

US Drug Enforcement Administration Targets Montana State Lawmaker Over Her Advocacy For Medical Marijuana

The MT: Missoula, Enforcement Administration (DEA) is investigating Montana state lawmaker over whether statements she made during the 2011 legislative session in favor of regulating the production and distribution of medical cannabis under law mav constitute state conspiracy to violate federal anti-drug laws.

The lawmaker, Rep. Diane Sands -- a Democrat from Billings, Montana -- served as the chairwoman of a 2011 interim legislative committee that sought to clarify statewide rules regulating the use of medicinal cannabis, which has been legal in the state since 2004. <continued on page 3 >

Delaware: Federal Threats Halt Efforts To Implement State's Medicinal Cannabis Law

Dover, DE: Democrat Gov. Jack Markell has abruptly halted plans to implement legislation passed in 2011 that allows qualified patients to obtain marijuana from state-

<continued on page 4 >

Salem Police Ransack Medical Marijuana Dispensary

"Smokey's Lounge" A Private Club For Legal Medical Marijuana Patients is Raided

(SALEM, Ore.) - Many people in South Salem were witness to the police action on 13th Street Tuesday at Smokey's Lounge. For hours, police had the driveway blocked and were seen in and around the building taking photographs and by some accounts, intimidating onlookers. <continued on page 5 >

Study: Passage Of Medical Marijuana Laws Correlated With Fewer Suicides

Bonn, Germany: The enactment of statewide laws allowing for the limited use of cannabis therapeutically is associated with reduced instances of suicide, according to a discussion paper published in January by the Institute for the Study of Labor in Bonn, Germany. <continued on page 3 >

Medical Marijuana Laws Have No Discernible Adverse Impact On Adolescents' Use, Study Says

Canada: Montreal, The enactment of state laws allowing for the limited legal use of cannabis by qualified patients has little to causal effect on broader marijuana use, according to data published online in the iournal Annals Epidemiology

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Cannabis Is "An Effective Treatment" For Cancer Patients, Israeli Study Concludes

Tel Hashomer, Israel: Some two-thirds of Israeli cancer patients authorized to use cannabis report long-term, symptomatic improvement from the plant, according to clinical data presented in January at a conference of the Israeli Oncologists Union and reported in several international media outlets.

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The MERCY News

Report is an allvolunteer, not-for-profit
project to record and
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announcements and
information about medical
cannabis in Oregon,
across America and
around the World.

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About MERCY – The Medical Cannabis Resource Center

MERCY is a non-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.

Want to get your Card? Need Medicine Now? Welcome to The Club! MERCY – the Medical Cannabis Resource Center hosts Mercy Club Meetings every Wednesday at – 1469 Capital Street NE, Suite #100, Salem, 97301 – from 7pm to 9pm to help folks get their card, network patients to medicine, assist in finding a grower or getting to grow themselves, or ways and means to

medicate along other info and resources depending on the issue. visit

- www.MercyCenters.org - or Call 503.363-4588 for more.

The Doctor is In ... Salem! * MERCY is Educating Doctors on signing for their Patients; Referring people to Medical Cannabis Consultations when their regular care physician won't sign for them; and listing all Clinics around the state in order to help folks Qualify for the OMMP and otherwise Get their Cards. For our Referral Doc in Salem, get your records to – 1469 Capital Street NE, Suite #100, Salem, 97301, NOTE: There is a \$25 non-refundable deposit required. Transportation and Delivery Services available for those in need. For our Physician Packet to educate your Doctor, or a List of Clinics around the state, visit – www.MercyCenters.org - or Call 503.363-4588 for more.

Other Medical Cannabis Resource NetWork Opportunities for Patients as well as CardHolders-to-be. * whether Social meeting, Open public -or-Cardholders Only http://mercycenters.org/events/Meets.html ! Also 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. Resources > Patients (plus) > Online > Forums * Know any? Let everybody else know! Visit: http://mercycenters.org/orgs/Forums.html and Post It!

