



XS+Med*Fest A Success

Next In Eugene on 4/20 (Hopefully!)

The first XS+Med*Fest - a sharing of medical cannabis for those in need - was hosted by MERCY on Saturday January 8, 2005 in Salem, Oregon from High Noon through 4:20. They gave out medicine to some 125 people, servicing the public until the very end. It appears to have been a success.

"I just wanted to send a huge THANK YOU to the Mercy Center for even attempting the XS Med Fest. Because of you over one hundred people slept well, ate, felt less pain.

"Because of your work the world was, just for a moment, a better place."

Thank you Mercy Center. p.s. I was unable to attend this year, but who knows maybe next year!?" e-mailed Troy, a Newport-area cardholder following the event.

Well, Troy, the MERCY Team is being optimistic and not

<continued next page>



Robert Gray (right) and volunteer Sonny Watkins (center) educate a citizen at MERCY on Fairgrounds Rd. in Salem circa 2002. The purpose of the Center is to serve the people and being available for walk-ins is an important part of their outreach.

STOP BLOCKING MARIJUANA RESEARCH

The Agencies That Can Give Permission to Conduct Research into Medicinal Marijuana Are Most Hostile to That Research

Oregonians have made clear, in elections and in public opinion polling, that they favor careful use of marijuana for medicinal purposes.

It will be hard for medicinal marijuana to be properly evaluated and applied if legitimate researchers can't get legal supplies for human studies to assess the health effects of the drug and unless versions of the drug can be standardized for sale if recommended by doctors.

The federal Drug Enforcement Administration is conducting a rear-guard action against useful research efforts. This occurs despite two federal court actions in 2003 that, in effect, affirm that the federal Controlled Substances Act doesn't trump state medical marijuana laws or allow federal agents to revoke the licenses of doctors who legally recommend marijuana. <continued page 6>

OMMP Fees Reduced

Other Changes Pending

On January 1st, 2005, new fees went into affect for registering with the OMMP, Oregon's Medical Marijuana Program. Now basic fee is \$55 or \$20 if you are on the Oregon Health Plan (OHP) or if you are receiving Supplemental Security Income (SSI) monthly benefits. The change came about due to cardholders and activists who were watchdogging the program and so became aware of a surplus in the programs budget as they attempted to advocate for those unable to afford the old fees - \$150 for basic registration, \$100 for basic renewal and \$50 for OHP, SSI participants.

Also, the program manager Mary Leverette has moved on to other projects, and DHS is getting a new director in March.

In addition there are other changes pending and proposed that the community should be aware of.

The MERCY News team will

<continued next page 7>



The MERCY News Report is an all-volunteer, not-for-profit project to record and broadcast news, announcements and information about medical cannabis.

For more information about the MERCY News, contact us.

Snail Mail:

**The MERCY News
1675 Fairgrounds Rd.,
Salem, Oregon, 97303
503-363-4588**

E-mail:

Mercy_Salem@hotmail.com

our WWW page:

www.MercyCenters.org

Check it out!

The MERCY News is produced due to the efforts and expense of the members and staff of the



<continued from previous page> only planning to do several XS+Med*Fest a year but take them on the road. Next is 4/20 in Eugene, if they can get a place. Other possibles are Southern Oregon (Medford?), Bend area and Coast. They are grouping their contacts by geographic area and attempting to organize them somewhat to better team them up and with them.

About the Fest

The XS+Med*Fest - which stands for Excess Medicine Festival - came about due to the high number of contacts to MERCY on the issue of lack of available medical marijuana, an issue brought to the forefront by the OMMA/2 "Dispensaries" initiative, Measure 33. The campaign raised awareness of the medical cannabis issue and enrollment in the program has increased even as the measure was defeated. Ironically, some of the people now clamoring for medicine may have failed to support the OMMA/2 campaign or even voted against it. In any case, the numbers are going up and now the need is even more acute.

The Patient members of MERCY suggested sharing from the communal medicine chest. 3 months ahead all the PaRTe (Patient Resource Team) members - basically all the cardholders working the in garden system - made the commitment to expend and expense to produce extra medicine. They then made the announcement and carried it out.

