

**The Drug Policy Reform Network of Oklahoma /
The Drug Policy Forum of Oklahoma**

POB 10641
Midwest City, Oklahoma 73140

dpfok@sbcglobal.net
dprnok.net
dpfok.org

Telephone:
(405) 714-1236
Facsimile:
(405) 527-1584

September 9, 2009

Dear Members and Supporters of the Drug Policy Reform Network of Oklahoma and the Drug Policy Forum of Oklahoma,

We have exciting and ambitious plans for a "Day at the Capital" Event. The focus will be on presenting the proposed medical marijuana legislation endorsed by our group's Oklahoma Compassionate Care Campaign to the State representatives and senators of each of the approximately 46 potential medical marijuana patients who have endorsed the campaign.

At the August Board Meeting in Edmond the Board voted to ask each member and supporter to consider if he or she could serve as a "Patient Coordinator" for this event.

Each Patient Coordinator will be paired with one or more potential medical marijuana patients. The first duty of the Patient Coordinator will be to visit with his or her assigned potential medical marijuana patient and to become familiar with his or her medical condition and how the use of marijuana might be used to treat the condition. After getting the patient's agreement to participate in the various actions, they will help and assure that the patient first writes letters to his or her representative and senator explaining to the lawmaker that the potential patient would benefit from the passage of the proposed legislation. The proposed legislation follows this letter. This will need to be done in October and November.

After that the Patient Coordinator should encourage and work with his or her patient to make follow up phone calls. The Patient Coordinator might also arrange for the potential patient to visit face to face with the lawmakers at their local district offices in December or January.

On the Big Day in February the Patient Coordinator will be responsible for making appointments with the appropriate Representatives and Senators for the Day of the Event and for getting the Patient to the Appointment.

We plan to have a Central Command Post set up in the lobby at the Capital so that everyone will have a place to rest and eat if necessary. Also the Command Post will be a place for everyone to gather and support each other.

Being a Patient Coordinator will be a lot of work. It will take a lot of time. It will take

even more if you sign on for more than one patient. But think of the potential for results. The lawmaker will have to look the Patient square in the face with you by his or her side. They will not be able to deny what is staring back at them and the truth of the Patient's need for medical marijuana. They will be forced to consider the proposed legislation.

Other things will be planned for the event but for now we need to line up the Patient Coordinators. IF you are willing to be a patient coordinator please call me (414-0767) or come to the next board meeting on September 16th. It will be at the Dining Room of the Classen Towers Apartments in OKC from 6:30p to 8:30p. Enter the parking garage off 22nd Street and park in Visitors parking then enter at the Concierge's door and ask the Concierge for directions to the meeting room. There should be a sign on the meeting room door. If you get lost call me (414-0767) or the # for the group (405) 714-1236.

Working for Drug Peace,

A handwritten signature in black ink, appearing to read 'Lawrence E. Bonnell', with a stylized flourish at the end.

Lawrence E. Bonnell, President

OKLAHOMA COMPASSIONATE CARE CAMPAIGN'S PROPOSED LEGISLATION

State of Oklahoma

_____ SESSION

HOUSE BILL NO. _____ OR SENATE BILL NO. _____

Introduced by:

1 FOR AN ACT ENTITLED, An Act to provide for certain medical uses of marijuana.

2 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF OKLAHOMA

3 Section 1. Terms used in this Act mean:

4 (1) "Adequate supply," an amount of marijuana jointly possessed between the qualifying

5 patient and the primary caregiver that is not more than is reasonably necessary to

6 assure the uninterrupted availability of marijuana for the purpose of alleviating the

7 symptoms or effects of a qualifying patient's debilitating medical condition.

8 However, an adequate supply may not be construed to mean more than five ounces

9 of usable marijuana and / or twelve plants of the botanical genus Cannabis;

10 (2) "Debilitating medical condition," any of the following:

11 (a) Cancer, glaucoma, positive status for human immunodeficiency virus,

12 acquired immune deficiency syndrome, or the treatment of these conditions;

13 (b) A chronic or debilitating disease or medical condition or its treatment that

14 produces one or more of the following:

15 (i) Cachexia or wasting syndrome;

16 (ii) Severe pain;

17 (iii) Severe nausea;

18 (iv) Seizures, including those characteristic of epilepsy; or

19 (v) Severe and persistent muscle spasms, including those characteristic of
20 multiple sclerosis or Crohn's disease; or

21 (c) Any other medical condition for which a qualifying patient's

22 physician has determined that the medical use of

23 marijuana is appropriate;

24 (3) "Marijuana," defined as any plant of the botanical genus Cannabis;

25 (4) "Medical use," the acquisition, possession, cultivation, use, distribution, or

26 transportation of marijuana or paraphernalia relating to the administration of

27 marijuana to alleviate the symptoms or effects of a qualifying patient's debilitating

28 medical condition. For the purposes of this subdivision, the term, distribution, is

29 limited to the transfer of marijuana and paraphernalia from the primary caregiver to

30 the qualifying patient;

31 (5) "Physician," any person who is licensed pursuant to 59 O.S. § 725.2(C);

32 (6) "Primary caregiver," any person, other than the qualifying patient and the qualifying

33 patient's physician, who is eighteen years of age or older who has agreed to undertake

34 responsibility for managing the well-being of the qualifying patient with respect to
35 the medical use of marijuana. In the case of a minor or an adult lacking legal
36 capacity, the primary caregiver shall be a parent, guardian, or person having legal
37 custody;

38 (7) "Qualifying patient," any person who has been diagnosed by a physician as having
39 a debilitating medical condition;

40 (8) "Usable marijuana," the dried leaves, flowers, and / or seeds of any plant of the
botanical genus Cannabis,

41 and any mixture or preparation thereof, appropriate for the medical use of
42 marijuana. The term does not include the seeds, stalks, and roots of the plant;

43 (9) "Written certification," the qualifying patient's medical records or a statement signed
44 by a qualifying patient's physician, stating that in the physician's professional opinion,
45 the qualifying patient has a debilitating medical condition and the potential benefits
46 of the medical use of marijuana would likely outweigh the health risks for the
qualifying patient.

