



# MEDICAL CANNABIS RESOURCE CENTER

**\* The MERCY News Report \***

## **OMMA/2 Makes Ballot As Measure 33**



**Support Swells as  
Medical Cannabis  
Patients, Care-  
Givers, Friends,  
Family and just plain  
Concerned Citizens  
Respond**

Letters to the editor have increased leading up to this election season and are dramatically in favor of Measure 33, which is the result of the OMMA/2 Initiative conducted this past summer. Many, many thanks to the people of Oregon who signed this petition and especially to the volunteers who gathered them, and phoned, and fundraising, etc. This has been truly a grassroots effort of, by and for the people.

But the job is not done yet. Register, Vote and get EVERYBODY you know to do so also. Drive, drag, carry, wheedle, weasel,

whatever it takes - we need to get every potential voter to the booths. We win by getting the most people - of all perceived stripes and political agendas! - to the ballot box. We have the real poll numbers on this issue.

"The campaign is going well," according to OMMA/2 Chief Petitioner John Sajo. "We are on track to win this election. I myself, have been busy doing about 20 interviews in the last week. There are lots of good trends."

"I just looked at our first poll results. We are up 45 yes to 44 no before hearing various arguments. Then support jumps to 58 yes to 27 no. Our \$450,000 in TV ads start next week and will expose people to our best YES on 33 arguments."

"I think the recent exchanges in the media are clearly in our favor. Undecided voters who read the **<continued next page>**



**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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*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> voters pamphlet will see our 15 pro arguments that work well together juxtaposed against 4 arguments that contradict each other. Two of the opposition arguments say marijuana is medicine, two say its not. Three say Measure 33 is a smokescreen for legalization. The fourth says vote against 33 because it isn't legalization."

"Polling verifies what we knew all along. 69% support dispensaries. Our opponents will try to beat us by hammering on the other parts of the initiative. We should try to stay as focused on message as possible for the upcoming weeks. The message is: Safe medicine, safe access. Regulated medical marijuana dispensaries."

"Lets not get sidetracked by our opponents spin This means we should have some LTEs to the Oregonian responding to any and all editorials and news stories. . We need to respond to their distortions, but then get back to our main message. So we should also have a steady barrage of simple yes on 33 LTEs that present our message to all media across the state."

"There is a growing number of activists and organizations involved in this action. They are the people who are going to win this election and accelerate the pace of progress of reform, so thanks to all of you for the hard work, experience and heart you bring to this effort."

John Sajo, chief petitioner, can be reached at :

**Yes on 33 Campaign Headquarters  
Voter Power Office  
4315 SE Division St  
Portland, OR 97206  
503-224-3051  
or by visiting:**

**www.YesOn33.org**

The recent AP story in the Register Guard (visit: <http://www.registerguard.com/>) highlighting our opponents lets us know we are in for a horse race. Other media can be found in the Ashland Daily Tidings (<http://cannabisnews.com/news/thread19475.shtml>) or the McMinnville News Register (<Http://www.newsregister.com/>). See below for more news items.

Our opposition has surfaced with their latest round of lies and half truths. We are going to win this election by telling the truth - our stories. We need to increase our efforts to get our message out so we are not overshadowed by the opposition. Lets amp up our efforts to respond to every lie they tell with LTEs. And lets start sending the ORegonian so many LTEs on Measure 33 that they have to print some of them. Read on for more information about how to LTE.

We the activists in Oregon have the most important marijuana reform of the 21st century happening right here about 2 months away. We got stonewalled in our legislative efforts but now have a institutive that is an amendment to the OMMA that upgrade the current law.

Read on for more About the Measure.

<continued on next page>

## Measure 33 reaffirms cannabis is good, safe, effective medicine and patients should have safe access to it.

### D.C. Jail Stay Ends in Death For Quadriplegic Md. Man Care Provided by Hospital, Corrections Dept. in Question

Jonathan Magbie, a 27-year-old Mitchellville man, was sent to jail in the District last week for 10 days for marijuana possession.

He never made it home.

Paralyzed as a child and unable to even breathe on his own, Magbie died last Friday after being shuttled between the D.C. jail complex and Greater Southeast Community Hospital.

At the center of the many questions surrounding his death is whether D.C. Superior Court and the D.C. Department of Corrections did enough to ensure adequate care for the quadriplegic inmate.

An investigation is underway, but that is little solace to his family, which marched on the courthouse this week with signs accusing the judge of killing Magbie.

