

**STEVE SARICH, STEVE FAGER,
JOHN WORTHINGTON,**

Petitioners,

vs.

**WASHINGTON STATE BOARD
OF PHARMACY**

Respondent,

**APPEAL TO THE GOVERNOR
UNDER RCW 34.05.330.**

APPEAL TO THE GOVERNOR

Comes now petitioners Steve Sarich, Steve Fager and John Worthington (heretofore petitioners), under RCW 34.05.330, to file an appeal with the Governor of Washington State, of the July 18, 2011 Washington State Board of Pharmacy (Heretofore BOP) decision to deny a petition to hold a hearing to reschedule marijuana in the Washington State Uniform Controlled Substances Act.

The petitioners alleges that the legal precedence regarding the issue of relying on section b of RCW 69.50.203 to deny petitions to reschedule marijuana have been clearly established for 37 years since NORML v. Ingersoll, 497 F.2d 654 (DC Cir. 1974). The factors considered in this federal court case were that: “Congress contemplated that the classification set forth in the Act as originally passed would be subject to continuing review by the executive officials concerned, taking into “account studies and data not available to Congress when the Act was passed in 1970.” “Section 202 of the CSA, 21 U.S.C. § 812, establishing the schedules of controlled substances, provides that "such schedules shall initially consist of the substances listed. Put in a larger setting, the provisions for modification of Schedules betoken the same approach of ongoing research, study, and supplemental consideration that characterize other

provisions.” “The Controlled Substances Act is the short title for Title II (Controls and Enforcement) of the Comprehensive Drug Abuse Prevention and Control Act of 1970. Other provisions of the legislation provided for studies and research by HEW or contracting agencies, for coordination of ongoing studies and programs in the White House under the Special Action Office for Drug Abuse, and for establishment, see § 601, CSA, of a Presidential Commission on Marihuana and Drug Abuse.” “The House Report recommending that marihuana be listed in Schedule I notes that this was the recommendation of HEW "at least until the completion of certain studies now under way," and projects that the Presidential Commission's recommendations "will be of aid in determining the appropriate disposition of this question in the future." H.R. Rep. No. 91-1444 (Part 1), 91st Cong., 2d Sess. (1970) at p. 13.” This decision was referred to in subsequent federal court rulings in U.S. v. Troy, Part II, as shown below:

In NORML v. Ingersoll, 497 F.2d 654 (D.C. Cir. 1974) the Court of Appeals noted that the classification scheme was a cardinal feature of Congress' effort to rationalize the Federal Government's control program. Pursuant to this classification program, the Act and its administrators would grade drugs subject to control on the basis of their dangers and benefits. In addition, the Court specifically noted that "Congress contemplated that the classification set forth in the Act as originally passed would be subject to continuing review by the executive officials concerned.. Provision is made for further consideration, when taking into account studies and data not available to Congress when the Act was passed in 1970. In short, the provisions for modification of Schedules are based on an approach of ongoing research." Id., 497 F.2d 657-658.

The” Executive officials”, or in this case “The BOP”, has a corollary responsibility to give appropriate consideration to petitions for reclassification. And, indeed, certain state petitions have been designated for official consideration.(See Iowa Board of Pharmacy petition filed by Carl Olsen)

"the clear case of a filing that patently is either deficient in form or a substantive nullity." *Municipal Light Boards v. FPC*, 146 U.S.App.D.C. 294, 298, 450 F.2d 1341, 1345, [**14] (1971) cert. denied, 405 U.S. 989, 31 L. Ed. 2d 455, 92 S. Ct. 1251 (1972).

The BOP, is supposed to be conducting a limited inquiry when they consider these petitions to introduce evidence or studies to consider at a formal administrative hearings process, However, for 3 years running the BOP has been issuing formal findings of facts at these business meetings in which only a limited inquiry is to be conducted. The federal standard for this process was mentioned in the rulings in Norml v Ingersoll as follows.

