 13% |

| <u>SEX</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------|----------------|---------------|------------------|
| Men | 61% | 28% | 11% |
| Women | 47% | 38% | 15% |

| <u>AGE</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------|----------------|---------------|------------------|
| 18-34 | 72% | 18% | 10% |
| 35-49 | 54% | 29% | 17% |
| 50-64 | 52% | 39% | 9% |
| 65+ | 38% | 49% | 13% |

| <u>PARTY REG</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|------------------|----------------|---------------|------------------|
| Democrat | 60% | 25% | 15% |
| Republican | 41% | 51% | 8% |
| Other | 54% | 32% | 14% |

| <u>RACE</u> | <u>SUPPORT</u> | <u>OPPOSE</u> | <u>UNDECIDED</u> |
|-------------|----------------|---------------|------------------|
| White | 48% | 38% | 14% |
| Black | 67% | 21% | 12% |
| Hispanic | 58% | 32% | 10% |
| Asian/Other | 57% | 27% | 16% |

Heather Broussard
4750 Lincoln Blvd. Apt. 178
Marina Del Rey, CA 90292
916-425-1372

Sunday, November 15, 2009

City Council
Attn: Planning & Land Use Management Committee (PLUM)
c/o Barbara, City Clerk
200 North Spring Street
Room 395
Los Angeles, CA 90012

RE: CF 09-0923 – City's Proposed Medical Marijuana Ordinance

I am submitting for PLUM committee consideration on the November 16th, 2009 PLUM committee agenda, the attached most current version of the proposed ordinance (alterative draft ordinance/new direction ordinance) which I drafted pursuant to previous PLUM committee directives, public comment, the United States Constitution and Health and Safety Code Section 11362.7 – 11362.83.

In the Whereas Section of the fifth revised ordinance I left out the fifth Whereas for writing the ordinance as there was no documentation or reports supplied to the general public through submission on the website to support this finding. I feel that the purpose and intent of the city purpose for drafting the article is outlined well through the remaining Whereas sections.

I added the definition of "Cultivation of Medical Marijuana" and "Written Recommendation"

Under Sec. 45.19.6.2.E the following verbiage was modified – "In addition, the registration form shall confirm the consent of the collective upon service of a valid search warrant, subpoena or court order, for the inspection and copying by the Police department of the recordings and records required to be maintained under Sections 45.19.6.3 B.1 and 45.19.6.4 of this article." The reason for the modification is that it is a violation of the 4th Amendment of the US Constitution to allow a government agency access without a valid search warrant, subpoena or court order. The City Attorney can explain to you that although these documents would not be open to the city on demand, should there ever be an actual legal need for this documentation the city attorney will have no problems getting this information through the normal court procedures. Should this article pass, collectives will take action in court to get this section modified and will surely prevail, which would waste valuable city attorney resources in fighting a loosing battle.

Under Sec. 45.19.6.3.A2&3 was modified. With the cities pending urgency in adopting an article to help the already permitted dispensaries come into compliance with the law, and shut down illegally operating dispensaries, spending more time on figuring out zoning would be time

consuming and costly. Within the documents already presented to the City Council is the draft ordinance for adult entertainment businesses. These establishments are of the same sensitive use as a dispensary, and therefore the same zoning restriction placed upon them should also be placed upon collective. Furthermore, the distances from a school or park zone is already a part of every property profile on file with the city planning department. It also balancing the need for protection of these sensitive areas while at the same time providing to the need of patients of these existing dispensaries. If all existing dispensaries shut down or are forced to move, the patients will be left without places to receive their medicine, and a lot of these patients don't have their own means of transportation and will be left without a source.

The following is the language of the new ordinance, "Prohibition. No person shall cause or permit the establishment, substantial enlargement or transfer of ownership or control of a collective within 1,000 feet of another collective, or within 500 feet of a religious institution, school or public park within the city of Los Angeles.

No person shall cause or permit the establishment or maintenance of more than one collective business in the same building, structure or portion thereof, or the increase of floor area of a collective in any building, structure or portion thereof containing another collective.

No person shall cause or permit the establishment, or substantial enlargement of a collective within 500 feet of any lot in an "A" or "R" zone, or within the "CR", "C1", or "C1.5" zones in the City of Los Angeles. The distance specified in this subdivision shall be measured by the same method used to determine the preexisting distances already outlined on parcel profile reports generated by the City of Los Angeles Department of Planning

Smoking or Ingestion Collective. Nothing in this article shall authorize a qualified patient or person with an identification card to engage in the smoking of medical marijuana under any of the following circumstances:

- i. Within a 1,000 foot radius of a school, public park and play ground, public library, religious institution, licensed child care facility, youth center, hospital, or substances abuse rehabilitation center.
- ii. In any place where smoking is prohibited by law."

Under Sec. 45.19.6.3.B1 – the following is a modification, "The recordings of the monitoring shall be maintained for the period of not less than ninety (90) days and will be available to Department of Building and Safety, the Police Department or any other government agency upon request with a valid search warrant, subpoena and or court order in compliance with the Fourth Amendment Rights of the Constitution." The City Attorney can explain to you that although these documents would not be open to the city on demand, should there ever be an actual legal need for this documentation the city attorney will have no problems getting this through the normal court procedures. Should this article pass, collectives will take action in court to get this section modified and will surely prevail, which would waste valuable city attorney resources in fighting a losing battle.

