



Community Reacts To Protect Medical Marijuana Program

Activists Just Say NO To Senate Bill 388

In brief, SB388 is a bunch of bad things demanded by special interests within Law Enforcement and their shells.

It is the majority opinion of the medical cannabis community in Oregon that people should contact Senator Morrisette and the rest of the Ways and Means committee and politely but firmly request this bill be killed.

Officially, SB 388 was introduced by Sen. Morrisette at the request of the Stormy Ray Foundation (SRF), who basically put it together under the direction of LEO lobbyists.

This is a synopsis of the latest version of SB 388:

- 1) Limits an address to 24 plants no matter how many patients are being grown for.
- 2) Limits a grower to 24 ounces no matter how many patients they grow for

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MERCY Expands On The Gatherings

Beginning April 28th, MERCY will be hosting meetings at the Gathering Place Tuesdays, Wednesdays and Thursdays.

Tuesdays and Thursdays from Noon til 4pm and Wednesday evenings from 7pm til 9pm the Gathering Place will be open to receive visitors and allow people to network on and about medical cannabis. The place offers a unique opportunity for the cardholders in the Salem area as the owners are allowing folks to exchange resources and even medicate on-site.

There is no fee to attend and non-cardholders and the public are welcome whether just there to get info or waiting for a cardholding acquaintance. We facilitate their accommodation and have info on how to get your card, as well as other literature, available for them. **The Gathering Place is in Keizer and is located at 7845 River Road NE, 97301.** For more info, maps and directions, visit our website.

Campaign Continues To Add Medical Cannabis For PTSD To OMMP

Post-traumatic stress disorder (PTSD) is a psychiatric illness that can occur following a traumatic event in which there was threat of injury or death to you or someone else. PTSD may occur soon after a major trauma, or can be delayed for more than six months after the event. When it occurs soon after the trauma it usually resolves after three months, but some people experience a longer-term form of the condition, which can last for many years.

We are pleased to report that Efforts are underway to add PTSD to the List of Qualifying Conditions to Register with the Oregon Medical Marijuana Program (OMMP). Edward Glick, activist, is petitioning the Oregon Medical Marijuana Program to add Clinical Depression, Depressive Symptoms,

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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.

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www.MercyCenters.org

Check it out!

The MERCY News Report is produced by virtue of the expense and energy of the members and staff of MERCY, the



About MERCY

MERCY is a not-for-profit, grass roots organization founded by patients, their friends and family and other compassionate and concerned citizens in the area and is dedicated to helping and advocating for those involved with the Oregon Medical Marijuana Program (OMMP). MERCY is based in the Salem, Oregon area and staffed on a volunteer basis.

The purpose is to get medicine to patients in the short-term while working with them to establish their own independent sources. To this end we provide, among other things, ongoing education to people and groups organizing clinics and other Patient Resources, individual physicians and other healthcare providers about the OMMP, cannabis as medicine and doctor rights in general.

The mission of the organization is to help people and change the laws. We advocate reasonable, fair and effective marijuana laws and policies, and strive to educate, register and empower voters to implement such policies. Our philosophy is one of teaching people to fish, rather than being dependent upon others. Lasting change will require that each citizen be active enough to register and effectively vote. You, and only you, the people, can make it happen. We will help in any way we can, but you have to tell us what you need. Work with us to make this your "tool shed", or resource guide, to successful medical cannabis utilization and activism.

Meetings and Meet-Ups

Networks and Meet-Ups; Patients in the 'Hood. To update folks with current status and action items surrounding the issues affecting the medical cannabis community as well as registering voters, distributing literature and networking ideas. One of the missions of MERCY is to establish regular get-togethers in each community where there are (or will be!) medical cannabis patients.

The purpose is to get patients networking and self-sufficient within their neighborhoods, assist those seeking information about the MMP and pass on (or pick up!) action items of interest to the group. Regular meetings are being established around the state and MERCY will continue to help make them happen and network folks to them.

The goal of the meetings s/be to service:

- * **People** seeking to join the MMP 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.

Please help us help the sick and dying, For more info or **If you have any information or ideas, Places to Meet or other Resources for Oregon, please let us know. Contact MERCY - the Medical Cannabis Resource Center by phone: 503.363-4588 or email: info@mercycenters.org**

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Current EVENTS

*** every last Thursday of the Month, 7:00pm to 9:00pm * TV Show filming and Patient MeetUp hosted by MERCY-TV** at CCTV in Salem, at Capital Community Television, 575 Trade St, Salem, Oregon, 97301 - Monthly Filming and Meeting * call: 503.363-4588 or visit - <http://mercycenters.org/tv/> - for more

More Meetings and Meet-Ups on Page 7 !