"the clear case of a filing that patently is either deficient in form or a substantive nullity." *Municipal Light Boards v. FPC*, 146 U.S.App.D.C. 294, 298, 450 F.2d 1341, 1345, [**14] (1971) cert. denied, 405 U.S. 989, 31 L. Ed. 2d 455, 92 S. Ct. 1251 (1972). As the court there put it, the rejection of a filing is a "peremptory" response "which classically is used not to dispose of a matter on the merits but rather as a technique for calling on the filing party to put its papers in proper form and order. Its use is not limited to defects of form. It may be used by an agency where the filing is so patently a nullity as a matter of substantive law, that administrative efficiency and justice are furthered by obviating any docket at the threshold rather than opening a futile docket." 146 U.S.App.D.C. at 299, 450 F.2d at 1346. In this case there is no procedural defect or failure to comply with a clear-cut requirement of law. What accounted for respondent's action is his conclusion on the merits that the petition sought action inconsistent with treaty commitment.

The BOP did not cite the petition as deficient and did not claim the evidence and studies submitted were a substantial nullity, the BOP effectively ruled that the federal decision to place marijuana was a permanent decision which eliminated the very process of taking in any evidence or studies and not an Initial decision, and that the BOP was bound by that decision and was not required to except evidence and studies to support a reclassification of marijuana. The BOP is required to accept evidence and studies as part of an ongoing process, and they are not legally able to evade an otherwise mandatory provision. The Court in Norml v Ingersoll stated the following:

On appeal to this court, Government counsel argues that the structures of the treaty (Art. 21) and pertinent statutes (CSA § 306) are such that the only way to satisfy treaty obligations is by control under Schedule I. But this is argument of counsel, which cannot take the place of reasoned decision-making by the official or agency concerned. And petitioners join issue on the meaning of the Treaty and the nature of the required mechanics.

The required mechanics are a drug classification scheme, and The BOP is part of that classification scheme that was designated the responsibility to take in evidence and studies for the purposes of an ongoing process to classify drugs, and is not a puppet organization operated by any federal agency or Governor of Washington State. In denying the petitioners petition without accepting the petitioners evidence and studies for review in an official administrative law hearing, the BOP is in dereliction of the duties imposed on them by the legislature, as intended by Congress as part of a drug classification scheme, and the BOP standing in the way of the petitioners 10th Amendment rights to exercise state rights. The BOP decision to deny the petitioner's petition based on a claim that the decision to reclassify is somehow either barred, or in this case, was already made for them by a federal agency, which is tantamount to admitting that they, (BOP) serves no legitimate regulatory purpose. It also suggests that the ongoing classification process, which Congress intended, was now a closed classification process which required no further studies or evidence.

The petitioners assert that the federal courts have determined that the international Treaties, and the CSA sections designed to honor the international treaty, are not cause to deny a petition to submit evidence and studies in what Congress intended to be an ongoing process. The BOP decision to deny the petitioner's petition, without an official administrative hearing would also suggest that only pharmaceutical companies are allowed to submit new evidence or studies, when in fact Congress has shown no such preference.

In Section 201(a)-(c), Congress created a procedure by which any "interested person" could petition the Attorney General or his delegee (BOP) to reschedule a controlled substance.

It was explained to the BOP and their legal counsel in the petition itself and during the business meeting, that the BOP had to consider other decisions in other states. This is shown in the Full Faith and Credit Clause -Article IV, Section 1, of the U.S. Constitution- implemented by 28 U.S.C.A. § 1738 as shown below:

The Acts of the legislature of any State, Territory, or Possession of the United States, or copies thereof, shall be authenticated by affixing the seal of such State, Territory or Possession thereto. The records and judicial proceedings of any court of any such State, Territory or Possession, or copies thereof, shall be proved or admitted in other courts within the United States and its Territories and Possessions by the attestation of the clerk and seal of the court annexed, if a seal exists, together with a certificate of a judge of the court that the said attestation is in proper form. Such Acts, records and judicial proceedings or copies thereof, so authenticated, shall have the same full faith and credit in every court within the United States and its Territories and Possessions as they have by law or usage in the courts of such State, Territory or Possession from which they are taken.