"I'm not saying that he shouldn't have been punished, because he did smoke the marijuana," his mother, Mary Scott, said yesterday, a day after burying her son. "I just don't think it should have cost him his life."

By the standards of D.C. Superior Court, the 10-day sentence rendered by Judge Judith E. Retchin was unusually punitive for a first-time offender such as Magbie. Along with his defense attorney, Boniface Cobbina, a pre-sentence report had recommended probation, and the U.S. attorney's office had not objected.

But Retchin rejected probation alone. A former federal prosecutor who became a Superior Court judge in 1992, Retchin is known to dispense stiff sentences.

Police, she pointed out, found a gun and cocaine in the vehicle in which Magbie was stopped in April 2003. And, despite pleading guilty to the marijuana charge, Magbie told pre-sentence investigators that he would continue using the drug, which he said made him feel better.

"Mr. Magbie, I'm not giving you straight probation," the judge said, according to a transcript of the Sept. 20 proceedings. "Although you did not plead guilty to having this gun, it is just unacceptable to be riding around in a car with a loaded gun in this city."

Details about Magbie's death were first reported by WJLA-TV (Channel 7).

Magbie was struck by a drunk driver when he was 4 years old; he was paralyzed from the neck <continued on next page>

### Man Who Was Shot Had Legal Marijuana

Police are investigating an incident where a Southeast Portland man who was shot and wounded Monday morning by at least two men was apparently targeted for his medical marijuana, police said Wednesday.

Sgt. Brian Schmutz, spokesman for the Portland Police Bureau, said the 33-year-old victim, who lives in the 13000 block of Southeast Tessa Street, is one of more than 10,000 Oregonians enrolled in the Oregon Medical Marijuana Program. Schmutz said the man had a legal marijuana growing operation at his home.

The man was shot in the abdomen, Schmutz said. Police said the man asked them not to name the hospital where he's being treated.

"He's talking with detectives, but doesn't want to release any details about his condition," Schmutz said.

Police have no suspects in custody and aren't sure whether two or more men tried to enter the victim's house.

"We do know it was more than one," he said.

The shooting occurred just before 9:30 a.m. Witnesses told police they heard screaming and the pops of about three gunshots before someone yelled, "Why are you doing this?"

Someone saw a young man in a black coat sprinting from the area, and police later found a black coat and a red coat in an alley off Division Street.

Schmutz said the shooting occurred in the doorway of the victim's residence; the men never got inside, and nothing was taken.

According to the Oregon Department of Human Services Web site, the No. 1 reason patients gave for asking for medical marijuana was for pain, followed by persistent muscle spasms, and nausea. As of July, 10,196 patients were enrolled in the program.

Under Oregon law, those enrolled in the program can possess "three mature marijuana plants, four immature marijuana plants and one ounce of usable marijuana per each mature plant" in their homes.

Anyone with any information on the shooting is asked to call Detective Cordes Towle of the Portland Police Bureau at 503-823-0464.

<continued from previous page> down, and his growth was stunted. Barely five feet tall and 120 pounds, he moved around on a motorized wheelchair that he operated with his chin.

For most everything else, from scratching an itch on his head to flushing his lungs of accumulated fluid, he had to rely on others. Along with his family, he had nursing care 20 hours a day.

"Jonathan was totally dependent," his mother said. "He couldn't do anything for himself."

Asked how her son was able to inhale marijuana, Scott said only that "he learned to do a lot of things."

Ahead of Magbie's sentencing, a staff member in Retchin's chambers contacted the office of Chief Judge Rufus G. King III to find out whether the D.C. Corrections Department would be able to house a paralyzed person in a wheelchair. The answer from the chief judge's office, which is the liaison with Corrections, was yes.

Leah Gurowitz, a court spokeswoman, said yesterday that the full extent of Magbie's paralysis was inadvertently not relayed to the chief judge's office.

Sandy Thomas and her great-nephew Anthony Smith are among several relatives and friends of Jonathan Magbie at a candlelight vigil outside the D.C. jail.

In a statement yesterday, Retchin said she was led to believe "that Mr. Magbie's medical needs could be met; this was such an unintended tragedy. I would like to convey my deepest sympathy to Mr. Magbie's family."

Even the Correctional Treatment Facility, a jail annex that houses many inmates with medical or security needs, would not have been able to readily care for a prisoner such as Magbie, Philip Fornaci, executive director of the D.C. Prisoners' Legal Services Project, said yesterday.