47 Section 2. Notwithstanding any law to the contrary, the medical use of marijuana by a
48 qualifying patient is permitted, but only if:

49 (1) The qualifying patient has been diagnosed by a physician as having a debilitating
50 medical condition;

51 (2) The qualifying patient's physician has certified in writing that, in the physician's
52 professional opinion, the potential benefits of the medical use of marijuana would
53 likely outweigh the health risks for the particular qualifying patient; and

54 (3) The amount of marijuana retained for alleviation of the qualifying patient does not
55 exceed an adequate supply.

56 Section 3. The provisions of section 2 of this Act do not apply to a qualifying patient under
57 the age of eighteen years, unless:

58 (1) The qualifying patient's physician has explained the potential risks and benefits of the
59 medical use of marijuana to the qualifying patient and to a parent, guardian, or person
60 having legal custody of the qualifying patient; and

61 (2) The parent, guardian, or person who received the explanation consents in writing to:

62 (a) Allow the qualifying patient's medical use of marijuana;

63 (b) Serve as the qualifying patient's primary caregiver; and

64 (c) Control the acquisition of the marijuana, the dosage, and the frequency of the
65 medical use of marijuana by the qualifying patient.

66 Section 4. Any physician who issues any written certification shall register the name,
67 address, patient identification number, and other pertinent identifying information of the
68 patient issued a written certification with the Department of Health.

69 Section 5. Any qualifying patient shall register with the Department of Health. Such
70 registration is effective until the expiration of the certificate issued by the physician. Every
71 qualifying patient shall provide sufficient identifying information to establish the personal
72 identity of the qualifying patient and the primary caregiver. Every qualifying patient shall
73 report any change in information within five working days. No qualifying patient may have
74 more than one primary caregiver at any given time. The department shall issue to the
75 qualifying patient a registration certificate and shall charge a fee of twenty dollars to be
76 deposited in the state general fund.

77 Section 6. Any primary caregiver shall register with the Department of Health. No primary
78 caregiver may be responsible for the care of more than one qualifying patient at any given
79 time.

80 Section 7. Upon an inquiry by a law enforcement agency, the Department of Health shall
81 verify whether the subject of the inquiry has registered with the department pursuant to this
82 Act and may provide reasonable access to the registry information for official law
83 enforcement purposes.

84 Section 8. The Department of Health may require that all written certifications comply with a
85 designated form.

86 Section 9. Written certifications are valid for only one year from the date of signing.

87 Section 10. Nothing in this Act may be construed to require insurance coverage for the

88 medical use of marijuana.

89 Section 11. If the qualifying patient and the primary caregiver strictly complied with the
90 requirements of this Act, either or both may assert the medical use of marijuana as an
91 affirmative defense to any prosecution involving marijuana under Oklahoma law.

92 Section 12. No qualifying patient or primary caregiver not complying with the permitted
93 scope of the medical use of marijuana may be afforded protection against searches and
94 seizures pertaining to the misapplication of the medical use of marijuana.

95 Section 13. No person is subject to arrest or prosecution for simply being in the presence or
96 vicinity of the medical use of marijuana as permitted under this Act.

97 Section 14. No physician is subject to arrest or prosecution, to be penalized in any manner,
98 or to be denied any right or privilege for providing written certification for the medical use
99 of marijuana for a qualifying patient, if:

100 (1) The physician has diagnosed the patient as having a debilitating medical condition,
101 as defined in this Act;

102 (2) The physician has explained the potential risks and benefits of the medical use of
103 marijuana, as required pursuant to this Act;

104 (3) The written certification is based upon the physician's professional opinion after
105 having completed a full assessment of the patient's medical history and current
106 medical condition made in the course of a bona fide physician-patient relationship;

107 and

108 (4) The physician has complied with the registration requirements of section 5 of this

109 Act.

110 Section 15. Any marijuana, paraphernalia, or other property seized from a qualifying patient

111 or primary caregiver in connection with a claimed medical use of marijuana under this Act

112 shall be returned immediately upon the determination by a court that the qualifying patient
or

113 primary caregiver is entitled to the protections of this Act, as evidenced by a decision not to

114 prosecute, a dismissal of charges, or an acquittal.

115 Section 16. Any person who makes a fraudulent misrepresentation to a law enforcement

116 official of any material fact or circumstance relating to the medical use of marijuana to
avoid

117 arrest or prosecution is guilty of the crime of Obstruction of Public Officer, 21 O.S.§540.

118 Section 17. Any physician who makes a fraudulent misrepresentation to a law enforcement

119 official of any material fact or circumstance relating to the issuance of a written certificate is

122 guilty of the crime of Obstruction of Public Officer, 21 O.S.§540.