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<continued from US DRUG ENFORCEMENT ADMINISTRATION TARGETS MONTANA STATE LAWMAKER OVER HER ADVOCACY FOR MEDICAL MARIJUANA, page 1

"Can you say McCarthy?" Rep. Sands told The Missoulian newspaper. "This sounds like stuff from the House Un-American Activities Committee and Joe McCarthy. So once you talk about medical marijuana in reasonable terms, you're on some sort of list of possible conspirators. ... It's ridiculous, of course, but it's also threatening to think that the federal government is willing to use its influence and try to chill discussion about this subject."

Neither the DEA nor the U.S. Attorney's Office would respond to inquiries from *The Missoulian* regarding why Rep. Sands' name came up in the federal government's investigation.

For more information, please contact Allen St. Pierre, NORML Executive Director, at (202) 483-5500, or visit: http://montananorml.org/.

<continued from STUDY: PASSAGE OF MEDICAL MARIJUANA LAWS CORRELATED WITH FEWER SUICIDES, page 1 > Researchers at Montana State University, the University of Colorado, and San Diego State University assessed rates of suicide in the years before and after the passage of statewide medical marijuana laws.

"Policymakers weighing the pros and cons

of legalization should consider... that (these) laws may lead to fewer suicides among young adult males"



Authors found, "The total suicide rate falls smoothly during the prelegalization period in both MML (medical marijuana law) and non-MML states. However, beginning in year zero, the trends diverge: the suicide rate in MML states continues to fall, while the suicide rate in states that never legalized medical marijuana begins to climb gradually."

They reported that this downward trend in suicides in states post-legalization was especially pronounced in males. "Our results suggest that the passage of a medical marijuana law is associated with an almost 5

percent reduction in the total suicide rate, an 11 percent reduction in the suicide rate of 20-through 29-year-old males, and a 9 percent reduction in the suicide rate of 30- through 39-year-old males," they determined.

Authors theorized that the limited legalization of cannabis may "lead to an improvement in the psychological well-being of young adult males, an improvement that is reflected in fewer suicides." They further speculated, "The strong association between alcohol consumption and suicide-related outcomes found by previous researchers raises the possibility that medical marijuana laws reduce the risk of suicide by decreasing alcohol consumption."

They concluded: "Policymakers weighing the pros and cons of legalization should consider the possibility that medical marijuana laws may lead to fewer suicides among young adult males."

Full text of the discussion paper, "High on Life: Medical Marijuana Laws and Suicide," is available online at: http://ftp.iza.org/dp6280.pdf.

For more information, please contact Allen St. Pierre, NORML Executive Director, at (202) 583-5500 or Paul Armentano, NORML Deputy Director, at: paul@norml.org.

<continued from MEDICAL MARIJUANA LAWS HAVE NO DISCERNIBLE ADVERSE IMPACT ON ADOLESCENTS' USE, STUDY SAYS, page 1 > Investigators at McGill University in Montreal obtained state-level estimates of marijuana use from the 2002 through 2009 US National Survey on Drug Use and Health. Researchers used difference-indifferences regression models to estimate the causal effect of medical cannabis laws on marijuana use, and simulations to account for measurement error.

Authors <u>reported</u>: "Difference-in-differences estimates suggested that passing MMLs (medical marijuana laws) decreased pastmonth use among adolescents ... and had no discernible effect on the perceived riskiness of monthly use. ... [These] estimates suggest that reported adolescent marijuana use may

<continued from previous page> actually decrease following the passing of medical marijuana laws." They concluded, "We find limited evidence of causal effects of medical marijuana laws on measures of reported marijuana use." Previous investigations by researcher teams at Brown University in 2011 and Texas A&M in 2007 made similar determinations, concluding, "[C]onsistent with other studies of the liberalization of cannabis laws, medical cannabis laws do not appear to increase use of the drug."

The McGill researchers' findings are in conflict with public statements made by Drug Czar Gil Kerlikowske, who in recent years has frequently alleged that the passage of medical cannabis laws is directly responsible for higher levels of self-reported marijuana consumption among US teenagers. For more information, please contact Paul Armentano, NORML Deputy Director, at: paul@norml.org, or Allen St. Pierre, NORML Executive Director, at (202) 483-5500. Full text of the study, "Do medical marijuana laws increase marijuana use? Replication study and extension," appears in the journal Annals of Epidemiology.