"I certainly would not say they killed him or any conclusion like that," Fornaci said. "But it certainly seems likely that he wouldn't have died if he hadn't gone to jail."

The initial medical evaluation of Magbie after his arrival at the D.C. jail on Sept. 20 found him in need of "acute medical attention," according to the Corrections Department. Within hours, Magbie was moved to Greater Southeast Community Hospital.

The nature of the medical problem was not specified in a chronology issued by the Corrections Department, which declined to make officials available to comment on the specifics of the case. The timeline shows that Magbie arrived at the jail at 2 p.m. and that he was taken to the hospital at 9:40 p.m.

What happened in between is not explained.

The next day, Magbie was discharged and placed in the Correctional Treatment Facility, the jail annex that is operated by Corrections Corporation of America under a contract with the city. But almost from the moment Magbie arrived there, a senior doctor was concerned that Magbie might not receive the care he needed, according to his mother and a court official.

The court official, who spoke on condition of anonymity, said the doctor believed that Magbie belonged at the hospital and pressed Greater Southeast, which handles inmate hospitalizations, to take

him back. But the hospital rebuffed the request, the official said. Hoping to change the hospital's mind, the physician asked Retchin to issue a court order, the official said. But the judge declined, saying she lacked the authority to issue any such order.

The hospital said in a statement that it could not comment because of federal privacy regulations. It said that it provides "top-quality" care.

Apparently resigned to having him stay on at the jail annex, the medical staff decided after a couple of days of back-and-forth with Magbie's mother and attorney to allow Magbie's mother to bring his ventilator.

Told to bring the device down Friday morning, she did, showing up about 10 a.m. A half-hour earlier, she would later learn, her son had been taken by ambulance back to Greater Southeast.

That night, she received a call from a warden telling her that her son was dead.

**Protest The Unnecessary Death Of Jonathon Magbie**

Those who can't make it personally, please contact someone who can. At the Very least, help get the word out.

Washington, D.C. - October 07, 2004 - U.S. Marijuana Party founder Loretta Nall is in Washington, D.C. organizing a vigil to protest the sentence imposed on Jonathan Magbie by Judge Judith Retchin. Magbie. (see story above)

The vigil, which began Tuesday at the H. Carl Moultrie I Courthouse, will be maintained through Friday and possibly into next week. The vigil follows Tuesday's arrest of 14 Medical Marijuana activists and patients in front of the U.S. Department of Health and Human Services headquarters. The focus of Tuesday's protest was to demand that HHS reschedule marijuana to allow physicians to prescribe it without federal interference. Many patients with nerve damage find that marijuana is more effective than other medicines, and with fewer side effects.

"This was a completely avoidable tragedy," said Ms. Nall. "There are so many ways in which this could have been handled differently. We need to act now to change our policies, to make sure nothing like this happens again." Ms. Nall will be available for comment on Friday outside the courthouse at 500 Indiana Ave, NW from 1 PM to 5 PM.

Loretta Nall  
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=====  
this message brought to you by:

Erin Hildebrandt, Executive Director  
Bill Hildebrandt, Associate Director  
Parents Ending Prohibition  
... because there are better ways to protect kids!  
P.O. Box 611, Lafayette, OR 97127 \* (503)327-4184  
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Parents Ending Prohibition

## Measure 33 Amends Medical Marijuana Act: Requires Marijuana Dispensaries for Supplying Patients/Caregivers; Raises Patients' Possession Limit.

**The way it is now:** Oregon voters approved a Medical Marijuana Act in 1998 by a vote of 611,190 to 508,263. The act allows people suffering from cancer, AIDS, and other illnesses to possess small amounts of marijuana and use it to reduce their pain and other symptoms, with the written approval of their physician. Patients must register with the Oregon Department of Human Services. Registered patients may grow their own marijuana or get it from a registered caregiver. No one may sell marijuana.

The law allows registered patients to possess, deliver, and produce limited amounts of marijuana for their own medical use. The sale of marijuana, even to registered patients, is prohibited. There are presently about over 10,200 registered patients under the care of some over 1,400 physicians in Oregon. The law provides that marijuana may be used in the alleviation of the effects of "debilitating conditions" including cancer, glaucoma, AIDS, and multiple sclerosis. It may also be used in alleviating appetite loss, severe and chronic pain, persistent nausea, seizures, and muscle spasms.