Under Sec. 45.19.6.3.B7 has been modified to fit the definition of Health and Safety Code Section 11362.765, "Collective must operate like a true not for profit corporation. Nothing in this article shall prevent members engaged in the collective cultivation of medical

marijuana in strict accordance with this article from sharing the actual, out-of-pocket costs of their collective cultivation. Actual, out-of-pocket costs shall not be recovered through the sale of marijuana. Nothing in this article shall pertain to or affect the reimbursement from qualified patients to their primary caregivers pursuant to California Health and Safety Code Section 11362.765” This was listed as #15 before and replaces #6. #6 has been deleted because it doesn’t go along with the language within Health and Safety Code Section 11362.775 when talking about reasonable compensation.

Under Sec. 45.19.6.3.B8 Has been modified to read, “As defined in Health and Safety Code Section 11362.77 No medical marijuana collective or primary caregiver shall possess more than 8 ounces of dried marijuana and no more than six mature and 12 immature marijuana plants per qualified patient who is a member of the collective. No collective shall possess or provide marijuana other than marijuana that was cultivated by the collective: (a) at the location; or (b) at the collective’s previous location if that previous location was registered and operated in strict accordance with this article; or (c) at another location owned or operated by one of the member’s of management of the collective.”

100 plants limits the number of patients as a part of the collective to 16. If a collective had 100 patients it would need 1000 plants. If the city is going to limit the number of dispensaries to 186, that is 21,857 people per dispensary on average for the cities population of roughly 4,065,585. The appellate courts have already ruled that a city and/or county cannot limit the amount of medicine a patient may possess so long as they have a recommendation for it. Again, I don’t feel this section of the ordinance would muster court scrutiny as being constitutional. By limiting the location where the marijuana can be cultivated you illuminate the outside sales that may be occurring at some collectives.

Under Sec. 45.19.6.3.B9 Has been modified to fit the definition of Health and Safety Code Section 11362.77 and reads, “No collective may provide medical marijuana to any persons other than its members who are registered as qualified patients and/or a primary caregivers of the collective and all medicine must be given to these patients and caregivers at the location of the collective. No medical marijuana provided to a primary caregiver may be supplied to any person(s) other than the primary caregiver’s qualified patient(s) or person(s) with an identification card.” Once there is an organization in place that qualified patients can get their identification cards and register whom their primary dispensary is, the problem with patients going from shop to shop will be eliminated for dispensary owners.

Under Sec. 45.19.6.3.B9 , “Medical marijuana may not be consumed outside the collective, in the parking areas of the property, on in those areas restricted under the provisions of California Health and Safety Code Section 11362.79. The prohibition shall not apply to a qualified patient or a person with an identification card who resided on the property with respect to the use of marijuana for his or her own medical purposes.” This section was modified to say marijuana may not be consumed outside the collective or other areas restricted by Health and Safety Code Section 11362.79. Many patients come the collective to use the vaporizers and obtained edibles because their bodies are too weak to consume marijuana by inhalation. Eliminating the smoking of or ingestion of marijuana takes the greatest toll on the very seriously ill patients who may need to medicine the most.

Under Sec. 45.19.6.4 this section was modified to read, "These records shall be maintained for a period of five years and made available and accessible by the collective to the Department of Building and Safety, the Police Department or any other government agency upon request with a valid search warrant, subpoena and or court order in compliance with the Fourth Amendment Rights of the Constitution." The City Attorney can explain to you that although these documents would not be open to the city on demand, should there ever be an actual legal need for this documentation the city attorney will have no problems getting this through the normal court procedures. Should this article pass, collectives will take action in court to get this section modified and will surely prevail, which would waste valuable city attorney resources in fighting a losing battle. However, by placing this requirement as a part of the Article, all collectives will be required to keep these records should the legal need for them ever arise in the future.

Sec 45.19.6.6 EXISTING MEDICAL MARIJUANA DISPENSARIES.

"Any marijuana cultivation operation or medical marijuana dispensary that does not comply with the requirements of this article must immediately cease operation until such time, in any, when it complies fully with the requirements of this article; except that a marijuana cultivation operation or medical marijuana dispensary not in compliance with the requirements of this article that was established and operating prior to September 14th, 2007, and which was one of the 186 dispensaries that registered with the City Clerk's office before November 12th, 2007, in accordance with Interim Control Ordinance No. 179,027, shall have 1 year from the effective date of this article during which to fully comply with the requirements of this article or to cease operation.

A. The Department of Building and Safety shall only cause to be in circulation 186 agricultural occupancy permits."

I have added a cap to the number of dispensaries that can be opened and operated within the city of Los Angeles. The 186 who were originally given permits in 2007 have already detrimentally relied upon the fact that they were given those permits and therefore have been Grandfathered into their permits and locations. Even dispensaries that may have moved locations during the interim are grandfathered into their locations, as the city didn't put in place the hardship exemption process until a good two years after the permits were issued. Each of these dispensaries would have a good cause ground for suits against the city to enforce their permits as being grandfathered in.

The 186 cap is a natural cap that has been put in place that seems consistent with caps in other jurisdictions. That is 21,857 people per collective on average for the city's population of roughly 4,065,585.

The collectives that opened without permits, would have no grounds to sue the city, however the 186 have standing. By placing this cap in place the city is eliminating the number of dispensaries and the number of lawsuits that may ensue.