<continued from DELAWARE: FEDERAL THREATS HALT EFFORTS TO IMPLEMENT STATE'S MEDICINAL CANNABIS LAW, page 1 > licensed facilities. Governor Markell

had initially <u>signed</u> the <u>law</u>, Senate Bill 17, The Delaware Medical Marijuana Act, last May. Under the law, patients with a qualifying illness may legally possess up to six ounces of



cannabis, provided they obtain it from a statelicensed, not-for-profit 'compassion center.' State regulators anticipated to begin licensing marijuana producers and distributors later this year.

On Friday, Gov. Markell <u>announced that he was suspending the program</u> because his office received a letter from the Obama Justice Department alleging that its implementation would subject those licensed under the law, as well as public servants, to federal criminal prosecution. States the letter, authored by US Attorney Charles M. Oberly III, "[G]rowing, distributing and possessing marijuana, in any capacity,

other than as part of a federally authorized research program, is a violation of federal law regardless of state laws permitting such activities. Moreover, those who engage in financial transactions involving the proceeds of such activities may also be in violation of federal money laundering statutes."

The letter further threatens, "State employees who conduct activities mandated by the Delaware Medical Marijuana Act are not immune from liability under" the federal Controlled Substances Act.

Justice Department officials sent similar letters lawmakers and governors in states considering related legislation last spring. Shortly after receiving the letters, Washington Democrat Gov. Chris Gregoire legislation that sought to allow for licensed cannabis dispensaries in that state. Soon thereafter, Rhode Island Independent Gov. Lincoln Chafee also nixed regulations allowing state-licensed for the production and distribution of cannabis.

In a statement issued by Gov. Markell on Friday, he claimed that the federal government left him with no other alternative but to suspend the law's implementation. "To do otherwise would put our state employees in legal jeopardy, and I will not do that," he said.

In response to the Governor's actions, sponsors of the law have <u>suggested</u> amending the Medical Marijuana Act to allow for qualified patients to cultivate cannabis at home, a practice that is presently allowed under state law in <u>14 other states</u>.

To date, three states -- Colorado, Maine, and New Mexico -- have issued licenses to allow for the state-sanctioned production and distribution of cannabis. So far, programs in those states have operated largely without federal interference. Similar licensing legislation approved in recent years in Arizona, New Jersey, Vermont, and Washington, DC has yet to be implemented by local lawmakers.

For more information, please contact Allen St. Pierre, NORML Executive Director, at (202) 483-5500 or Paul Armentano, NORML Deputy Director, at: paul@norml.org.

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<continued from CANNABIS IS "AN EFFECTIVE TREATMENT" FOR CANCER PATIENTS, ISRAELI STUDY CONCLUDES, page 1 > Investigators at the Sheba Medical Center in Tel Aviv, in conjunction with the Israeli Cancer Association, assessed the efficacy of cannabis therapy over the course of one year in 264 patients with cancer. Researchers reported: "Some 61 percent of the respondents reported a significant improvement in their quality of life as a result of the medical marijuana, while 56 percent noted an improvement in their ability to manage pain. In general, 67 percent were in favor of the treatment, while 65 percent said they would recommend it to other patients."

The study concluded that cannabis is "effective" treatment for certain symptoms of the disease cancer and recommended, "The treatment should be offered to the patients in earlier stages of cancer." In the trial, the most common types of cancer for which medical marijuana was prescribed was lung cancer (21 percent), breast cancer (12 percent) and pancreatic cancer (10 percent). The study focused primarily on the use of cannabis to relieve various symptoms of cancer or cancer treatment, such as pain and nausea, but did not evaluate whether marijuana therapy could potentially suppress the proliferation of the disease. In preclinical trials, various cannabinoids -- including THC and (cannabidiol) -- have been shown to selectively target and eliminate malignant cells and cancerous tumors.

To date, some 6,000 Israelis <u>possess</u> government <u>authorization</u> to use cannabis therapeutically. Patients authorized by the federal program may either cultivate cannabis at home or they may obtain marijuana from one of the nation's 12 licensed cannabis farms.