This is also reflected in the Washington State Uniform Controlled Substances Act itself if RCW69.50.603-Uniformity of Interpretation as shown below:

This chapter shall be so applied and construed as to effectuate its general purpose to make uniform the law with respect to the subject of this chapter among those states which enact it. [1971 ex.s. c 308 § 69.50.603.]

In addition, the next phase of this administrative appeal process the administrative law courts are bound by RCW 34.05-001 as shown below:

The legislature also intends that the courts should interpret provisions of this chapter consistently with decisions of other courts interpreting similar provisions of other states, the federal government, and model acts.

The BOP members and their legal counsel were properly shown that they were not interpreting the Uniform Controlled Substances Act consistently with Oregon, and the courts in Iowa and making "uniform the law".

In their denial, the BOP failed to adhere to RCW 34.05.330 (a) (i) (ii), and address most of the concerns raised by the petitioner nor did the BOP identify any alternate means by which it will address the concerns raised by the petitioners.

(a) deny the petition in writing, stating (i) its reasons for the denial, specifically addressing the concerns raised by the petitioner, and, where appropriate, (ii) the alternative means by which it will address the concerns raised by the petitioner, or (b) initiate rule-making proceedings in accordance with RCW 34.05.320.

The BOP simply referred to a section of the Washington State Uniform Controlled Substances Act, section b of RCW 69.50.203, which they believed allowed them to not only deny the petition, but to also ignore the provisions of RCW 34.05.330 (a) (i) (ii) as well.

The Governor has indicated that she has a personal belief that marijuana has accepted and effective medical use, and that she would use her political power to influence the rescheduling of marijuana. This can be accomplished on a state level, and the BOP should be ordered to commence rule making to begin the process of doing what the Governor claims she supports. This appeal will ferret out the veracity of her public statements to that affect, and determine if the Governor really meant what she said about rescheduling marijuana.

CONCLUSION

Considering the aforementioned facts, the petitioners respectfully requests the Governor to order the BOP to conduct proper rule making procedures under RCW 34.05.330 (3) (b) in accordance with RCW 34.05.320.

Dated this 21ST day of July. 2011, By:

S/JOHN WORTHINGTON
JOHN WORTHINGTON

S/STEVE SARICH
STEVE SARICH

S/STEVE FAGER
STEVE FAGER

STATE OF WASHINGTON
BOARD OF PHARMACY

In re Petition to Amend Administrative
Rule Submitted by

CannaCare, Cannabis Defense Coalition,
American Alliance for Medical Cannabis,

Petitioner.

DECISION DENYING PETITION
FOR RULE-MAKING

THIS MATTER having come before the State of Washington Board of Pharmacy (Board) on June 8, 2011, on the Petition For Adoption, Amendment, or Repeal of a State Administrative Rule submitted by CannaCare, Cannabis Defense Coalition, American Alliance for Medical Cannabis, and “a broad coalition of other organizations and individuals,” and received by the Board electronically on May 19, 2011, and by mail on May 23, 2011, the Board, having reviewed the petition, heard the statements by representatives from CannaCare, Cannabis Defense Coalition and American Alliance for Medical Cannabis, and being otherwise fully advised, acknowledges the following:

I. PROCEDURAL HISTORY

1.1 On May 19 and 23, 2011, the Board received the Petition for Adoption, Amendment, or Repeal from John Worthington, representative of The American Alliance for Medical Cannabis. The petition asked the Board to “repeal marijuana from the Washington State

Schedule I designation that is contained in WAC 246-887-100.” At the Board’s meeting on June 8, 2011, it was clarified that the petition is to *amend* WAC 246-887-100 to remove marijuana from the list of Schedule I controlled substances.