*** Every 1st Monday of the month, 7pm (except September, no meet) * Medical Cannabis Network opportunity in Sweet Home.** Public Meet Up of Sweet.Net, a Medical Cannabis Resource NetWork for Patients as well as CardHolders-to-be. In Sweet Home (OR) * A Meet Up has been arranged by MERCY associate Dorothy Westofkansas at the American Legion Building, 1127 Long Street, Sweet Home, Oregon, 97386 starting at 7pm. The purpose is to establish a regular networking of Patients, Caregivers and Interested Parties in the area.

For the latest info about Meetings and Meet-Ups, call MERCY at: 503.363-4588 -or- visit: <http://www.mercycenters.org/>

<continued from "ACTIVISTS SAY NO", pg 1>

- 3) Requires special OMMP exemption to allow grower or caregiver to store patients' medicine
- 4) Limits hash to 2 ounces out of the 24 ounces a patient may possess.
- 5) Allows DHS inspection of growsite as part of mediation process
- 6) Allows DHS to suspend growers card after investigation
- 7) Increases seedling size to 18 inches
- 8) OMMP to publish OMMA handbook
- 9) Cardholders must swear they understand handbook
- 10) Allows DHS to do research into medical marijuana (taken from Initiative #28)

IF this bill passes as is, advocates are saying, they absolutely can no longer assist patients in residential care and hospice - They will go without medical marijuana...period. LOT of help

this will be for those folks. These patients are not able to come to a place, even could the place handle the safety/traffic/security concerns.

WHAT was the thinking behind all this? Activists have shared with us how AWFUL they feel, being faced with telling their patients they can no longer help them?...some will die! And they are NOT blowing this out of proportion. Many are in angst, thinking of how they are going to tell their hospice patients - the quadriplegics, those with advanced AIDS, advanced MS, awful neurological diseases who they have been helping with medicine at no cost, that they will no longer be able to help them with medical marijuana, should SB 388 pass.

ALL being told they will have to go to the black market for their medicine, thus, getting only a very small percentage of what they therapeutically need. This is the reality of what they will face, plain and simple. Sadly, they cannot refer them elsewhere, because the program will at LEAST double those with no growers.

While A perspective is that the medicine should be stored with the patient may be good for many patients, what about those with "impaired judgment"? Like those with AIDS related dementia or Alzheimer's, some OMMP patients, if they are given 2 pounds of "green medicine" will chain-smoke the entire amount within a few days. In residential care, it is against fire laws to smoke in one's room, so they would be evicted. We seriously doubt this is in the best interests of these patients. These will not be allowed to live where they do and be OMMP patients. Not to mention the potential threat to the patients by fire, and those other residents of the facility.

The language mandates that DHS must prepare a manual & that the manual must be in "formats that accommodate persons with disabilities." What is the estimate of the costs to the DHS (and ultimately the patients) to have such manuals printed in Braille or to be made available in digital electronic & audible

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< continued from previous page > book formats? We believe that all proposals which include additional costs should be estimated and made known to those affected. In addition, only the most naïve persons would think that any of this verbal detritus might have any effect for patients except to increase the difficulty in obtaining a grower.

Another item that is confusing to some is that in 2007 the legislature specifically authorized cooperative gardens. Jeff Kruse did this in response to a question posed by John Sajo of Voter Power. Mr. Sajo explained how he provided for 6 patients and asked if being limited to 4 was simply a paperwork problem. Sen. Kruse responded by saying nothing in the legislation was intended to impair cooperative gardens.

There are some large outdoor gardens with large plants but so what? How is this 'a substantial increase in abuse'? The cooperative gardens work well for the patients.

And so the calls and emails keep coming in with many activists eloquently describing how SB 388 will impact their care of patients, depriving many of their gardens. This is based on the Program Statistics presented by the OMMP at the most recent ACMM meeting where they detail the number of patients whose growsites have how many other patients.

These statistics also indicate that 11,290 growsites are for one patient. But we still do not know what number of these patients actually have a garden. Many of these patients merely list an address as their growsite even though they do not have a garden there, because patients are required to list a growsite or their application will be rejected.

It is crystal clear that SB 388 will reduce the amount of medicine available to patients. This is proposed as a response to "abuse" of this program. But there is no evidence that the patients who will be deprived of medicine had anything to do with any abuse or that their growers did. This is collective punishment of the worst kind - depriving a patient of medicine because of what someone else allegedly did.

This change is wholly unnecessary, given the

distribution of patients/growsite info provided by the OMMP. There is no problem, and this "reform" merely harms patients.

We must stop SB 388.