I have extended the process to come into compliance for these collectives to 1 year. This will give all parties, including the city, to implement the process and help the dispensaries also come into compliance. 180 isn't a lot of time for the city to put in place the process, train employees, and at the same time get the information out to the collectives and for

them to meet the requirements. If there are only going to be 186 permits, then the Department of Building and Safety also won't be inundated with applications.

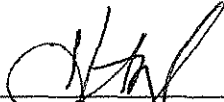
These are the recommendation I am suggesting on behalf of the 186 collectives that have been patiently waiting for the city to pass this article so that they can come into compliance. It also takes into consideration the patients needs, which seems to be lacking in many of the previous drafts of this ordinance.

I am also willing to donate my time, as well as putting together my own team to help draft the final ordinance. I am willing to work alongside the City Attorney's Office in drafting a final ordinance that fits the City's as well as the Collective's and Patient's needs.

I have also helped a couple collective in creating their registration forms as well as their designation forms and would be willing to help the city implement the process and train staff of the documentation needed for the process of registering collectives.

I would also like to appointment myself to create and LLC, called Green Peace LLC that would put in place the identification card process and a web based program for the tracking of qualified patients recommendations and designated collective. I would create the LLC in strict compliance with Health and Safety Code Section 11362.71 – 11362.76.

Sincerely,



Heather Broussard
Attorney At Law, CABAR#230421
Concerned Member of the Public
Voice for the Collectives
Leader for the Patients

ORDINANCE NO. _____

An ordinance adding the Article 5.1 to chapter IV of the Los Angeles Municipal Code amending Section 91.107.3.2 of the Los Angeles Municipal Code to implement the Compassionate Use Act of the Medical Marijuana Program Act.

WHEREAS, in 1996, California voters approved the Compassionate Use Act (“CUA”) in order to exempt seriously ill patients and their primary caregivers from criminal liability for possession and cultivation of marijuana for medical purposes; and

WHEREAS, the Medical Marijuana Program Act of 2003 (“MMPA”) provides for the association of primary caregivers and qualified patients to cultivate marijuana for medical purposes and also authorizes local governing bodies to adopt and enforce laws consistent with its provisions; and

WHEREAS, the City of Los Angeles enacted an Interim Control Ordinance in 2007 for the temporary regulation of medical marijuana facilities through a registration program, which resulted in the unintended proliferation of storefront medical marijuana dispensaries to a number currently estimated to exceed 500 such locations, presenting a substantial risk of unlawful cultivation, sale and the illegal diversion of marijuana for non-medical uses, and

WHEREAS, the California Police Chiefs Association has compiled an extensive report detailing the negative secondary effects associated with medical marijuana dispensaries; and

WHEREAS, there has been a recent report of increased violent crime at the location of many of the medical marijuana dispensaries in the City of Los Angeles; and

WHEREAS, the City of Los Angeles has a compelling interest in ensuring that marijuana is not distributed in an illicit manner, in protecting the public health, safety and welfare of its residents and businesses, in preserving the peace and quiet of the neighborhoods in which the medical marijuana collectives operate, and in providing compassionate access to medical marijuana to its seriously ill residents.

WHEREAS, this drafted ordinance is narrowly tailed and reasonable related to the City of Los Angeles’ main concern for the public health, safety and welfare of residents and businesses within the city of Los Angeles while still complies with, the 1996, voter approved Compassionate Use Act and, the 2003, Medical Marijuana Program Act.

NOW, THEREFORE,

**THE PEOPLE OF THE CITY OF LOS ANGELES
DO ORDAIN AS FOLLOWS:**

Section 1. A new Article 5.1 is added to Chapter IV of the Los Angeles Municipal Code to read:

Article 5.1. MEDICAL MARIJUANA COLLECTIVE

Section 45.19.6. PURPOSE AND INTENT

It is the purpose and intent of this article to regulate the collective cultivation of medical marijuana, pursuant to state law, in order to ensure the health, safety and welfare of the residents of the City of Los Angeles. The regulation in this article, in compliance with the Compassionate Use Act and the Medical Marijuana Program Act, California Health and Safety Code Sections 11362.5, et seq., (“State Law”) do not interfere with a patient’s right to use medical marijuana as authorized under State Law, nor does it criminalize the possession or cultivation of medical marijuana by specifically defined classifications of persons, as authorized under State Law. Under State Law, only qualified patients, persons with identification cards, and primary caregivers may cultivate medical marijuana collectively. Medical marijuana collectives shall comply with all provisions of the Los Angeles Municipal Code (“Code”), State law, and all other applicable local and state laws. Nothing in this article purports to permit activities that are otherwise illegal under federal, state law or local law.

Sec. 45.19.6.1. DEFINITIONS.

- A. The following phrases, when used in this article, shall be construed as defined in the California Health and Safety Code Sections 11006.5, 11018, 11362.5 and 11.362.7:

“Attending Physician;”
“Concentrated Cannabis;”
“Cultivation of Medical Marijuana;”
“Identification Card;”
“Person with an Identification Card;”
“Primary Caregiver;”
“Qualified Patient;” and
“Written Recommendation.”

- B. The following phrases, when used in this article, shall be construed as defined below. Words and phrases not defined here shall be construed as defined in Sections 11.01, 12.03, 45.19.5, 45.21, and 56.45 of this Code.

“Location.” The lot or portion of a lot that is used by a medical marijuana collective.