1.2 At the Board’s meeting on June 8, 2011, Mr. Worthington appeared on behalf of The American Alliance for Medical Cannabis, Steve Sarich appeared on behalf of Cannacare, and, while Steve Fager was not present to speak on behalf of the Cannabis Defense Coalition, a person identified as the Coalition’s attorney, responded to questions from the Board on behalf of the Coalition.

II. STATEMENT OF LAW

2.1 The petition for rule-making was submitted under the authority of RCW 34.05.330. The petition asked for an amendment to WAC 246-887-100 to remove marijuana from the list of Schedule I controlled substances.

2.2 The petition requested the Board to open rulemaking to “apply the Washington State Schedule 1 test outlined in RCW 69.50.203,” and stated that State acceptance of medical use for marijuana would require reclassification of marijuana by the federal government.

2.3 Washington’s legislative enactment of the test for Schedule I under Washington law is RCW 69.50.203. The Board of Pharmacy is allowed to place a substance on Schedule I upon finding three listed criteria in RCW 69.50.203(a). The Pharmacy Board is granted discretion to place and retain marijuana on Schedule I under Washington’s Controlled Substances act without making findings required by RCW 69.50.203(a) “if the substance is controlled under Schedule I of the federal Controlled Substances Act by a federal agency as the result of an international treaty, convention, or protocol.” RCW 69.50.203(b).

2.4 Petitioners assert that RCW 69.50.203(b) is not proper based on a Washington D. C. Circuit Court decision, *NORML v. Ingersoll*, 497 F.2d 654 (DC Cir. 1974), which remanded a

petition to reschedule marijuana in the federal controlled substances act to the federal agencies, the Director of the Bureau of Narcotics and Dangerous Drugs. The federal controlled substances act continues to list marijuana as a Schedule I controlled substance.

2.5 The placement of “marijuana” on Schedule I under Washington’s Controlled Substances Act, RCW 69.50, is consistent with the DEA’s regulation, 21 CFR §1308.11(d)(22) which places marijuana on Schedule I of controlled substances.

2.6 Petitioners reference to 21 U.S.C. §903 and assert that this provision allows states to reschedule and then the federal government must reschedule marijuana. 21 U.S.C. §903 reads as follows:

No provision of this subchapter shall be construed as indicating an intent on the part of the Congress to occupy the field in which that provision operates, including criminal penalties, to the exclusion of any State law on the same subject matter which would otherwise be within the authority of the State, unless there is a positive conflict between that provision of this subchapter and that State law so that the two cannot consistently stand together.

III. BASES FOR DECISION

3.1 The Board is authorized to adopt rules on the scheduling of controlled substances under RCW 69.50.20.

3.2 The Board has discretion to control marijuana on Schedule I under the findings listed in RCW 69.50.203(a) or, under RCW 69.50.203(b), without the findings in subsection (a) when, as in this case, marijuana remains classified by the U.S. Drug Enforcement Administration (DEA) as a Schedule I controlled substance under 21 CFR §1308.11.

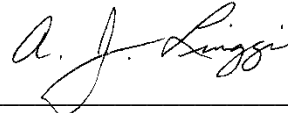
3.2 21 U.S.C. §903 does not establish a requirement for the federal government to reschedule marijuana in the federal controlled substances act if a state reschedules marijuana in the state’s controlled substances act.

IV. DECISION

Based on the foregoing, the Board DENIES the Petition for Rule-making to amend WAC 246-887-100 to remove marijuana from the list of Schedule I controlled substances.

DATED this 18 day of July, 2011.

STATE OF WASHINGTON
BOARD OF PHARMACY

Handwritten signature of Albert Linggi in cursive script.

ALBERT LINGGI, R.Ph, Chair

WASHINGTON BOARD OF PHARMACY
PETITION FOR ADOPTION, AMENDMENT, REPEAL

INTRODUCTION

Comes now CannaCare, the Cannabis Defense Coalition, the American Alliance for Medical Cannabis and a broad coalition of other organizations and individuals to file a petition for adoption, amendment, repeal. The purpose of this petition is to repeal marijuana from the Washington State Schedule I designation that is contained in RCW 69.50.204. Both State and Federal law requires that marijuana be transferred to a lower schedule of Washington State's version of the Uniform Controlled Substances Act, due to the fact that marijuana is incorrectly classified in Washington State Schedule I (RCW 69.50.204), and because marijuana has accepted medical use in the United States and, therefore, no longer meets the criteria to be listed in Washington State Schedule I (RCW 69.50.204).