Some of MERCY's objectives for these kinds of action items are to help out, build networks and direct people to self-sufficiency and action, for themselves and others. For example, there are changes pending as well as basic monitoring to be done of the OMMP - Oregon's Medical Marijuana Program.

The Day

"Volunteer staff began showing up at eight in the morning" recalls MERCY Secretary Jayce Jones. "It was a crisp January day, one of those really cold 'is it going to snow and mess up the roads for driving?' mornings. "

"I mean *brrrr*" adds Kelly, MERCY staff member, "Thank goodness we were donated heat for the event. "

"Yes," smiles Ms. Jones, "our first task was to fire up the three propane heaters we had begged and borrowed from friends and family for the occasion. Not only had they come through with the heaters, the fuel tanks had also been filled for us."

Once their fingers thawed out, they ran around sweeping floors, putting up partitions, setting out the chairs, making signs, establishing a check-in desk, reviewing security protocols, and generally just trying to get ready.

"We had fun setting up, even if it never did get warm."

First arrival at 10:30. Not just anxious, but way early due to bus schedule. This hi-lights MERCYs plans to network people into car-pools by home region. Crowd gathers and line starts to form about 11:30am. The volunteers are at the table to make sure (a) everybody's paperwork was in order, (b) their medicinal needs and (c) ability to support was surveyed.

"We thought we were ready. It has ten minutes to High Noon, and we opened the doors." Ms. Jones continues.

"At first only a couple of people came in. They lined up at the check-in desk. The first one gave my partner and me their OMMP card and driver's license to verify identification and eligibility while they filled out the sign-in sheet. "

"We had processed a couple of people, it was almost <continued on next page>

<continued from previous page> High Noon now, and I looked up. There were 20 people in line. Just a few minutes later, at High Noon itself, I looked up again, and there was a line stretching from my desk across the room and all along the showroom window to the far doors of Robbie's building. There must have been fifty people standing there."

"After the initial rush, it seemed like that line never shortened, no matter how many people we processed, no matter how many id's were verified and how many tickets were passed out, the line was always just as long as it was before."

"We appreciate everybody's patience with our process."

"About 2:30, word came from the Green Window of Opportunity" relates Ms. Jones relates, "...excess medicine was almost accessed out, we would try to supply everyone still in line. I didn't see how it was done, but no one else joined the line, and no one left. By 2:50, the line was down to a couple of nervous looking, but very nice, stragglers. We processed them, and I got a chance to sit down. Which I promptly did, then and there. I was worn out. It was a lot of work!"

At the same time other MERCY volunteers worked the crowd in line passing out newsletters, registering voters, answering questions and generally connecting with the people. Pointing to all the literature they could print and scrounge that was available. Line around the room until 3, then down to a small rush.

In the back offices dedicated to storage, packaging, and distribution of the medicine, volunteers struggled to keep up.

"I was working like a dog. 25/30 bags set up and gone. Set up another 30. Foom!, gone. And still a line out there, I was told. Seemed to stay like that til the end" states Dave, another volunteer MERCY Staffer and PaRTe member.

"I did get a chance to poke my head out every now and then. Looked like lotsa happy people out there."

MERCY was only able to have one set of volunteers at most stations so they were barely able to break the entire duration.

"I took a break in the Medication Room." Jayce remembers "After I got my strength back, I stayed at my desk, and 'held down the fort'."

Still the MERCY crew also managed raffles for a chess set at 2:10, another, at 4:20, was for one of MERCY's unique, colorful T-shirts. Tickets were offered at the door, no charge required. A "Thanx!" to prize donors.

Statistics & Stuff

"In processing, I noticed lots of new cards, people who recently joined." reports Kelly, MERCY staffer.

As far as promotion of the event, most apparently heard about it through Oregon Green Free (a MERCY flyer at a meeting, then thru their web forum), The Hemp and Cannabis Foundation (their TV show), the MERCY web, newsletter or other medium.

"Quite a few walk-in's people who walked or drove by and our signage." Kelly notes.

"We originally thought we would get around 50 people",

she continues. "Then, through the door they came, over a hundred people. The donations we had brought for our patients didn't even come close to the amount of people that needed help, so we divided it up as best we could, made sure everybody got *something*. Even though not many people had any resources we were able through networking and sharing to help everyone that needed help."