“Medical Marijuana.” Marijuana used for medical purposes in accordance with California Health and Safety Code Section 11362.5 through 11362.83

“Medical Marijuana Collective (“Collective”).” An incorporated or unincorporated association, composed solely of four or more qualified patients, persons with identification cards, and designated primary caregivers of qualified patients and persons with identification cards (collectively referred to as “members”) who associate at a particular location to collectively or cooperatively cultivate marijuana for medical purposes, in strict accordance with California Health and Safety Code Section 11362.5, et seq.

“Member Engaged in the Management.” A member with responsibility for the establishment, organization, registration, supervision, or oversight of the operation of the collective, including but not limited to members who perform functions of president, vice president, director, operating officer, financial officer, secretary, treasurer, or manager of the collective.

Sec. 45.19.6.2. **REGISTRATION.**

- A. **Registration Required.** No collective shall operate until after it has filed a registration form in accordance with the provisions of this article, has paid any adopted registration fee, and its registration has been accepted as complete by the Department of Building and Safety.
- B. **Preinspection and Certificate of Occupancy Required.** Prior to filing a registration form with the Department of Building and Safety, a collective shall provide plans of the collective location including details of any proposed alterations and a radius map signed by an architect or civil engineer licensed in the State of California to show compliance with the standards set forth in Section 45.19.6.3. A of this article and compliance with Chapters I and IX of the Code for the new agricultural occupancy. A collective shall obtain a written preinspection report from the Department of Building and Safety after the Department verifies the accuracy of the plans and radius map submitted and performs all required research (planning/zoning records). A preinspection fee pursuant to Section 91.107.3.2 of this Code, plus a research fee for a minimum of three hours of time pursuant to Section 98.0415 (f) of this Code, shall be paid to the Department of Building and Safety at the time of a request for preinspection. The Department of Building and Safety shall submit its written preinspection report to the collective stating any conditions that must be met or permits that must be obtained in order to accomplish the required building alterations and to change the occupancy in order to accomplish the required building alterations and to change the occupancy of the building. If the preinspection report finds noncompliance of the location or of the proposed alterations with the standards set for in Section 45.19.6.3 A of this article or Chapters I and IX of this Code, a subsequent preinspection may be required, for which an additional preinspection fee shall be paid.
- C. **Location Priority Status.** Upon issuance of: (1) a written preinspection report by the Department of Building and Safety verifying that the proposed location complies with Sections 45.19.6.3 A.2 of this article, and (2) all required building permits if the preinspection report specifies alterations, the collective shall obtain priority status for that location. This priority status shall become invalid if the building permits are revoked or expire. During the time that the location priority status is valid, no preinspection for another collective shall be conducted or approved if its location conflicts under the provisions of this article with the location that has priority status.
- D. **Notice of Preinspection.** Prior to accepting a request for preinspection, the Department of Building and Safety shall require proof that the collective has provided written notice to the City Council member and the Certified Neighborhood Council representing the area in which the collective is located, of: the preinspection request,

the location of the collective, a telephone number at the location, the name, telephone number, and address of a person authorized to accept service of process for the collective, and the name(s), telephone numbers and address(es) of each member engaged in the management of the collective. This notification shall be sent by certified mail, postage prepaid, and return receipt requested.

- E. **Registration Form.** Upon receipt of a Department of Building and Safety preinspection report and Certificate of Occupancy verifying compliance with the standards set forth in Section 45.19.6.3 A of this article the collective shall file a registration form with the Department of Building and Safety. The registration form shall require the following accurate and truthful information: the address and physical description (i.e., one-story commercial building, etc.) of the location at and upon which the collective is located ("property"), a telephone number at the location, the name, telephone number and address of a person authorized to accept service of process for the collective, the name(s), telephone number(s) and address(es) of each member engaged in the management of the collective; and any other information reasonably required to show that the collective complies with all the standards and requirements of this article. In addition, the registration form shall confirm the consent of the collective upon service of a valid search warrant, subpoena or court order, for the inspection and copying by the Police department of the recordings and records required to be maintained under Sections 45.19.6.3 B.1 and 45.19.6.4 of this article.

The collective shall file an updated registration form quarterly, but only if there were changes during the previous quarter to any of the information provided in the initial registration form or any changes in status of compliance with the regulations set forth in Section 45.19.6.3. A change in location cannot be accomplished by an updated registration form, but shall require a new preinspection and registration. Each and every member who is engaged in the management of the collective shall print his or her name and sign the registration form and any subsequent updated registration form, under penalty of perjury certifying that all information contained in the registration form is true and correct. It shall be the sole responsibility of the members engaged in the management of the collective to ensure that all forms and documents are submitted as required by this article and that information provided is accurate, complete and timely submitted.

- F. **Additional Registration Documents.** As Attachments to the original and any subsequent registration form, the collective shall also provide written proof to the Department of Building and Safety: (1) proof that the owner of the location, and landlord if applicable, of the property, was given notice sent by certified mail, postage prepaid, and return receipt requested that the collective intends to file the registration form and that the owner, and landlord if applicable, has received a copy of the information contained in the registration form; (2) for each member engaged in the management of the collective, a fully legible copy of one government issued form of identification, such as a social security card, a state driver's license or identification card, or a passport; and (3) the collective's Certificate of Occupancy for the cultivation use.
- G. **Completed Registration.** The Department of Building and safety shall mail proof of a completed registration and any subsequent updated registration to the person

authorized to accept service of process on behalf of the collective and to the owner of the location.