Last summer, the Israeli Health Ministry formally <u>acknowledged</u> the therapeutic utility of cannabis and announced newly amended guidelines to more effectively govern the statesponsored production and distribution of medical marijuana. The Ministry <u>estimates</u> that as many as 40,000 patients will eventually have access to medicinal cannabis once the Israeli program is fully implemented. For more information, please contact Paul Armentano, NORML Deputy Director, at: <u>paul@norml.org</u>.

NORML's literature review of the anti-cancer properties of cannabis and cannabinoids is available online at: http://norml.org/library/item/gliomascancer.

Cannabis Use Not Associated With Alterations In Dopamine, Study Says

New York, NY: The consumption of cannabis is not associated with residual alterations in the release of dopamine in chronic users, according to <u>trial data</u> to be published in journal *Biological Psychiatry*.

<u>Dopamine</u> is a neurotransmitter that is responsible for reward-driven learning and behavior. Alterations in the brain's production of dopamine is associated with the habitual use of various dependence-inducing intoxicants, including alcohol, heroin, and cocaine.

Investigators at the New York State Psychiatric Institute and Columbia University assessed dopamine levels in 16 recently abstinent, psychiatrically health cannabis users and 16 matched controls. Researchers found that cannabis consumers did not show any significant differences compared to controls in any of the brain regions assessed. Authors concluded, "Unlike other addictions, cannabis dependence of mild to moderate severity is not associated with striatal DA (dopamine) alterations."

They cautioned, however, that early onset use of cannabis or long-term use of the plant may be associated with a decrease in the release of dopamine in the <u>striatum</u>. For more information, please contact Paul Armentano, NORML Deputy Director, at: <u>paul@norml.org</u>. Full text of the study, Dopamine Release in Chronic Cannabis Users: A [(11)C]Raclopride Positron Emission Tomography Study," will appear in Biological Psychiatry.

<continued from SALEM POLICE RANSACK MEDICAL MARIJUANA DISPENSARY, page 1 > The small building serving as a medical marijuana lounge is not much of a hot spot. It is unassuming and quiet, even with patients coming and going. On the front door is a posted note, explaining that one must have an Oregon Medical Marijuana Permit and picture ID to enter. It is a private club. Patients that are state-sanctioned

<continued from previous page> to legally use marijuana (or Cannabis) must acquire their medicine from a source outside the accepted pharmaceutical industry. That is the way the State of Oregon has it set up.

A patient with a chronic medical condition may have a doctor who believes Cannabis will do them some good, perhaps to keep them off hard drugs, or to reduce the amount of dangerous prescription drugs necessary. Once their doctor has signed the application for a medical marijuana permit, the patient sends the information in to the state- with \$200. This process is repeated every single year, making Cannabis the only medicine that patients must pay a tax in order to take.

In Oregon, patients who decide to use allnatural herbal medicine are responsible for either growing or reimbursing someone else for the expenses to grow their medicine. For some people, both are very impractical ideas.

The elderly and infirm are rarely able to accomplish the task of gardening, and must rely on others to supply their medicine. Some say that there are not enough gardeners available for patients, and have a difficult time in finding one. Rightly so, people are careful about trusting others in this arena. That is where the medical marijuana dispensary comes Dispensaries have been opening up around Oregon increasingly since 1998, and in 2010 there was an intense effort to regulate them (Measure 74), but voters rejected the bill. The campaign to change the availability of medicine statewide continues. This is a "burr in the saddle" for the U.S. Attorney General.

Regardless of Oregon's laws, the Federal Government has the ability to overrule and circumvent our authority. U.S. Attorney General Eric Holder sent a letter to Oregon Medical Marijuana dispensaries last June, professing his intention to shut them down. He said that the Feds would go after the landlords, and threatened to take their property if they don't go along with him. The letter was signed by 33 of 34 Oregon district attorneys. (See previous article:

http://salem-

news.com/articles/june062011/cannabis-dispensaries.php)

Many dispensaries complied, instantly defeated. Some contacted their attorneys and warily continued. Some insisted they were already complying with the law, and refused to close.