While no one can be faulted for trying to ameliorate the evil that law enforcement seeks to do with the OMMA, the underlying premises are incorrect in this case.

Law enforcement is not a stakeholder. Protecting patients and their providers from Law Enforcement is the reason for the OMMA. There doesn't have to be a 388. There is no urgent need to limit the amount of concentrated cannabis (hashish or hash oil) a patient or a patient's provider can have. 'Significant increase in abuse' is a lie.

Despite any supposed merits of the bill, the political process leading up to this bill passing out of committee is clearly absurd. Unfortunately, a bill that literally affects the life and death of over 23,000 patients (not to mention the freedom of another 10,000 or so caregivers and gardeners) is being negotiated behind close doors. Not to mention the fact that the negotiation is being conducted by law enforcement lobbyists - who would just as soon re-criminalize patients anyway - with only a patient advocacy group that seems to consist of a handful of people.

Our community, with the exception of the SRF, is united in opposition to these proposals. No real advocate for the people of OMMA supports 388 as it is currently coming together.

We will stand united at each and every hearing, and speak with one voice in our calls and e-mails. If 388 is enacted without an emergency clause we will do a referendum. If it is enacted with an emergency clause, we will file an initiative to repeal it. The OMMA is supported by 2/3rds of registered voters, likely to vote. No effort to repeal the OMMA (or to harm it in the way 388 would) will ever survive a vote by We, The People.

In closing we would suggest that with the economic problems Oregon faces, the legislature would be well advised to forego work on ANY anti-marijuana bill in order to

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< continued from previous page > prevent the session from being sidetracked by the cat fight which will surely happen should this bill go forth. Prohibitionists have more significantly negative things in store for OMMP and we believe that after three sessions on the MMJ subject, it is probably time to give the issue a rest. Then legislators can work on solving the real problems Oregon faces instead of trying to tweak OMMA this way or that in order to please everyone-and end up pleasing no one.

But whatever happens, SB 388 is not supportable by MERCY or as far as we can tell by anyone of the thousands of OMMP folks not in the SRF "summit" group.

We have been good soldiers with many of these legislators that are our so-called friends. But they need to be called out for the political process that has led up to SB 388. Please call, e-mail and visit the committee members to let them know SB 388 must die. And get everybody you know to do so also. It's a numbers game now and we need every single one of you to stand up, speak out and be counted.

Human Services and Rural Health Policy

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We have to get our message across so get to work! Be polite but firm - SB 388 is bad for patients, bad for growers and bad for the OMMP! After that contact your own Senator and then all the rest of them. Contact info for all is here: <http://www.leg.state.or.us/senate/>.

Let that building know that we are here, SRF does not represent us and we are not happy!

Oregon Business Leaders Seek Termination of Medical Marijuana Patients' Right to Work, Yet Data Contradicts Workplace Safety Claims

Portland, OR, USA: The Associated Oregon Industries are planning a legislative assault on Oregon's 10-year-old medical marijuana law, claiming that medical marijuana patients in the workplace are a safety risk. However, data compiled by Oregon NORML, from Oregon state government workman's compensation and safety records, shows a ten-year decline in workplace safety statistics. The data are published and hyperlinked on the Oregon NORML website. (<http://ornorml.org/>)

Harmon, an executive vice president with Hoffman Construction, has been touring the state in his capacity as chair of the Drugfree Workplace Legislative Work Group, giving presentations on their goals for the 2009 biennial legislative session. These goals include re-introducing a bill that died last session that would grant employers the right to fire medical marijuana patients for their off-site, after-hours, legal use of cannabis medicine, as well as allowing employers to refuse to hire any medical marijuana patients—regardless of skill, experience, or a clean safety record.

Hoffman is also touting plans to reduce plant and possession limits, to require patients to first use Marinol before attaining a medical marijuana card; to eliminate medical marijuana clinics by requiring only one's bona fide doctor is recommending cannabis; and to require the state to notify an employer if an employee applies for a medical marijuana card.

"Oregon's own state health and safety databases show that Dan Harmon is misleading the people of Oregon," says Russ Belville, Oregon NORML's Associate Director, who pulled together data from Oregon's Occupational Safety & Health Administration, Workman's Compensation Division, and the federal government's National Surveys on Drug Use and Health. "During the ten years that the Oregon Medical Marijuana Act has been in place, the program has grown from 500

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< continued from previous page > patients to over 20,000 now. Yet, workplace fatalities, time-off injuries, non-time-off injuries, DUIDs, and citations for serious OSHA workplace safety violations have all declined in the same ten years."