- H. **Registration Null and Void.** A registration accepted as complete under this article shall become null and void upon the cessation of marijuana cultivation at the location for 90 days or longer, upon the relocation of the collective to a different location, or upon a violation by the collective or any of its members of a provision of this article.

Sec. 45.19.6.3 REGULATIONS.

The property at which a collective cultivates and provides to its members medical marijuana must meet the following requirements:

A. Preinspection Requirements

1. The location shall comply with the provisions of Chapter I and IX of the Code; including as they pertain to the agricultural marijuana cultivation use. Permits for a change of use, any alterations to the building and Certificate of Occupancy shall be obtained from the Department of Building and Safety.
2. Prohibition. No person shall cause or permit the establishment, substantial enlargement or transfer of ownership or control of a collective within 1,000 feet of another collective, or within 500 feet of a religious institution, school or public park within the city of Los Angeles.

No person shall cause or permit the establishment or maintenance of more than one collective business in the same building, structure or portion thereof, or the increase of floor area of a collective in any building, structure or portion thereof containing another collective.

The distance specified in this subdivision shall be measured by the same method used to determine the preexisting distances already outlined on parcel profile reports generated by the City of Los Angeles Department of Planning

Smoking or Ingestion Collective. Nothing in this article shall authorize a qualified patient or person with an identification card to engage in the smoking of medical marijuana under any of the following circumstances:

- i. Within a 1,000 foot radius of a school, public park and play ground, public library, religious institution, licensed child care facility, youth center, hospital, or substances abuse rehabilitation center.
 - ii. In any place where smoking is prohibited by law.
3. Exterior building lighting and parking for the property must be in compliance with Sections 93.0104, 93.0107 and 93.0117 of the Code. In addition, the location shall be equipped with lighting fixtures and sufficient intensity to illuminate all interior areas of the property with an illumination of not less than 1.5 foot-candles evenly distributed as measured at floor level; and
 4. Any exterior signs and any interior signs visible from the exterior shall be unlighted.

5. Windows and roof hatches of the building or portion of the building where the collective is located shall be secured from the inside with bars so as to prevent unauthorized entry, and shall be equipped with latches that may be released quickly from the inside to allow exit in the event of an emergency.
6. Interior doors to the collective shall remain locked from the outside to prevent unauthorized ingress to the premises of the collective. Ingress shall be allowed by means of a remote release operated from within the premises of the collective. In all cases, doors shall remain openable from the inside to allow egress without the use of a key or special knowledge. If installed, access-controlled egress doors shall comply with Section 1008.1.3.4 of the California Building Code; and
7. A sign shall be posted in a conspicuous location inside the structure at the location advising: "This collective is registered in accordance with the laws of the City of Los Angeles. The sale of marijuana and the diversion of marijuana for non-medical purposes are violation so State Law. The use of marijuana may impair a person's ability to drive a motor vehicle or operate heavy machinery. Loitering at the location of a medical marijuana collective for an illegal purpose is prohibited by California Penal Code Section 647 (h)."

B. Conditions of Operation.

1. The property shall be monitored at all times by web-based closed-circuit television for security purposes. The camera and recording system must be of adequate quality, color rendition and resolution to allow the ready identification of any individual committing a crime anywhere on or near the property. The recordings of the monitoring shall be maintained for the period of not less than ninety (90) days and will be available to Department of Building and Safety, the Police Department or any other government agency upon request with a valid search warrant, subpoena and or court order in compliance with the Fourth Amendment Rights of the Constitution.
2. The property shall have a centrally-monitored fire and burglar alarm system and the building or the portion of the building where the collective is located shall contain a fire-proof safe.
3. No cultivation of medical marijuana on the property shall be visible with the naked eye from any public or other private property, nor shall cultivated marijuana or dried marijuana be visible from the building exterior. No cultivation shall occur at the property unless it is secured from public access by means of a locked gate and any other security measures necessary to prevent unauthorized entry;
4. No manufacture of concentrated cannabis in violation of California Health and Safety Code Section 11379.6 is allowed;
5. No collective shall provide medical marijuana to its members between the hours of 8:00 pm and 10:00 am. This prohibition shall not apply to a qualified patient's use of marijuana for his or her own medical needs if the qualified patient's permanent legal residence is the location;
6. Collective must operate like a true not for profit corporation. Nothing in this article shall prevent members engaged in the collective cultivation of medical