"In some cases those who arrived earlier gave up their allocation of medicine for latecomers - a beautiful thing to see."

Per law, no consideration was accepted in exchange for medicine, all was free - not even admission was required for this event. All financial contributions MERCY does accept goes towards organization administration such as meeting facility costs. A net loss as far as money goes, but they did not plan this as a fundraiser anyway - was specifically for those in need.

"It was great to see people coming in stressed, worried, broke and then to leave with the same stresses but a huge smile on their faces as they walked out the door." recalls volunteer Kelly. "Nice that people had their paperwork in order and ready and patiently waited."

"We would like to get some help from the people who can so we can have another chance to make people smile."

Lots of networking, putting people together, Contacts and ideas exchanged. As Ms. Jones reports: "There were chairs placed near my desk - for some of the patients in line, there near the end, they were tired of standing - and one really nice lady came and sat by me. We talked about some of the problems cardholders have in common. One of our volunteers came along, stacked up the chairs, and chatted for a while."

Ms. Jones recalls one walk-in case in particular, "So I'm sitting there, watching the fort. It was three something something. No one else was in the showroom at the time. A lady walks in. A little old lady who appeared to be on some serious DSM9 psychiatric drugs. She had that tremor associated with Cogentin or a lack of Seraquil. And she was suspicious. She had written the date on her calendar and hopped on a bus to get here, but she didn't quite remember what or why."

"What's going on here?" she said, 'What's going on back there?'

She was a cardholder, and her id was good, although she was not able to make a donation. So I did the paperwork and let her into the Medication Room."

"About twenty minutes later, she walks out smiling, relaxed, and happy. She had her little brown paper sandwich bag clenched in her hand and just the biggest grin stretched across her face. She said 'Thank you, thank you so very much', and left.

"That's what it was all about."

Next

Next XS+Med*Fest in Eugene on 4/20 prior to Eugene's Cannabis Television (ECTV) - all factors and variables willing. Plan is to get some film footage, maybe interviews for the ECTV show that night. As of this writing MERCY has not yet secured a place. Suggestions appreciated ...

<continued on next page>

<continued from previous page>

XS+Med*Fest Contacts:

William "Sonny" Watkins - PaRTe Leader, MERCY co-founder - by email to mercycenter@hotmail.com

Perry Stripling - Newsletter editor, MERCY webster, spokesperson, PaRTe Member - by email to librarian@pdxnorml.org

Jayce "Mom" Jones - MERCY Secretary, PaRTe Member - by email to mercy_salem@hotmail.com or snail mail to:

Mercy Center
1675 Fairgrounds Rd.
Salem, OR 97303

MERCY wishes to say "Thank You" to all the patients for showing their patience with the Mercy Centers program. Thanks to those who brought stuff - heaters and propane, chairs, food, even lighters! Thanks to the volunteers who then did the work of promoting, setting up, working and clean up. Many Thanx to the Patients and DPCs of the PaRTe who worked extra and special thanx to the MERCY patients who consigned their meds to the effort.

And a big, special thanx to the building owner, Robert Gray.

"It's been over 4 years since the day that Robbie Gray said - 'Let's help some people out' ", recalls MERCY co-founder William "Sonny" Watkins.

"On this day Robbie sits in prison by himself with no medicine and no hope for any soon."

"Meanwhile 124 plus staff card carrying O.M.M.P. patients and caregivers came to "his" building with nothing, and left with smiles and some meds as well as baked goods. This is a very small number of people in this state, but, if I could have got some help..... I could have gotten a bus to pick up 4 or 5 more people just in the Lincoln City area. Of course then all these other locations like Bend, Sister, etc... the number would have been a lot more."

"Still Robbie's in prison," Mr. Watkins continues, "Mercy Centers is helping patients and caregivers throughout the state. All because a man, Robert T. Gray cared enough about others to step out from the shadows and stand up like a real man and help those who cannot help themselves. But yet still deserve the good quality of life that comes with the use of what God left for us, Cannabis."

"I would like to thank my brother Mr. Gray for all he has gone through up to now and even for those things which he hasn't had to go through yet. I believe we chose the right thing in helping others. In the process some of us are going to lose more than our freedom, some will lose their lives. Our hope is to those who need it most will find their way to the Mercy Centers in Salem the capital of the state of Oregon. Where Robert Gray is doing his part and more."