"Now that doesn't mean medical marijuana patients made the workplaces any safer," Belville concludes, "but if they made the workplace increasingly more dangerous, that's not showing up in these data. Harmon is offering up job discrimination against the disabled as a poor solution in search of a non-existent problem."

In 1998, after Measure 67 (the Oregon Medical Marijuana Act) was approved by voters, there were 3.3 workplace fatalities per 100,000 workers. There were also 3.5 non-fatal injuries, requiring no time off, and 3.4 non-fatal injuries requiring no time off. By 2006, those figures had dropped to 2.1, 2.4, and 2.8, respectively.

There were 4,446 citations of serious OSHA violations in 1998; in 2005 the number was 4,309. DUI citations, crashes, and fatalities per 1,000 Oregonians dropped from 7.5, 6.5, and 0.16 to 7.0, 5.5, and 0.11, respectively, from 1998 to 2006.

The data, however, may be irrelevant to Harmon. While he cites workplace safety and legal liability as factors in discriminating against medical marijuana patients in the workplace, he and other business leaders in testimony before a House committee in 2007 could not cite one instance where a patient's legal off-site, after-hours use of medical cannabis contributed to any workplace safety incident. Revealing his true intentions, Hoffman was quoted in the Albany Democrat-Herald calling his work a "moral crusade" and that acceptance of medical marijuana "says something about permissiveness in this state, and we've got to stop this permissiveness."

Source http://www.norml.org/index.cfm?Group_ID=7756 - For more information, please see Tables and charts of the data from official Oregon and federal databases appears on the "Data" page at Oregon NORML's website, <http://ornorml.org/data>.

<continued from "PTSD", pg 1> Post-Traumatic Stress Disorder (PTSD), Severe Anxiety, Agitation and Insomnia to Those Diseases and Conditions Which Qualify as 'Debilitating Medical Conditions' under the Oregon Medical Marijuana Act.

"One often intractable problem for which cannabis provides relief is post-traumatic stress disorder (PTSD). I have more than 100 patients with PTSD. Among those reporting that cannabis alleviates their PTSD symptoms are veterans of the war in Vietnam, the first Gulf War, and the current occupation of Iraq. Similar benefit is reported by victims of family violence, rape and other traumatic events, and children raised in dysfunctional families." -- David Bearman, MD; from PTSD and Cannabis: A Clinician Ponders Mechanism of Action.

As un-limited written patient testimony is allowed, everything possible is being done to get it gathered. If you have one of these proposed conditions, please write out your testimony and email it to action item organizer Ed Glick at: glicke@live.com

If you're unable to send via e-mail, contact MERCY and we'll help get it to him. Call **503.363-4588** (in the Salem area) or visit - http://mercycenters.org/action/camp_PTSD.html

SECONDARY CONDITIONS

Another thing that can be done to help add Conditions is for Patients to be sure to add any Secondary conditions that are also being treated with cannabis.

These are typically noted in the Comments section of the ATTENDING PHYSICIAN'S STATEMENT form. So be sure to note any other symptoms / conditions that you utilize cannabis for that are not one of the current official qualifying conditions. ATTENDING PHYSICIAN'S STATEMENT form is at >

<http://oregon.gov/DHS/ph/ommp/docs/newphys.pdf>

Medical Cannabis Information Resources

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

www.omma1998.org

Is Marijuana the Right Medicine for You? A Factual Guide to Medical Uses of Marijuana by Bill Zimmerman, PhD with Rick Bayer, MD and Nancy Crumpacker, MD, ISBN#0-87983-906-6 (Keats 1998). Chapter 3: Why All the Controversy? What Does The Research Actually Show? is online at:

www.medmjscience.org/Media/pdf/chap3.pdf

Oregon State Clinics:

Mothers Against Misuse and Abuse (MAMA) * 5217 SE 28th (Steele & 28th) * 10:00AM to 4:00PM, Tues - Fri * Now holding clinics, call: **503-233-4202** -or- visit: <http://mamas.org/Clinics.htm>

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

Voter Power * 3236 S.E. 50th Ave. * Portland, OR, 97206 * phone: 503-224-3051
Fax: 503-235-5365 or visit:

<http://voterpower.org/index.php/Clinics.php>

*** Forums. A means to communicate and network on medical cannabis in Portland across Oregon and around the world.** A list of Forums, Chat Rooms, Bulletin Boards and other Online Resources for the Medical Cannabis Patient, CareGiver, Family Member, Patient-to-Be and Other Interested Parties. * Visit:

www.mercycenters.org/orgs/Forums.html

Mercy TV is shown on cable in the Salem, Oregon area thru Capital Community

Television, Channel 23. See it TUE @ 10:30pm, THU @ 2:00pm, FRI @ 11:30am -or- SAT @ 8:30pm. Visit - mercycenters.org/tv - for more on M-TV.