- marijuana in strict accordance with this article from sharing the actual, out-of-pocket costs of their collective cultivation. Actual, out-of-pocket costs shall not be recovered through the sale of marijuana. Nothing in this article shall pertain to or affect the reimbursement from qualified patients to their primary caregivers pursuant to California Health and Safety Code Section 11362.765
7. No person under the age of eighteen shall be allowed on the property, unless that minor is a qualified patient or person with an identification card and accompanied by his or her licensed attending physician, parent or documented legal guardian;
 8. As defined in Health and Safety Code Section 11362.77 No medical marijuana collective or primary caregiver shall possess more than 8 ounces of dried marijuana and no more than six mature and 12 immature marijuana plants per qualified patient who is a member of the collective. No collective shall possess or provide marijuana other than marijuana that was cultivated by the collective: (a) at the location; or (b) at the collective's previous location if that previous location was registered and operated in strict accordance with this article; or (c) at another location owned or operated by one of the member's of management of the collective.
 9. No collective may provide medical marijuana to any persons other than its members who are registered as qualified patients and/or a primary caregivers of the collective and all medicine must be given to these patients and caregivers at the location of the collective. No medical marijuana provided to a primary caregiver may be supplied to any person(s) other than the primary caregiver's qualified patient(s) or person(s) with an identification card.
 10. The light fixtures required in Section 45.19.6.3 A.4, above, shall be turned on from dusk to dawn;
 11. No collective shall cause or permit the establishment or maintenance of the same or dispensing of alcoholic beverages for consumption on the property or off-site of the property.
 12. Medical marijuana may not be consumed outside the collective, in the parking areas of the property, on in those areas restricted under the provisions of California Health and Safety Code Section 11362.79. The prohibition shall not apply to a qualified patient or a person with an identification card who resided on the property with respect to the use of marijuana for his or her own medical purposes.
 13. No dried medical marijuana shall be stored in buildings that are not completely enclosed, or stored in an unlocked vault or safe, or other unsecured storage structure; nor shall any dried medical marijuana be stored in a safe or vault that is not bolted to the floor or structure of the facility;
 14. Medical marijuana may not be inhaled, smoked, eaten, ingested, or otherwise consumed outside the location, in the parking lot of the location, or in those areas restricted under the provisions of California Health and Safety Code Section 11362.79. This prohibition shall not apply to a qualified patient's use of marijuana for his or her own medical needs if the qualified patient's permanent legal residence is the location; and

15. Only members of the collective engaged in the management of the collective. A person who has been convicted within the previous 10 years of a felony or a crime of moral turpitude, or who is currently on parole or probation for the sale or distribution of a controlled substance, shall not be engaged directly or indirectly in the management of the collective and, further, shall not manage or handle receipts and expenses of the collective.

Sec. 45.19.6.4. MAINTENANCE OF RECORDS.

A medical marijuana collective shall maintain records on the property accurately and truthfully documenting: (1) the full name, address and telephone number(s) of the owner, landlord and/or lessee of the property; (2) the full name, address, and telephone number(s) of all members who participate in the collective cultivation, the date they joined the collective and the exact nature of each member's participation; (3) the full name, address, and telephone number(s) of whom the collective provides medical marijuana; (4) the designation, by qualified patient(s) and person(s) with identification cards, of any and all primary caregivers who participate in the collective cultivation; (5) all contributions, whether in cash or in kind, by members to the collective and all expenditures incurred by the collective for the cultivation of medical marijuana; (6) inventory records documenting the dates and amounts of marijuana cultivated on the property, including the amounts of marijuana stored on the property; and (7) proof of registration with the Department of Zoning in conformance with Section 45.19.6.2 of this article, including evidence of an accepted registration form. These records shall be maintained for a period of five years and made available and accessible by the collective to the Department of Building and Safety, the Police Department or any other government agency upon request with a valid search warrant, subpoena and or court order in compliance with the Fourth Amendment Rights of the Constitution.

Sec. 45.19.6.5. INSPECTION AUTHORITY.

The department of Building and Safety may enter and inspect the property of every collective to determine if they are operating in compliance with Section 45.19.6.3 of this article between the hours of 10:00 am and 8:00 pm and shall enforce the provisions of this article. It is unlawful for any owner, landlord, lessee, member or any other person having any responsibility over the operation of the collective to refuse to allow, impede, obstruct or interfere with an inspection or when provided with a valid search warrant, subpoena or court order, to conceal, destruct and/or falsify any of the records or monitoring.

Sec 45.19.6.6 EXISTING MEDICAL MARIJUANA DISPENSARIES.

Any marijuana cultivation operation or medical marijuana dispensary that does not comply with the requirements of this article must immediately cease operation until such time, in any, when it complies fully with the requirements of this article; except that a marijuana cultivation operation or medical marijuana dispensary not in compliance with the requirements of this article that was established and operating prior to September 14th,

2007, and which was one of the 186 dispensaries that registered with the City Clerk's office before November 12th, 2007, in accordance with Interim Control Ordinance No. 179,027, shall have 1 year from the effective date of this article during which to fully comply with the requirements of this article or to cease operation.

A. The Department of Building and Safety shall only cause to be in circulation 186 agricultural occupancy permits.

Section 45.19.6.7. COMPLIANCE WITH THIS ARTICLE AND STATE LAW.

A. It is unlawful for any person to cause, permit or engage in cultivation, possession, distribution or giving away of marijuana for medical purposes except as provided in this article, and pursuant to any and all other applicable local and state laws.

It is unlawful for any person to cause, permit or engage in any activity related to medical marijuana except as provided in Health and Safety Code Section 11362.5 et seq., and pursuant to any and all other applicable local and state law.

B. It is unlawful for any person to knowingly make any false, misleading or inaccurate statement or representations in any forms, records, filings or documentation required to be maintained, filed or provided to the City under this article, or to any other local, state or federal government agency having jurisdiction over the activities of collectives.

Sec. 45.19.6.8. VIOLATION AND ENFORCEMENT.