"Also, thanks to ALL my family and friends who did their part. Without them I could not have done my part to make this all

happen." Mr. Watkins concluded.

If you would like to drop Mr. Gray a line and let him know how things are going out here, he can be reached at ...

Oregon State Corrections
#5667147
Robert T. Gray
3600 13th St.
Baker City, OR 97814

More About MERCY

MERCY is a true grassroots, not-for-profit group made up of patients, their family and friends, medical cannabis law reformers and plain ol' concerned citizens. Members of political parties and organizations involved with equal civil rights and pork-barreled boondoggles - laws and programs aimed at getting a specific groups of citizens at the expense of we, the people.

MERCY monitors and works with the maintenance of the Oregon Medical Marijuana Program (OMMP). Patient Resourcing and Action Items. Handing out medicine and helping people with the program. Watchdogging the program and legislature while working to improve it.

Also educating special interest groups as well as the the public at large thru the MERCY OMMP Presentations. Networking people by area or issue.

MERCY Membership & Access to Excess Medicine. Basically permits Access to cardholders only area following meets and at special events where resources may network and access to excess medicine is available. It allows cardholder MERCY members availability to private areas established by MERCY at meetings and events where they may have access to excess medicine. A cardholder only area is established and available medicine is divided up - as best as people can - and distributed by MERCY. At the same time people and groups are encouraged to bring their own and help out, especially as MERCY's resources run out. Access to the area is restricted to members who have paid their \$50 yearly dues to support the effort. Access may be granted to non-member cardholders for a one-time, non-refundable, non-accumulative \$10 use-fee. They get access to the Window Of Opportunity after public meetings held last Thursday of the month, for example.

Projects, tasks and what people can do in general

Networking. See Network Plans for details. Public and private action levels - teachers, and doctors, and lawyers - oh my! Protocol for public figures and people in vulnerable positions.

The Salem area. Self-sufficiency and de-centralized knowledge-bases and action centers (patients in the 'hood). Salem area bizness (OMMA-friendly) survey is an important task.

Lobby Day and Delivery Service. Lobby list/s (network/s) and legislative watchdaws group.

Idea: let's have e-list, possibly phone tree, certainly meetup for all websters - and wanna be's - working on OMMP related websites. Also other special forces in the medical cannabis liberation army (security, electricians, farmers, etc.).

News of the a.b.N.O.R.M.L. - Attorneys
Branch, National Organization for the
Reform of Marijuana Laws.
A Legal Info Update

The Oregon Court of Appeals today decided two significant decisions interpreting the Oregon Medical Marijuana Act today, giving, taking away (in a mostly historical ruling) and partially taking away.

In Washburn v. Columbia Forest Products, the Court held that a disabled person's legal medical use of marijuana does not disqualify the individual from the protection of the Oregonians with Disabilities Act. An Oregon employer must provide reasonable accommodation for an employee's disability even if the employee uses medical marijuana to relieve the symptoms of the disabling condition.

Full text of opinion and attorney Phil Lebenbaum's Press Release are at: <http://www.publications.ojd.state.or.us/A116664.htm>

In State v. Miles, the Court upheld the trial court's decision denying the patient the affirmative defense and the choice of evils defenses of the OMMA. As to the affirmative defense, the problem was that his attending physician statement in support of his registry application was signed by Dr. Leveque, who had not examined him. The Court of Appeals upheld the trial judge's ruling that Dr. Leveque was not an 'attending physician' as that term is defined in the OMMA.

This ruling is of largely historical significance as we are rapidly approaching the statute of limitations on cases which pre-date the OMMP's issuance of administrative rules which require 'attending physicians' to actually examine patients. When Dr. Leveque was approving applications without seeing patients no such rule existed.

The Court of Appeals also upheld the trial court's ruling denying the patient's Choice of Evils (justification) defense. At issue was whether there was sufficient evidence that it was 'necessary' as an 'emergency measure' for the patient to cultivate and use without registering. The evidence included an assertion by the patient that he was able to go without marijuana for three months.