Medical marijuana clubs or lounges in Oregon operate under the propriety of not making any medicine available to sell; they are disallowed from "selling" completely. A patient is allowed to donate (toward utilities, water, fertilizer, etc) and receive some medicine. It is a simple answer for a great many people. It is compassionate.

Whether or not AG Holder's promise to disrupt the lives of thousands of Oregon patients was behind the efforts on Tuesday is not clear, but it does appear to be a factor.

Tuesday morning started out with the police responding to a broken window at Smokey's Novelties Gift Shop in downtown Salem. At 6:30 a.m. morning walkers saw the aftereffects of an alleged robbery, with police surrounding the store for hours.

Something prompted police to obtain a search warrant, apparently via "Probable Cause" and proceed to the owner's other properties for a fine-tooth-comb going over.

This brought them through the closed door of Smokey's Lounge. What they did and what, if anything, they found there is still undetermined.

At 12:10 p.m., owner Edward Lara was booked into the Marion County Jail on eleven counts. General Manager Lupe Espinoza is being held on the same eleven charges. They were both arraigned this afternoon, and each assigned a half-million dollar bail. Their pretrial hearings are 8:30 a.m. March 16 (Espinoza) and April 2 (Lara), respectively.

The charges include Delivery of Marijuana, Endangering Minors, being too close to a school, and, surprisingly, possession of cocaine. The details on Lara's arrest and the story behind each of the charges has not been revealed, though the cocaine charge is a shock to many that know Lara.

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<continued from previous page> At about 7 p.m. Tuesday, I spoke to an officer on the scene. Another stood close by, shining his flashlight in my vehicle while I inquired about the nature of the investigation. The first officer told me that there were police inside, and no one else. I asked if there had been a robbery, which seemed to surprise him, and he clearly said, "No, we have a search warrant. Everything is being searched, they're closed." He didn't offer any other information, or seem to know that this event had reportedly began with a robbery.

Edward Lara, or *Smokey*, is a renowned glass blower from the Salem area. He's been in business since 2002, an artisan entrepreneur who found his calling. His arrest was unsettling for scores of regular clients and patients, their faith in Oregon's justice system brought into question combined with confusion about the many charges. Lara is well-known and respected in the *canna-business* community and has carved out a name for himself with an inventory of quality products.

Salem Police have not returned our request for a statement or produced a press release at this time.

Smokey's Novelties gift shop downtown was not open for business on Wednesday, but the employees seemed hopeful that they would be reopening soon.

The future of Smokey's Lounge however, is definitely more up in the air. For many Salem patients, that is a grave disappointment.

About the Author: Bonnie King has been with Salem-News.com since August '04, when she became Publisher. Bonnie has served in a number of positions in the broadcast industry and has



a depth of understanding that reaches further than just behind the scenes, and that thoroughness is demonstrated in the perseverance to correctly present each story with the wit and wisdom necessary to compel and captivate viewers. Visit -

<u>http://www.salem-</u> <u>news.com/articles/march072012/smokeys-</u> raid_bk.php - for more.

Why Can't You Smoke Pot? Because Lobbyists Are Getting Rich Off of the War on Drugs

Sad Truths On Really Why We Still Put Hundreds Of Thousands Of People In Steel Cages For Pot-Related Offenses.

March 7, 2012 | John Lovell is a lobbyist who makes a lot of money from making sure you can't smoke a joint. That's his job. He's a lobbyist for the police unions in Sacramento, and he is a driving force behind grabbing Federal dollars to shut down the California marijuana industry. I'll get to the evidence on this important story in a bit, but first, some context.

At some point in the distant past, the war on drugs might have been popular. But not anymore - the polling is clear, but beyond that, the last three Presidents have used illegal drugs. So why do we still put hundreds of thousands of people in steel cages for potrelated offenses? Well, there are many reasons, but one of them is, of course, money in politics. Corruption. Whatever you want to call it, it's why you can't smoke a joint without committing a crime, though of course you can ingest any number of pills or drinks completely within the law.