Oregon residents may apply for a registration card when they have a qualifying debilitating medical condition as certified by a medical doctor (MD) or doctor of osteopathy (DO), licensed in Oregon. Registration fees are \$150 for new applications, \$100 for renewals, and \$50 for patients on the Oregon Health Plan. Registered patients with cards may possess one ounce of marijuana (without a garden). They may have a garden and grow up to seven plants and possess up to three ounces of usable marijuana at the garden location. Registered patients may have a designated primary caregiver who grows and harvests the marijuana for them.

### Background

Oregon is one of nine states that allow the medical use of marijuana and medical marijuana patients who are not engaged in intrastate commerce to obtain their marijuana are constitutionally protected from federal law in 9th Circuit. The federal government classifies marijuana as a Schedule I drug that has "no currently acceptable medical use, but provides over six pounds of marijuana annually to seven patients."

According to the National Institute of Drug Abuse, a part of the National Institute of Health, "THC, the main active ingredient in marijuana, produces effects that potentially can be useful for treating a variety of medical conditions ... Research is underway to examine the effects of smoked marijuana and extracts of marijuana on appetite stimulation, certain types of pain, and spasticity due to multiple sclerosis. However, the inconsistency of THC dosage in different marijuana samples poses a major hindrance to valid trials and to the safe and effective use of the drug. Moreover, the adverse effects of marijuana smoke on the respiratory system will offset the helpfulness of smoked marijuana for some patients. Finally, little is known about the many chemicals besides THC that are in marijuana, or their possible

deleterious impact on patient's medical conditions."

An objective analysis including federal government sponsored analysis of medical marijuana should include the conclusion of DEA Administrative law judge, Francis L. Young that "cannabis is one of the safest therapeutically active substances available". Also, In a 2002 study the U. S. General Accounting Office interviewed law enforcement officials in states with medical marijuana laws. Over half of these officials said that medical marijuana laws had not greatly affected their law enforcement activities.

**Initiative or Referral:** This measure, known also as OMMA/2, is a statutory amendment placed on the ballot by initiative petition with 77,872 valid signatures. Kenneth Scott Brown, John A. Sajo, and Edward Glick were the chief petitioners.

**What Measure 33 would do:** Registered patients and caregivers could buy medical marijuana at dispensaries licensed and regulated by the state. Poor patients could get marijuana for free from the dispensaries. Patients could have up to one pound of marijuana at a time. If patients or caregivers grow their own, they could grow more plants.

**How much will it cost.** The measure would cost about \$340,000 to \$560,000 each year. Fees and part of the price that patients pay for marijuana would pay most of these costs.

**Argument for:** People suffering from severe illnesses that could be helped by using marijuana would have a better way to obtain medical marijuana. Sick and dying patients can't produce their own medicine. They should be able to buy medical marijuana at safe regulated dispensaries.

**Argument against:** Patients don't need so much marijuana. These changes in the law would make it more difficult for police to identify illegal growing, selling, and use of marijuana.

**Financial Impact:** The measure would require a one-time start up cost of \$135,000 and expenditures of \$340,000 to \$560,000 a year. All but \$75,000 of these costs may be offset by fees to be established by the Department of Human Services as provided in the measure. The financial effect on local government revenues cannot be determined.

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**“Yes” Vote:** If this measure passes it would amend the current law to: (1) require the creation of medical marijuana dispensaries to supply patients and/or caregivers; (2) allow dispensaries or caregivers to sell marijuana to patients; and (3) increase the amount of medical marijuana patients may possess.

**“No” Vote:** If this measure fails, it would retain the current Oregon Medical Marijuana Act which allows registered patients to possess limited amounts of marijuana for medical purposes and prohibits marijuana sales.

## Proposal

The proposal would create licensed, nonprofit medical marijuana dispensaries regulated by the Oregon Department of Human Services to produce, possess, and sell marijuana to registered patients and/or caregivers. A registered patient could receive up to six pounds of marijuana a year. Registration fees for dispensaries and patients, plus 10 to 20% of the proceeds of the sales would be used to fund the program. Dispensaries would be required to provide medical marijuana free of charge to indigent patients who meet the criteria of the Department of Human Services. In counties without registered dispensaries, the county health department would act as the dispensary.

The measure would limit the number of patients a caregiver could serve to 10 without obtaining a medical marijuana dispensary license. Current law allows caregivers to grow for an unlimited number of patients. The measure allows designated caregivers and their registered ID holders to negotiate a price for the marijuana. The law actually reads, “allows caregivers to be compensated by their patients in any manner agreed on by both parties.”