Leland R. Berger
Attorney at Law
3527 NE 15th Ave., #103
Portland, OR 97212-2356
503-287-4688
503-287-6938 (fax)
503-504-4298 (cell)
lelandberger@comcast.net

Lee Berger is a member of the NLC (NORML Legal Committee) and OCDLA (Oregon Criminal Defense Lawyers Association), among others.

The State-wide Calendar of Events for Oregon is a Public Service provided by MERCY and is maintained by their volunteer staff. Contact them to inquire about -or- add or maintain an event -or- idea.

--- MERCY State-wide Calendar of Events ---

MERCY Public Meetings in Salem, 7pm last Thursday of every month. They update their members and attending public with current status, and actions items surrounding the issues effecting the medical cannabis community. They register voters, distribute literature and network ideas. The goal of the meetings is to service:

- * People seeking to join the OMMP or public wanting general info, usually for a friend or family member.
- * Patients and CareGivers wanting to network. This is being planned in conjunction with other meetings and other lines of communication for the OOMPAH. (add link to meeting network and bulletin boards)
- * Activists exchanging information and resources.

See you there!

CLF / ECTV in Eugene, 6pm Every Wednesday. Eugene area Meeting and Action organized by CLF - Cannabis Liberation Front. CLF has consolidated their public meetings and Emerald Empire Hempfest planning sessions and try to gather at 6:00pm Wednesdays at Community Television of Lane County, Eugene, Oregon - behind Sheldon High School. They then take action and start filming their weekly cable-access Eugene Cannabis TV show (ECTV) at 7:00pm. **Contact:** Cannabis Liberation Front * PO Box 10957, Eugene, Oregon 97440-2957 * web: <http://eugeneecannabistv.home.comcast.net>

Class by ECC in Eugene, 4:30pm Every Thursday. Cannabis Classes focuses on a different topic each month, providing handouts and a PowerPoint presentation. They have enough presentations organized with handouts and slideshows to do a full OMMA course or selected topics. Talk more with them if you are interested. For information about scheduling a special presentation for your group or event, **Contact:** Compassion Center * 2055 W. 12th Ave., Eugene, OR 97440. Tel: 541-484-6558 * <http://www.compassioncenter.net/> * Office Hours: Tuesday & Friday Noon to 6pm. NOTE: All classes are \$ 10 (except Intro to OMMA) . Classes and events run from 4:30 pm to 6:00 pm unless otherwise noted.

Oregon NORML meets in Portland. The second Saturday of the month has been chosen for the OR-NORML general meetings. All are invited. It would be good for individuals and groups to be there to help push for more state-wide coordination. Come and see what's next for Oregon NORML. **Contact:** Oregon NORML at 503.239.6110 -or- Find more information at: <http://www.ornorml.org/>

Global Marijuana Marches (5/7/05). Happens yearly, first Saturday in May, in Oregon and the world. 100+ cities around the globe marching in unison. Check out listings for the march/rally nearest you.

<continued from STOP BLOCKING, pg 1> The delay continues also despite U.S. Supreme Court Justice Stephen Breyer's recent advice in *Ashcroft v. Raich* that patients seek Food and Drug Administration approval for marijuana as a medicine. But for the FDA to approve marijuana, researchers would need to test marijuana identical to what would be sold to patients -- from the same source, the same genetic strain and grown under the same conditions.

A Little History

In 1988, DEA Administrative Law Judge ruled after a lengthy hearing into the rescheduling of Marijuana that it was "One of the safest therapeutically active substances known to man" and that "It would be unreasonable, arbitrary and capricious [for the DEA] to find otherwise." The result? The DEA rejected their own findings, lost at appeal a few times but eventually won and kept marijuana a schedule 1 drug.

While the hearings, appeals and zero tolerance policies were in full swing at the DEA the US government was quietly supplying medical cannabis to a handful of patients in its Investigational New Drug program. These patients receive a large tin filled with hundreds of machine rolled joints grown and processed at NIDA's pot farm at the University of Mississippi every month. Each patient receives over 6 pounds of cannabis a year for free and this program is over thirty years old. Each patient also carries a government ID card that protects them from local and federal arrest in the US – even aboard aircraft after September 11th. These patients are ostensibly in a federal research program but no government research has been done on them to discern either the harmful effects of long term smoking or the beneficial effects of cannabis on their various conditions.