Any violation of this article shall be subject to all remedies and enforcement measures authorized by Section 11.00 of this Code and, additionally, as a nuisance per se, all of which shall also be subject to injunctive relief, revocation of the certificate of occupancy for the property, disgorgement and payment to the City of any and all monies unlawfully obtained, costs of abatement, and investigation, attorney fees, and all remedies and actions available and applicable under local and state law for any violations committed by the collectives and persons related or associated with the collective.

Notwithstanding an initial verification of compliance by the collective with the development standards set for in Section 45.19.6.3 A of this article prior to the filing of the registration form, any collective later found to be in violation of any of the development standards at any time or after the 1 year compliance date set for preexisting collectives is subject to the enforcement provisions provided in this sections.

Sec. 2. Section 91.107.3.2 of the Los Angeles Municipal Code is amended by adding a new item 5 to read:

5. Medical Marijuana Collective Preinspection. A preinspection fee pursuant to Section 45.19.6.2 B of the Los Angeles Municipal Code shall be collected by the Department of Building and Safety to verify compliance with Section 49319.6.3 A of the Los Angeles

Municipal Code. The preinspection fee shall be in addition to any other fee that the Department determines is necessary due to the nature of the work involved.

Sec. 3. Operative Date. No preinspection pursuant to section 45.19.6.2 B of the Los Angeles Municipal Code shall be conducted by the Department of Building and Safety, nor shall a registration form pursuant to Section 45.19.6.2 A of the Los Angeles Municipal Code be accepted by the Department of Building and Safety for a period of 180 days from the effective date of this ordinance; except that any medical marijuana collective, dispensary, operator, establishment, or provider that was (1) established and operating prior to September 14th, 2007 and (2) registered pursuant to Interim Control Ordinance No. 179, 027 with the City Clerk's office before November 12th, 2007, may have a preinspection done by the Department of Building and Safety and may file a registration form with the Department of Building and Safety during this 180 days period.

Sec. 4 Severability. Pursuant to the provisions of the Los Angeles Municipal Code Section 11.00(k), if any provision of this ordinance is found to be unconstitutional or otherwise invalid by any court of competent jurisdiction, that invalidity shall not affect the remaining provisions of this ordinance which can be implemented without the invalid provision, and, to this end, the provisions of this ordinance are declared to be servable.

Sec 5. The City Clerk shall certify to the passage of this ordinance and have it published in accordance with Council policy, either in a daily newspaper circulated in the City of Los Angeles or by posting for ten days in three public places in the City of Los Angeles: one copy on the bulletin board located at the Main Street entrance to the Los Angeles City Hall, one copy on the bulletin board located at the Main Street entrance to the Los Angeles City Hall East; and one copy on the bulletin board located at the Temple Street entrance to the Los Angeles County Hall of Records.

I hereby certify that this ordinance was passed by the Council of the City of Los Angeles, at its meeting of _____.

JUNE LAGMAY, City Clerk

By _____
Deputy

Approved _____

Mayor

Approved as to Form and Legality

CARMEN A. TRUTANICH, City Attorney

By SHARON SIEDORF CARDENAS
Assistance City Attorney

Date: _____

File No. CF 08-0923

>>> "Chris Augustine" <ca2000ca@ca.rr.com> 11/14/2009 8:06 PM >>>
Christopher and Cheryl Augustine

4951 Elmwood Avenue

Los Angeles CA.

90004

City Planning Department

City of Los Angeles

200 N. Spring St.

Los Angeles, CA 90012

Re: Support 4th Draft Ordinance/proposed code modifications for Medical Marijuana Collectives 08-0923 with reference to City Attorney's most recent report

Dear City Planning Commissioners:

I am writing to request that the Commission vote to support the 4th Draft Ordinance, taking into consideration the recommendations of the City Attorney's Report #R09-0360, dated October 20, 2009, and the neighborhood councils' community impact statements.

Our family and our neighbors in the Larchmont Village area need and want greater regulation of the medical marijuana collectives. At the same time, preserving the right of residents truly medically needy to access and benefit from marijuana to help them utilize their treatments for glaucoma, cancer, AIDS and HIV-related conditions, we're concerned about the proliferation of the "collectives" and their proximity to schools, day care centers, rehab facilities, and religious institutions. We are in favor of the 1000 ft. restrictions from such facilities as well as restricting the MMC's proximity to each other and we have concern for limitations on the hours that the MMC's can operate; the 4th draft ordinance limits hours to restrict them to 10 a.m. to 10 p.m..

Thank you for considering our concerns when you hear this matter on Monday, November 16, 2009.

Christopher and Cheryl Augustine

>>> Karen Gilman <gilperson2@gmail.com> 11/15/2009 8:56 PM >>>
Please add to committee packet for Monday morning's 8:30 join committee hearing.

----- Forwarded message -----

From: Henrietta Cosentino <henrietta3@sbcglobal.net>
Date: Sun, Nov 15, 2009 at 8:58 PM
Subject: Support of 5th Draft Ordinance/proposed code modifications for Medical Marijuana Collectives 08-0923
To: David.berger@lacity.org, Barbara.Greaves@lacity.org
Cc: Renee Weitzer <Renee.Weitzer@lacity.org>, Doug Mensman <doug.mensman@lacity.org>, Greater Wilshire Neighborhood Council <info@greaterwilshire.org>

City Planning Department
City of Los Angeles
200 N. Spring Street
Los Angeles, CA 90012

Dear Commissioners,

We write to request your support the 5th Draft Ordinance, following the recommendations of the latest City Attorney's Report (presented to the City Council last Friday) and in cognizance of the impact statements of various Neighborhood Councils.