Licensed nurse practitioners and naturopaths would be added to the definition of “attending physicians” because they also prescribe medicine. “Debilitating medical condition” would be expanded to include any other medical condition for which the use of marijuana would benefit the patient as determined by the attending physician.

The Oregon Department of Human Services (ODHS) would continue to administer the act. The amendment includes a new provision for the Department to establish the Oregon Medical Marijuana Commission, comprised of six voting members representing patients, caregivers, dispensaries, law enforcement, criminal defense attorneys, medical profession; and one non-voting member representing the ODHS. The commission will have the authority to propose rules, veto staff decisions, and suggest legislative changes. The department will also provide opportunities for (sponsor or conduct are more accurate) research to determine the usefulness of marijuana as medicine, and it will publish annual reports of its data and findings.

The measure requires law enforcement agencies to contact ODHS prior to obtaining a search warrant in any marijuana investigation unless they have specific credible evidence that unlawful activity has occurred. The following sentence should be a separate paragraph.

The measure retains criminal penalties for non-medical use of marijuana.

## Supporters Say:

**1. Marijuana is medicine. Patients who need it should be able to get it through a safe regulated supply system. They should be able to obtain an adequate amount to relieve their suffering. This initiative allows qualified patients to obtain an adequate and reliable supply of marijuana for approved medical purposes, which is difficult for most of them under the current law.**

**2. Over 10,000 Oregon patients have been qualified for the medical marijuana program by over 1,413 Oregon doctors. Many more doctors and patients think that marijuana is a safe and effective treatment for medical conditions described in the current law, yet fail to register out of fear. Yet, the number of Doctors and Patients is increasing because medical marijuana works and Measure 33 will ease the fears and make it work for many more.**

**3. Oregon citizens have the right to the best available scientific data on medical marijuana. The scientific research called for and funded by this measure will improve our understanding of the efficacy and safety of medical marijuana.**

**4. This initiative will improve the present law by creating licensed nonprofit dispensaries so that patients will be able to purchase marijuana from a regulated source.**

## Opponents Say:

**1. The increased possession limits of up to six pounds will further complicate law enforcement’s ability to determine illegal possession, manufacturing, distribution, and transportation of marijuana.**

**2. The current law is sufficient to meet the needs of patients who may benefit from the use of medical marijuana.**

**3. Increasing locations and the number of caregivers who may distribute marijuana will make the enforcement of unlawful use of the drug extremely difficult.**

**4. Marijuana is not totally safe and no more effective than other medications available by prescription. Marijuana use may lead to the use of harder drugs.**

## M33: Field Update

*I am pleased to announce that we have a very aggressive field plan, spending time in our support areas, covering every centimeter in Portland and we have point people in different parts of the state, Eugene, Williams, Florence and Salem ... Dan and others thank you so much ... with presence on the coast and in Ashland.*

*We're looking for more point people in as many cities and towns as possible to take campaign materials and help distribute them. Any takers? There are various duties a Field Coordinator is responsible for so if you are interested or know someone who would be, have them contact me.*

*I would like to step up some sort of matrix to show John what others are doing around the state or what they have planned. go to an event? let us know! on a radio station? tell us? speaking at a meeting? call us!*

*By various methods we will be recruiting volunteers to do all sorts of things including a Halloween Canvass and GOTV from October 15-November 2nd.*

*A present there is NO FIELD OPPOSITION. this is a VERY lucky position to be in and we should not get lazy cause we think everyone loves us.....not so. We need;*

*Volunteers: be a Field Coordinator to help the Yes on 33 Medicinal Marijuana campaign WIN and get a free T-shirt! Awesome shirts, too....*

*This experience is great for a resume and future efforts.*

*Point people will receive a packet of fliers, brochures, bumper stickers, a campaign t-shirt and anything else I can think of. We need local businesses to have our materials, we need markets to be flied and we should serve as a community resource to our supporters who want Yes on 33 swag.*

*Also at the office we will be phone banking and then poster the entire city. We also have radio ads-yea! I encourage everyone to come by and see our operation, we're already seeing a trickle of folks coming in to get the word out to vote Yes on 33!*

*Fundraising: The Life With Dignity is am taking cards over the phone and encouraging students and low income folks to volunteer for the campaign and/or the events for a reduced rate.*

*GoTV: a key component of the field plan during GOTV (Oct 15-Nov 2) is getting out there on the streets, showing voters we are committed and reminding not-so-active voters to vote YES On 33. If anyone knows folks who have the ability to stand for a couple hours at a time during morning and pm rush hours these two weeks, PLEASE*