Private research done by Dr Ethan Russo (available at <http://www.maps.org/mmj/russo2002.pdf>) into the health of these individuals has shown them to be remarkably well. Most lead productive lives despite their disabilities and one is even a successful stock broker- the antithesis of the couch bound stoner we so often see parodied and propagandized.

There is more to Cannabis than THC – the "active" psychotropic ingredient banned and demonized by bureaucrats and demagogues alike. The Jerusalem Post reports that an acid derived from Cannabidiol "code named HU-320, is a potent anti-inflammatory agent. HU-320 is comparable to the known drug indomethacin, but without the known and considerable gastrointestinal side effects caused by that drug." The Israeli Defense Force has begun experimenting with cannabis as a treatment for soldiers with Post Traumatic Stress Disorder. PharmosCorp, also located in Israel, has begun marketing Dexanabinol for treatment of Traumatic Brain Injury – just in time to fill the void after steroids (until recently used to treat TBI's) were found to increase the death rate in TBI patients by 20%.

Vioxx, Celebrex, Naprosyn, Ibuprofen and Bextra are all anti-inflammatory drugs that have been used for years and which have all either been pulled off the market by the FDA or issued strident new warnings about side effects as serious as a heart attack. This compares to Cannabis which has no known toxicity level, is slightly less addictive than caffeine and has yet to kill anyone. But don't take my word for it; check out the actual addiction studies

by Dr. Jack E. Henningfield of the National Institute on Drug Abuse and Dr. Neal L. Benowitz of the University of California at San Francisco. Read DEA Administrative Law Judge Francis L. Young's report online and look at the research other countries are doing before making an informed decision on the topic.

The National Institute on Drug Abuse is the only legal source for marijuana for research, but NIDA's marijuana is available only for research, not for distribution -- leaving scientists with no way to test the same product that would be sold. An effort by the University of Massachusetts to solve this problem by establishing a facility to grow marijuana specifically for research aimed at developing it as a prescription drug was blocked by the federal DEA on Dec. 10 (www.mpp.org/pdf/DEA.pdf).

The bottleneck for legitimate researchers is that the agencies that are hostile to medicinal marijuana are the gatekeepers of its supply. Two suggestions:

Federal agencies such as the DEA should stop blocking legitimate research that is conducted with proper security.

Until the agencies stop erecting unreasonable barriers, the Supreme Court and federal appeals courts should recognize that FDA approval is not currently a viable option, so patients need to be afforded full protection of their states' laws.

The government players: Who's who?

Drug Enforcement Administration (DEA)

Agency that has the final say on whether marijuana has acceptable medical use. Researchers wanting to test the medical validity of marijuana must first get permission from the DEA-- which is rarely granted. For example, in December, the DEA rejected University of Massachusetts Amherst Professor Lyle Craker's 2001 request for a license to grow marijuana for FDA-approved research.

Department of Health and Human Services (HHS)

Arm of the government responsible for writing up the opinions that tell the DEA which drugs should be considered controlled substances. Food and Drug Administration (FDA)

An HHS underling agency whose Center for Drug Evaluation and Research runs clinical studies to determine which drugs are "safe and effective" for consumer use. CDER has said it supports independent research into the medical benefits of marijuana, but that those researchers must go to the NIDA to obtain that marijuana.

National Institute on Drug Abuse (NIDA)

The go-to place for supplies of marijuana to be used for research.

Unfortunately, researchers claim that NIDA provides low-potency marijuana and is prejudicial in its decisions on whom to dole it out to. And if researchers want to grow their own marijuana, they must get permission from the DEA (see above).

<continued from OMMP Changes, pg 1> do their best to keep you updated. To discuss or propose changes one can attend the public Administrative Review meetings hosted by the OMMP. The next is:

February 16, 2005
9:30a to 11:30a
Portland State Office Bldg, Rm 918
800 NE Oregon Street
Portland, Oregon

You can also keep up on Public Meeting Notices by visiting the OMMP website at: <http://www.ohd.hr.state.or.us/mm/>

To get full advantage, be fully informed. Read the text of (OMMA) the Oregon Medical Marijuana Act, and the other documentation available, to understand the legal conditions and restrictions which govern medical growing and use of cannabis in Oregon.