The purpose of this petition is to also request that the Washington State Board of Pharmacy hold a hearing to apply the Washington State Schedule 1 test outlined in RCW 69.50.203. Additionally, the purpose of this petition is also to put the federal government on notice that the State of Washington feels that marijuana has accepted medical uses and that marijuana should not only be taken out of Schedule I on a state level, but rescheduled on federal level as well. Federal law requires that marijuana be reclassified when marijuana is accepted by a state for medical use and the application for having marijuana reclassified under federal law can be found in 21 C.F.R. § 1308.43. Washington State, has an obligation to at least attempt to request federal reclassification of marijuana, to protect its

citizens from federal penalties, when they exercise their medical marijuana rights under Washington State law RCW 69.51A. Holding a hearing to apply the Washington State Schedule I test is the first step in that process.

GROUND FOR RESCHEDULING MARIJUANA

The following fifteen states and the District of Columbia have all accepted the safety of marijuana for medical use:

- (1) ALASKA, STATUTES § 17.37.070 (2008)
- (2) ARIZONA, ARS TITLE 36 CHAPTER 28.1 (2011)
- (3) CALIFORNIA, HEALTH & SAFETY CODE § 11362.5 (2008)
- (4) COLORADO, CONSTITUTION ARTICLE XIII, SECTION 14 (B) (2007)
- (5) D.C., D.C.LAW 13-315; 57 DCR 3360 (2010)
- (6) HAWAII, REVISED STATUTES § 329-121 (3) (PARAGRAPH 3) (2008)
- (7) MAINE, REVISED STATUTES § 2383-B (5) (2008)
- (8) MICHIGAN, MEDICAL MARIJUANA ACT (2008)
- (9) MONTANA, CODE ANNOTATED, § 50-46-102(5) (2007);
- (10) NEVADA, REVISED STATUTES ANNOTATED § 453A.120 (2007);
- (11) NEW JERSEY, N.J.S. C.24:6I-1 (2010)
- (12) NEW MEXICO, STATUTES ANNOTATED § 26-2B-2 (2008);
- (13) OREGON, REVISED STATUTES § 475.302(8) (2007);
- (14) RHODE ISLAND, GENERAL LAWS § 21-28.6-3(4) (2008);
- (15) VERMONT, STATUTES ANNOTATED § 4472(10) (2007);
- (16) WASHINGTON, (RCW) § 69.51A.010 (2) (2008).

All of these states and the District of Columbia allow medical marijuana use, possession, and cultivation which confirms that marijuana has accepted medical uses.

In the United States Federal drug law, 21 U.S.C. § 903, gives the states the authority to determine accepted medical use. See, **Gonzales v. Oregon**, 546 U.S. 243, 269-270 (2006): Congress regulates medical practice insofar as it bars doctors from using their prescription-writing powers as a means to engage in illicit drug dealing and trafficking as conventionally understood. Beyond this, however, the

statute manifests no intent to regulate the practice of medicine generally. The silence is understandable given the structure and limitations of federalism, which allow the States “great latitude under their police powers to legislate as to the protection of the lives, limbs, health, comfort, and quiet of all persons”.

Medtronic, Inc. v. Lohr, 518 U.S. 470, 475, 116 S. Ct. 2240, 135 L. Ed. 2d 700 (1996) (quoting **Metropolitan Life Ins. Co. v. Massachusetts**, 471 U.S. 724, 756, 105 S. Ct. 2380, 85 L. Ed. 2d 728 (1985)). “The Government, in the end, maintains that the prescription requirement delegates to a single Executive officer the power to affect a radical shift of authority from the States to the Federal Government to define general standards of medical practice in every locality”. “The text and structure of the CSA show that Congress did not have this far-reaching intent to alter the federal-state balance and the congressional role in maintaining it.” **Gonzales v. Oregon**, 546 U.S. at 275.