Some of the groups who want to keep the drug illegal are police unions that want more members to pay more dues. One of the primary sources for cash for more policing activities are Federal grants for penalizing illegal drug use, which help pay for overtime, additional police officers, and equipment for the force. That's what Lovell does, he gets those grants. He also fights against democratic mechanisms to legalize drugs.

In 2010, California considered Prop 19, a measure to legalize marijuana and tax it as alcohol. The proposition gained more votes than Meg Whitman, the former eBay executive and Republican gubernatorial nominee that year, but failed to pass. Opponents of the initiative ran ads, organized rallies, and spread conspiracy theories about billionaire George Soros to confuse voters.

<continued from WHY CAN'T YOU SMOKE POT? BECAUSE LOBBYISTS ARE GETTING RICH OFF OF THE WAR ON DRUGS; SAD TRUTHS ON REALLY WHY WE STILL PUT HUNDREDS OF THOUSANDS OF PEOPLE IN STEEL CAGES FOR POT-RELATED OFFENSES, previous page> Lovell managed the opposition campaign against Prop 19. He told Time Magazine that he was pushing against the initiative because, "the last thing we need is yet another mind-altering substance to be legalized."

But Republic Report reviewed lobbying contracts during the Prop 19 fight, and found that Lovell's firm was paid over \$386,350 from a wide array of police unions, including the California Police Chiefs Association.

While Lovell may contend that he sincerely opposes the idea of marijuana legalization, he has constructed an entire business model predicated on pot prohibition.

Shortly after President Obama's stimulus Lovell went program passed, to work channeling the taxpayer money for California war programs. According into documents Republic Report obtained from the Police Chiefs Association, Lovell helped local departments apply for drug war money from the Federal government. There is a copy of one letter sent to a police department in Lassen County, California: > here >

http://www.alternet.org/story/154448/why can 't you smoke pot because lobbyists are getti ng rich off of the war on drugs?akid=8373.8 952.vNXP4B&rd=1&t=5

There is big money in marijuana prohibition. Lovell represented a police union in a bid to steer some \$2.2 million dollars into a "Marijuana Suppression Program." In 2009 and 2010, California police unions sought a \$7,537,389 chunk of Federal money for police to conduct a "Campaign Against Marijuana Planting" program. The anti-marijuana money went directly into the paychecks of many officers. For example, police departments in Shasta, Siskiyou, and Tehama Counties formed

"North California Eradication Team" receive \$550,000 in grants that helped pay for overtime, a new officer, and flight operations: The total amount awarded was \$550,000, to be split between Shasta, Siskiyou and Tehama counties, which make up the Northern California Marijuana Eradication Team (NorCal-MET). Broken down in the agenda worksheet, the sheriff's office is expecting to spend \$20,000 on flight operations, \$94,895 for the full-time deputy's salary and benefits, \$16,788 for the administration assistant salary and benefits and \$29,983 to cover up to 666.29 hours of overtime. Read more http://www.alternet.org/story/154448/why_ca n%E2%80%99t you smoke pot because lob byists are getting rich off of the war on dr ugs?akid=8373.8952.vNXP4B&rd=1&t=5 here.

Register Now For NORML's Seventh Annual Aspen Legal Seminar

Washington, DC: NORML is accepting registrations from criminal defense attorneys and the general public to attend its seventh annual <u>Aspen Legal Seminar</u>. This year's event takes place from Thursday, May 31 through Saturday, June 2 at <u>The Gant Hotel</u> in downtown Aspen -- one of the nation's most cannabis-friendly cities.

Topics of discussion at this year's conference include: 'Medical Marijuana and the Workplace,' 'Transitioning from Medical Use to Full Legalization,' 'Defending Paraphernalia and Spice (K-2) Cases,' 'Jury Selection in a Marijuana Case,' and 'How to Use the Latest and Best Science to Defend Against a DUID Marijuana Prosecution.'

"NORML is proud to make this once-a-year legal seminar open to lawyers and the public," said NORML founder and Legal Director Keith Stroup. "Don't miss this rare opportunity to join NORML's staff and some of the nation's top pot lawyers and activists in this unique and intimate setting. this Registration information and vear's conference agenda is online at: http://norml.org/about/aspen-legal-seminar.