Contacting the OMMP:

OHD - Oregon Dept. of Human Resources Health Division
800 NE Oregon Street, #21 * Portland, OR 97232-2162
(503) 731-4030 - Emergency phone number
(503) 731-8310 - Medical marijuana program
(503) 731-4080 - FAX * (503) 731-4031 - TTY (nonvoice)
WEBSITE: <http://www.ohd.hr.state.or.us/mm/index.cfm>

HOW TO - a Guideline for Completing the Application for Registration in the Oregon Medical Marijuana Program.

(1) Get Forms and begin the process of Applying. **Get and fill out the Application for Registration in the Oregon Medical Marijuana Act Program.** Call (503) 731-4002, ext. 233 and ask a representative of the Oregon Health Division for an OMMA application packet – or – write to OHD, P.O. Box 14450, Portland, OR 97293-0450 and they'll send you one. Or visit their site and download forms from there.

NOTES: (a) Please complete Part A of the Application Form. Please provide a copy of a photo identification card as requested. If information on the front of the card is not current (for example, if your address has changed) please also photocopy the back of the id. (b) If a person over the age of 18 provides assistance to you, and you would like for that person to also receive a registration card, please complete Part B of the form, and provide a copy of photo i.d. of the primary caregiver. [Note: there is no additional fee for a primary caregiver registration card.] (c) Completion of Part C is optional. Please be sure to sign your name in Part D. (d) If you are a minor (under the age of 18), your parent or guardian must complete the Declaration of Person with Primary Custody of a Minor form. The form must also be notarized.

(2) Set an appointment & have your doctor sign the Oregon Health Dept. form – or – get a copy of your chart notations showing medical marijuana "may help alleviate symptoms". Your physician must be an MD or a DO licensed to practice in Oregon under ORS 677. He or she must provide signed, valid, written documentation stating that you are his/her patient, that you have been diagnosed with a debilitating medical condition covered by the Act, and that the medical use of marijuana may mitigate the

symptoms or effects of your condition. This documentation may be in the form of a copy of your chart notes, a letter, or the attached Attending Physician's Statement form. [Note: chart notes or a letter must include all elements of the Attending Physician's Statement form.]

(3) Send in your application with registration fee. In order for your application to be complete, the fee must be paid by check or money order. Please make payable to: Oregon Health Division and send payment with your application forms and/or other materials. All information will be verified. Upon receipt of a complete application, you will be issued a medical marijuana registration card by the Oregon Health Division. Call them at (503) 731-4002, ext. 233 if you have any questions.

(4) Wait. All information will be verified. Upon receipt of a complete application, you will be issued a medical marijuana registration card by the Oregon Health Division.

How you can help implement OMMA

As a Patient -

* **Tell everyone you know your anecdotal experience** (what happen to your body in your own words) when you use medical marijuana as opposed to other drugs you've taken.

* **Educate yourself** so you can share the information with others that think they are opposed.

* **Don't flaunt your medical marijuana usage.** While you should talk openly about the therapeutic benefits of cannabis for yourself, you should be discrete and considerate in obtaining and consuming it - Use responsibly as you would any other medicine. Medicating should be personal.

As a Citizen -

* **Register, Vote and Get EVERYONE to do so also!**

* **Join a local group of patients and caregivers.** Help educate your circle of support about OMMA and the medical properties of marijuana and in general. Help with the implementation of the OMMP. Listen to talk radio and start calling in. Visit local media websites that have forums and start talking about the Issues.

Volunteers are needed to carry out these efforts:

- Speaking before public interest and community groups.
- Postering and passing out flyers.
- Staffing information tables at public events and concerts.
- Letter-writing campaigns and phone trees.
- Producing benefit concerts - including musicians, nightclub managers, owners, booking agents and technical workers.
- Donating money, goods or services, e.g. photocopying, printing and design work. Any writing, photography, cartoons, graphics, or other help.

<continued on next page>



THE MERCY NEWS REPORT

MEDICAL CANNABIS RESOURCE CENTER

<continued from previous page> Or launching a particular project for which you need the help of other volunteers and/or MERCY's authorization to act in its name.