Marijuana now has currently accepted medical use in 15 states, and the District of Columbia, because according to the United State Supreme Court ruling in **Gonzales v. Oregon**, 546 U.S. 243, 269-270 (2006) federal law defines accepted medical use to be whatever the states say it is, and because the DEA's own Administrative Law Judge has already determined that marijuana is safe for use under medical supervision, marijuana no longer meets the criteria required for inclusion in Schedule I on either a federal or state level. The fact that the principle psychoactive ingredient in marijuana, THC, has been rescheduled by the DEA twice (as well as once internationally), shows that even the pure psychoactive ingredient in marijuana is safer than anything in Schedules I or Schedule II.

In **United States v. Oakland Cannabis Buyers' Cooperative**, 532 U.S. 483 (2001), the U.S. Supreme Court held that the DEA could not put marijuana in

Schedule I if marijuana had any accepted medical use: “Schedule I is the most restrictive schedule” (footnote omitted). The Attorney General can include a drug in Schedule I only if the drug "has no currently accepted medical use in treatment in the United States," "has a high potential for abuse," and has "a lack of accepted safety for use under medical supervision." §§ 812(b) (1) (A)-(C). Under the statute, the Attorney General could not put marijuana into Schedule I, “if marijuana had any accepted medical use.” In **Gonzales v. Raich**, 545 U.S. 1(14-15) (2005) the U.S. Supreme Court noted that marijuana could be rescheduled. The federal CSA provides for the periodic updating of schedules and delegates authority to the Attorney General, after consultation with the Secretary of Health and Human Services, to add, remove, or transfer substances to, from, or between schedules. § 811. The U.S. Supreme Court noted the rescheduling process had not found any accepted medical use of marijuana in the United States prior to 1996. (See **Raich**, 545 U.S. at page 15 n.23.) Schedule I is only the "initial" schedule for marijuana, and Congress never intended the initial schedules to be permanent. Indeed, 21 U.S.C. § 811(a) requires the DEA to "add to", "transfer between", or "remove" substances from the schedules as necessary. See 21 U.S.C. § 812(c) (“ . . . Initial Schedules of controlled substances Schedules I, II, III, IV, and V shall, unless and until amended pursuant to section 811 of this title, consist of the following drugs or other substances, by whatever official name, common or usual name, chemical name or brand name designated: Revised schedules are published in the Code of Federal Regulations, Part 1308 of Title 21, Food and Drugs.”).

A study published in the March 1, 1990 issue of the Proceedings of the National Academy of Sciences stated that "there are virtually no reports of fatal cannabis overdose in humans" and attributed this safety to the low density of cannabinoid receptors in areas of the brain controlling breathing and the heart.

WASHINGTON STATE MEDICAL MARIJUANA ACT

After the Washington State medical marijuana law was passed and the Medical Quality Assurances Commission added qualifying conditions, the Washington State Board of Pharmacy had an affirmative obligation to apply the Washington State Schedule 1 test RCW 69.50.203 to determine if marijuana still met the criteria to be listed in schedule I. In a previous petition to apply the Washington State Schedule 1 test RCW 69.50.203 filed in 2009, the Washington State Board of Pharmacy was asked to explain why the board does not think marijuana has medicinal value, the board responded that “the board did not say that there was no medical use”. The board also stated that “this board does not regulate herbal substances” and that “The Board of Pharmacy’s authority relates to legend drugs and substances available at pharmacies”.