*have them email me, call the office or stop by the office. We need as many people out as we can!*

*\* We need pods of people to start preparing for GOTV visibility. It only takes a few people to go to an intersection, bridge or whatever during the last two weeks of the campaign. We need this STATEWIDE.*

*\* We need anyone going to a houseparty or political event to email me for materials, i will send it out priority.*

*\* Need people to continually write LTE's on message.*

*\* We have window signs, yard signs are coming, please reply to have some sent.*

*\* We need anyone subscribed to any list to BLAST out a message about M33.*

*I know all of us are doing everything we can; we must branch out and ask those around us what THEY can do to help. Anytime anyone has anything to share about field coverage, please post to the list.*

*I appreciate everyone's energy in order to win this campaign. and we will. ps. Please forward to individuals you think need activating. Thanks!*

*peace,*

*Barbara Payne  
503-224-3051  
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Statewide Field Director  
Yes on 33!  
<http://www.yeson33.org/>*

### Other Contacts:

**SALEM: Medical Cannabis Resource Center**  
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(503-363-4588) \* [MercyCenter@hotmail.com](mailto:MercyCenter@hotmail.com)  
[www.MercyCenters.org](http://www.MercyCenters.org)

Keep the LTEs going and thanks to everyone for the tips. Remember the LTEs are one of the most read sections of the paper and at the least should result in some "free media advertising". This issue can't have too much good free media advertising so everyone who gets a letter published is making a big contribution to the campaign. A lot of well-written LTEs could even win this thing for us, if it is close.

In a few days the Life With Dignity will post well documented rebuttals to the silly opposition arguments on the [yeson33.org](http://www.yeson33.org) website.

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# YES ON 33

SAFE MEDICINE \* SAFE ACCESS

A LIFE WITH DIGNITY CAMPAIGN, 4315 SE Division, Portland, OR 97206, 800-669-3037

<continued from previous page> These spurious arguments will not stop our forward progress for medical marijuana. They will be dealt with, each one as appropriate. We hope that the Libertarian Party will recant their position. If they want history to record that they obstructed the legitimizing of this life giving medicine, then so be it.

When you see the 15 "yes on 33 arguments" we are sure you will agree that they are far more persuasive.

All of us must do our part in this battle of ideas. These ideas will come up in many forums over the coming weeks: newspaper articles - write a letter to the editor talk shows - call in armed with our talking points discussions with friends - convince people one at a time.

The presentation of these silly arguments by our opponents gives us the opportunity to explain and educate. The truth is our greatest ally and it is why we are so confident we will win this crucial election. We must hold to our principles, keep telling our stories about how effective medical marijuana is, explain why OMMA is inadequate and we will prevail.

All the problems we have endured will seem as a minor bump on the road to a better future where ALL patients will have access to this great medicine.

Be strong my friends. Be confident. We are fortunate to have the truth on our side. And we are fortunate to be able to work on this issue where the strongest attacks we face are silly, misguided ideas from people who want to deny the future of medical marijuana.

Thanks for your continued support and all the work you are going to do over the next months to win this election.

## What do we need for the campaign

1) More volunteer help around the office. Just come on by. There are always packets to put together, phoning to do, errands to run, and lots of other jobs. Please don't wait for a fancy invitation. Just come by and do some work.

2) We now are set up to take donations by Pay pal on the [www.yeson33.org](http://www.yeson33.org) website so please start linking to this site from your webistes etc.

3) We need more people to hit public events giving out fliers and free bumper stickers. Just having the public see good looking presentable patients out there talking medical marijuana is a big help. We have already distributed a few thousand bumper stickers at the State Fair and at some Portland events. Lets do a lot more.

4) We are struggling to get the next issue of the Marijuana Report

out. Any writing, photography, cartoons, graphics, or other help would be greatly appreciated. When we publish in a week or two we will need all hands on deck to distribute 100,000 copies to supporters and swing voters.

5) We need to start competing with Kerry in SE Portland on lawn signs. Lets make Yes on 33 the mainstream winning position.

6) Listen to talk radio and start calling in. Visit local media websites that have forums and start talking about Measure 33.

**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.

## 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.

Launching a particular project for which you need the help of other volunteers and/or Voter Power's authorization to act in its name.

Yes on 33 Campaign Headquarters  
Voter Power Office  
4315 SE Division St  
Portland, OR 97206  
503-224-3051  
or by visiting:

**[www.YesOn33.org](http://www.YesOn33.org)**