The single most important step you can take is to end Medical Cannabis Prohibition. To help in that, join the Medical Cannabis Resource Center and help us in this fight. Membership dues are \$50 yearly (payable by check, money order). Thru our media we'll keep you apprised of the latest developments in the field and alert you when a vote is scheduled and the need is crucial for a letter to your state or federal elected officials. You'll be informed of state and regional events where you can meet other advocates and help shape reform efforts. SORRY! Not yet tax deductible.

ORGS and Resources

The contacts below are a few of the activists and groups dedicated to the implementation of OMMA and welcome inquiries from those with questions or issues. They provide one or more of the following services: Doctor Referrals and Patient Networks; either a caregiver (how to grow) or related Organization formed to help patients get their medicine; they may have help on filling out forms as well as contact with current Patients. *Caveat emptor! Each has it's own rules and regulations, please study & research thoroughly before committing resources.*

Activists & Orgs:

: **The Hemp & Cannabis Foundation (THCf)** * 4259 NE Broadway St. PORTLAND (Hollywood dist) - call for an appointment: 503.235-4606 * <http://www.thc-foundation.org>

Oregon Green Free * 11918 SE Division St., #122. Portland, OR 97266 * 503.760-2671 * web: <http://www.oregongreenfree.com/>

Oregon NORML * PO Box 86443, Portland, OR 97286 * 503.239.6110 * or visit: www.ornorml.org

Contigo-Connigo * Monmouth, Oregon
<http://www.or-coast.net/contigo/>

Eugene Compassion Center 2055 W. 12th Ave., Eugene, OR 97402 * PH# (541) 484-6558 FAX (541) 484-0891 * Office Hours: Tuesday and Friday - Noon to 6pm
<http://www.compassioncenter.net>

Oregon Green Cross * PO Box 342, Independence, OR 97351 * <http://www.oregongreencross.org/>

American Alliance for Medical Cannabis - Oregon * P.O. Box 47, Arch Cape, OR 97102-0047 * <http://home.pacifier.com/~alive/aamcoregon.htm>

Alternative Medicine Outreach Program (AMOP) * ROSEBURG * 541.459-0542

Mothers Against Misuse and Abuse (MAMA) * Local Patient advocacy as well as national Drug Policy Reform.
* 2255 State Road, Mosier, OR 97040 *
ph/fax: 541-298-1031 * e/m: sandee@mamas.org *
<http://mamas.org>

Southern Oregon Voter Power (SOVP) * JACKSONVILLE * 541.890-0100

GW Pharmaceuticals Inc. * a pharmaceutical company developing a portfolio of prescription medicines derived from cannabis to meet patient needs in a wide range of therapeutic indications. Contact: Porton Down Science Park, Salisbury, Wilts, SP4 0JQ, United Kingdom * Tel: 01980 557000 * Fax: 01980 557111 * <http://www.gwpharm.com/>

Cannabis Medicine Internationale (IACM) * a scientific society advocating the improvement of the legal situation for the use of the hemp plant and its pharmacologically most important active compounds, through promotion of research and dissemination of information. Contact: IACM - Cannabis Medicine Intl * Arnimstrasse 1A, 50825 Cologne, Germany * Phone: +49-221-9543 9229 * Fax: +49-221-1300591 * <http://www.acmed.org/>

Web sites to visit:

* A guide to OMMA and medical cannabis in general. The OMMA Web Page by Rick Bayer, MD. Visit:

www.omma1998.org

* 1999 Institute of Medicine/National Academy of Sciences Report "Marijuana And Medicine: Assessing The Science Base" By Janet E. Joy, Stanley J. Watson, Jr. And John Benson Jr., Editors. Visit:

www.nap.edu/catalog/6376.html

Grow Information:

The "Garden Guy", an individual providing free grow information:

<http://www.ornorml.org/garden.html>

where possible and paid, organized classes where necessary.

Books to get and read:

Marijuana Medical Handbook by Rosenthal, Gieringer and Dr. Mikuriya, "A Guide to Therapeutic Use". ISBN#0-932551-16-5 \$16.95

Is Marijuana The Right Medicine For You? By DR's Zimmerman, Bayer and Crumpacker, ISBN#0-87983-906-6 (Keats 1998)

The Emperor Wears No Clothes By Jack Herer, The Original Hemp Bible. ISBN#1-878125-02-8 \$24.95