OTHER STATES RESCHEDULING MARIJUANA

The State of Iowa Pharmacy Board finally applied the Iowa State Schedule 1 test after being required to do so by the Iowa courts, the Iowa Pharmacy Board sent a recommendation to the Iowa Legislature that Marijuana should be removed from Schedule 1. The Oregon State Board of Pharmacy acted to remove marijuana from the list of “Schedule I Controlled Substances,” in accordance with a bill the legislature passed in 2009. The new law, ORS 475.059 established by Senate Bill 728, requires marijuana’s removal from a list of controlled substances that have a “high abuse potential and no acceptable medical use in the United States.” The Board placed marijuana into “Schedule II Controlled Substances,” which contains substances that have a “high abuse potential with severe psychological or physical dependence liability,” but are accepted for medical use in the United States.

The Oregon Pharmacy Board also reviewed scientific and medical literature and heard testimony from experts and members of the public before voting to move marijuana into Schedule II. This action is consistent with Oregon’s assertion that marijuana does have an acceptable medical use.

2010 WASHINGTON STATE PETITION

In a 2010 Washington State petition to remove marijuana from Schedule I, the Board cited “Section b” of the Washington State Schedule I test in RCW 69.50.203 as cause to deny a petition to hold a hearing to remove marijuana from schedule I, however the U.S. Supreme has ruled in Norml v. Ingersoll, 497 F.2d 654 (DC Cir. 1974), that the international treaty, and the sections of the CSA are not cause to deny a petition. In that business meeting before the Washington State Board of Pharmacy, the board insisted that decisions made by other states did not factor into what the Board had to consider. This statement is completely out of line with the Uniform Controlled Substances Act itself, and any court interpretations of the disputed facts under Washington State Administrative law **RCW 34.05.001** and under the full faith and credit clause under **Article IV, Section I**, of the U.S. Constitution.

GOVERNOR’S STATEMENTS ON RESCHEDULING MARIJUANA

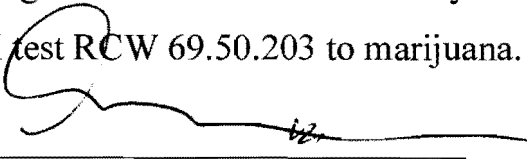
Washington State Governor Christine Gregoire, has stated that she is a medical marijuana supporter and cited a former aide’s use of medical marijuana. She further stated that she would use her position as Chair of the National Governor's Association to lead an effort to change marijuana federal classification from a Schedule I to a Schedule II drug. Governor Gregoire has stated to the press that she would ask the governors of the 14 other states that authorize medical marijuana to petition the Justice Department and federal regulators to reclassify the drug.

CONCLUSION

Under the Washington State definition for a Schedule I controlled substances, Schedule 1 Test RCW 69.50.203; Section (a), a substance must meet all of the following criteria to qualify as a Schedule 1 substance:

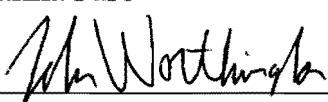
- (1) Has high potential for abuse;
- (2) Has no accepted medical use in treatment in the United States, and;
- (3) Lacks accepted safety for use in treatment under medical supervision;

This Schedule no longer applies to marijuana because marijuana has been found to have accepted medical use internationally, as well as in the United States, and should be removed from Schedule I in the Washington State Controlled Substances Act. Section (b) is not proper cause to deny a petition as per the U.S. Supreme Court decision in Norml v. Ingersoll, 497 F.2d 654 (DC Cir. 1974), and the Washington State Board of Pharmacy should hold a hearing to apply the state schedule I test RCW 69.50.203 to marijuana.