MEETINGS and MEET-UPS

Oregon Medical Cannabis Cultivators Club (O.M.C.C.C.) will be holding meetings on the 1st and the 3rd Sunday of each month. Meetings will be held from 4 to 8 PM at Studio 6, which is at 6 Tillamook Street, **Portland**, OR 97212. Call (503) 995-6604 for more info, visit - <http://www.omccc.org/intro.htm> to get directions.

Patient Resource NetWork Meetings 2nd and 4th Saturdays of the month in Portland hosted by Oregon NORML. 2nd Saturdays = OMMP Cardholders Meetings (Clones and Medicine) and 4th Saturdays = OMMP 101 (Learn the Program, Learn the Law; Doors open at 11am, close at Noon; You must be a cardholder in the Oregon Medical Marijuana Program; You must be a member of Oregon NORML. **Visit:** <http://www.ornorml.org/events/cardmtg.html> **for the latest information.**

Oregon Green Free (OGF) is a OMMP CardHolder-based virtual community that networks on-line and arranges meet-ups and other activity around the state. **Contact info:** mail to Oregon Green Free HQ, 2375 SE 174th Ave., Portland, Oregon, or phone: 503.760-2671 * or visit: <http://www.oregongreenfree.com>

OGF Meet-Up Info:

*** Second Saturday of the Month, usually Noon**
* Oregon Green Free (OGF-Eug) Meeting, Growers Market, 454 Willamette St in **Eugene.**

*** 1st Wed of every month * at Stark Street Pizza (Portland), 7 pm * OGF (PDX)**

*** Every 2nd Saturday of the month * at DHS building in LaGrande at Noon * OGF East * The La Grande area chapter holds its meetings at Integrated Services Building (DHS, Sr. & Disabled) 1607 Gekeler Lane, which is on or near the Blue Mountain Community College.**

*** Every 3rd Saturday of the month * at the Tigard Town Hall (Tigard) at 12:30 * OGF PDX West ***

*** Every 3rd Saturday of the month * at the Cape Ferrelo Fire Hall, north of Brookings - from 1pm til 4pm * OGF-South-Coast * The Cape Ferrelo Fire Hall is at 96349 Cape Ferrelo Road, Brookings Oregon. Cape Ferrelo Road East is off HWY 101 north of Brookings, about 3 miles up on the left.**

*** Every 4th Saturday of the month * at Big Blue, the Oregon Green Free (OGF) Patient Resource Center at 2 pm * OGF-PDX-East * Meeting, open to the public. * Big Blue is located at 2375 SE 174th Ave., Portland, Ore. 97233 * Ph: 503-760-2671 * Fax: 503-715-0120**

*** Every 4th Saturday of the month * in the Westlake Restaurant in Seaside at Noon * OGF North Coast ***



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

NOTE: You must be an Oregon resident to be a registered patient in the Oregon Medical Marijuana Program (OMMP). You must have a qualifying debilitating medical condition as listed on the Attending Physician's Statement.

1. Malignant neoplasm (Cancer)
2. Glaucoma
3. Positive status for Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS)
4. Agitation due to Alzheimer's Disease
5. A medical condition or treatment for a medical condition that produces for a specific patient one or more of the following: (check all that apply)
 - a. Cachexia
 - b. Severe pain
 - c. Severe nausea
 - d. Seizures, including but not limited to seizures caused by epilepsy
 - e. Persistent muscle spasms, including but not limited to spasms caused by multiple sclerosis

Step (1) - Get and fill out the Application for Registration in the Oregon Medical Marijuana Act Program. Get Forms from the OHD and begin the process of Applying. The OMMP sometimes has packets at the front desk (Oregon Health Division, 800 NE Oregon St., Portland, OR 97232), or call (971) 673-1234 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 website:

<http://oregon.gov/DHS/ph/ommp/>

... and download forms from there.

Form Instruction 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.

Step (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.]

Step (3) - Send in your application with registration fee. In order for your application to be complete, a fee of must be paid by check or money order. As of Jan. 1st, 2006, the fee is determined by the following:

- * \$100 for new applications;
- * \$100 for renewal applications;
- * \$20 for applicants who are enrolled in the Oregon Health Plan or who receive federal Supplementary Social Security Income.

To qualify for the \$20 fee, applicants must submit documentation that verifies they are on the Oregon Health Plan or are receiving Supplemental Social Security income Please make payable to: Oregon Health Division and send payment with your application forms and/or other materials. All information will be verified.

Step (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. Please call (971) 673-1234 if you have any questions.

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