My husband and I are staggered by the near-overnight proliferation of medical marijuana collectives up and down Western Avenue and along Melrose Avenue, many within walking distance of the many schools, churches and community centers that are concentrated in our neighborhood; and, by the way, walking distance from our house. While we recognize and strongly support the use of medical marijuana for the medically needy, it very clear that the recent influx of such facilities result from some other phenomenon--the ease of using medical marijuana centers as a cover (barely disguised) for selling recreational marijuana. As long as marijuana is illegal except for medical use, it needs to be more carefully regulated.

Not surprisingly, many centers--fly-by-night, and dealing in cash only--have become a flashpoint for criminal activity. That many of these facilities are lack devotion to the mission of medical healing is evidenced by 'outreach' that includes putting fliers on parked cars in the close proximity of junior high and elementary schools.

Until or unless marijuana becomes a legal substance subject to quality control regulation and taxation, we count on our City Planning Department to recognize the urgent need for more stringent regulation as regards the placement of these centers. The medical marijuana needs of the cancer and glaucoma patients are more than abundantly met. Now it is a matter of the health and well-being of the larger community; please protect us from the unintended consequences of allowing rogue mmc's to proliferate!

Respectfully,

Henrietta and Donald Cosentino
107 South Gramercy Place
Los Angeles, CA 90004

Want to improve the safety and quality of medical cannabis provided to qualified patients?

You are invited to develop medical cannabis safety, quality control guidelines and related services. The MCSC is an association of individuals and organizations dedicated to identifying and improving safe handling and quality control practices by developing standards to improve patient safety. Your participation in this effort is vital to identify and explore solutions to improve the safety and quality of medical cannabis:

Safe Handling Committee: Develop safety and handling protocols, dosage management, and a training curriculum for methods used to grow whole plant medicines, and for producing ingestible plant medicine and extracted or concentrated plant medicine. Help bring kitchens and production facilities into compliance with applicable state and/or local safety and handling protocols. Create standards for safe and sanitary handling procedures of cannabis medicines at dispensing cooperatives and collectives, from the point it is received until the medicine is dispensed to the patient.

Nomenclature Committee: Define proper classification names, standardize the naming guidelines and develop packaging and labeling standards.

Contaminant Committee: Define a list of contaminants, such as fertilizers, pesticides, bacteria, mildews and molds that may reach levels that are unacceptable in cannabis medicines. Work with analytical labs to test cannabis medicines for contaminants, and develop a scientific method to detect contaminants using practices such as sight, magnification, smell and feel. Design quality assurance reports relating to cannabis medicines for dispensing cooperatives and collectives to evaluate, and ensure safe production methods have been used.

Potency Committee: Develop a list of what to test for relating to potency, and develop scientific methods for human testing (biassay) to rate the potency and efficacy of various ingestion methods and types of cannabis medicines. Work with analytical labs to test for therapeutic properties including THC, CBD, CBN, terpenes, and other active ingredients of cannabis medicine.

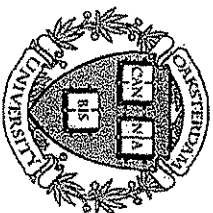
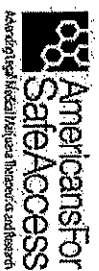
Research and Education Committee: Determine research goals to explore the possibilities of cannabis medicines and the future of the MCSC. Study environmental impact to improve current practices. Education outreach will be developed and made available for the cannabis industry.

The Medical Cannabis Safety Council (formerly Commission) seeks to offer self-regulatory models, informational and educational materials to encourage access to safe medical cannabis. We will provide resources to promote specific improvements for addressing classification, contamination, potency and continuous safe handling during the production, inspection, classification and use of cannabis for therapeutic purposes by qualified patients and their caregivers. Quality assurance standards, suggested practices and expanded safety objectives will be posted on our website on an ongoing basis for all interested persons to review and contribute.

Medical Cannabis Safety Council Objectives



In participation with:



Find your favorite pursuit!

Select your area of interest or expertise; we will connect you with the working group(s).

- Safe Handling Committee
- Nomenclature Committee
- Contaminant Committee
- Potency Committee
- Research and Education Committee

Name _____

Address _____

City, State, Zip Code _____

E-mail _____

Phone _____

Primary Affiliation or Business _____

Website _____

Alternate e-mail _____

Date of sign up _____

How did you hear about us? _____

Additional information you would like to share _____

Get involved!

Improve patient safety by forming guidelines for the cultivation, production, handling, dispensing, and utilization of cannabis medicine. Help to develop standardized quality assurance practices, testing methods, and educational programs through which patients, doctors, providers, and regulating authorities can be more confident in the medical cannabis continuum, from the plant to the patient.

Ways to Contribute

Your expertise and experience is valuable in developing MCSC objectives. Giving your time is just as welcome as monetary donations.

Working Groups Live

Collaborate with a working group in your area! There are many opportunities for networking with like minded individuals.

Working Groups Online

Collaborate with your working group in the comfort of your home or office. Register with us to express your input and ideas!

MCSC Website

www.CannabisSafety.org

For more information on how to become involved, please call (510)486-8083 or e-mail contact@cannabissafety.org



MEDICAL CANNABIS SAFETY COUNCIL



From the
Plant
to the
Patient