Steve Sarich III
CannaCare

Dated May 2, 2011



John Worthington
The American Alliance Medical Cannabis

Dated May 2, 2011



Steve Fager
Cannabis Defense Coalition

Dated MAY 2, 2011

Christine Gregoire
Governor, Washington

Dated _____

Signed [Signature]
Printed Kori Pellingshead
Organization _____

Dated 5/2/11

Signed [Signature]
Printed Michael Stafford
Organization Boilermakers #104

Dated 5/2/11

Signed [Signature]
Printed Dwayne Taylor
Organization _____

Dated 5/2/11

Signed [Signature]
Printed Craig French
Organization _____

Dated 5-2-11

Signed [Signature]
Printed DARIX WARE
Organization GREEN HEALTH

Dated 5/2/11

Signed [Signature]
Printed Sydney Baker
Organization GREEN HEALTH

Dated 5-2-11

Signed Wes Abney

Dated 5/2/11

Printed Wes Abney

Organization North West Leaf

Signed Marcus Weidaver

Dated 5/2/11

Printed Marcus Weidaver

Organization None

Signed Brandon Carver

Dated _____

Printed Brandon Carver

Organization None

Signed Valerie Steel

Dated 5/2/11

Printed Valerie Steel

Organization None

Signed Tim Fager

Dated 5/2/11

Printed Tim Fager

Organization patient

Signed Marcio Vega

Dated 5/2/11

Printed Marcio Vega

Organization CDC

Signed Phillip M. Moeck

Dated 2011-05-02

Printed PHILLIP MOECK

Organization CANNABIS DEFENSE COALITION

Signed Michael Warren

Dated 5/2/11

Printed Michael Warren

Organization CDC

Signed Lydia Warren

Dated 5/2/11

Printed LYDIA WARREN

Organization CDC

Signed Rachel E. Rurtz

Dated 5/2/11

Printed Rachel E. Rurtz

Organization Cannabis Defense Coalition

Signed Lydia Ensley

Dated 5/2/11

Printed LYDIA ENSLEY

Organization Sentry Medical Group

Signed Josanna McKee

Dated 5/2/11

Printed JOANNA MCKEE

Organization Green Cross PT Coop

Signed Jeannette Black-Ferguson

Dated 5/2/11

Printed JEANNETTE BLACK-FERGUSON

Organization GRAMMAS FOR GANJA

Signed Jacque Saenz

Dated 5/2/11

Printed Jacque C. Saenz

Organization Green Cross & patient

Signed Laura Johnson

Dated 5/2/11

Printed Laura Johnson

Organization Green Hope

Signed Deni

Dated 5-2-11

Printed Deni Tr. de la Fillou

Organization Green Hope

Signed R. S. Miller

Dated 5-2-11

Printed R. S. Miller

Organization Green Cross Pt. COOP

Signed Doc EK Diebold

Dated 5-2-11

Printed Doc Leong

Organization Self Dockygreen1@yahoo.com

360-878-5271

SEA HEMP FEST

Signed Kathleen J Whedden

Dated May 2-11

Printed KJW

Organization WA Med Cop.

Signed Jeremy Galtin

Dated May 2-11

Printed [Signature]

Organization Cannabis Defense Coalition

Signed D. S. Armore

Dated 5-2-11

Printed D. S. Armore

Organization _____

Signed Katelan Duckworth

Dated 5-2-11

Printed Katelan Duckworth

Organization patient

Signed Evan Cox

Dated 5-2-11

Printed Evan Cox

Organization patient

Signed Lauren Gene

Dated 5-2-11

Printed Lauren Gene

Organization _____

Signed [Signature]

Dated 5/2/11

Printed Greg West

Organization Cannabis Freedom March

Signed [Signature]

Dated 5-2-11

Printed Jodie Causey

Organization voter, tax payer, patient, family member

Signed [Signature]

Dated 5-2-11

Printed Erin Elliott

Organization Voter, Patient, tax payer. Mother.

Signed [Signature]

Dated 5-2-2011

Printed Brianna Hughes

Organization voter, taxpayer, patient, sister & daughter

Signed [Signature]

Dated 5/2/11

Printed Matt Katin

Organization voter, tax payer

Signed [Signature]

Dated 5/2/11

Printed Zekarias Army

Organization Voter tax payer.

Signed Barbara A Kirk

Dated ~~5-2-10~~ 5-2-11

Printed Barbara A Kirk

Organization Sensible Washington

Signed _____

Dated _____

Printed _____

Organization _____

Signed _____

Dated _____

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Organization _____

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