

Submitted Written Testimony
by: James B. Creel,
Oregon Medical Cannabis Patient
Patient Advocate and Caregiver

Subject: 2017 Legislative Session Bill SB1057

Greetings Madam Co-Chairs and Honorable Legislators,

I am writing you today to protest SB1057, the original 39 pages and its subsequent -1,-2, -3 and so on addendum et al in it's entirety, a bad bill...is a bad bill...is a bad bill... we could do better, and we all know it...

This bill is particularly disturbing because a page by page breakdown of all of the issues I could find with it would literally be redundant because the whole bill represents a break-down, a break down in compassion, a break down in reality, a break down in care, a breakdown in protections for the most protected of classes...

Just so you know, HB3400 eliminated our now dissolved non-profit - Cannalogix Foundation's ability to survive since everyone of our growers jumped ship to run to the recreational market... I know it was by the design of OLCC and Legislators to do this, but what about all the patients that relied on that garden for access that were given nothing more than a letter when their plants converted to OLCC?

Congratulations... We had to close up services to our patients because we lost the models of the 100 plant grows inside the city, even though we could fit 100 plants inside a garage... Those patients are now going without, they no longer have the access to free medicine, their medical bills and their medicare payouts have increased as a result and their quality of life has diminished... Congrats on the taxes that you generate on that occasional ¼ ounce that they can afford to buy in the rec. stores... Cannalogix wasn't the only non-profit mechanism for the protected class that failed due to HB3400 and the over regulation and needless cuts to our OMMP program rules and regulations, all based on the lies of the profiteers or their stakeholders...

The patients that Cannalogix and I personally cared for are the ones that were taking 3,000 mg a day per patient for extremely debilitating conditions like Ehlers-Danlos Syndrome, Idiopathic Intracranial Hypertension, Multiple Sclerosis, Parkinson's, and the list goes on and on...

That is a great deal of oil which is almost impossible to harvest in less than a 1/4# of premium flower, your already restrictive rules on oil production eliminated the compassionate model for oil distribution, in an effort for safety, and in the same rule making body you are lightening the testing responsibility for recreational while keeping medical at 100%? Do you not realize that is a recipe for disaster in potentially poisoning the very people you are depending on that holier than thou tax revenue?

OLCC, OHA and the Oregon Legislature seems to have the Oregon Medical Marijuana Program sovereignty and what's left of it's limp stability in their cross-hairs. I am not sure of the logic that any legislator or "industry" representative would use to base the idea of; or even embrace the concept of; transferring a truly self sufficient revenue generating program from a state medical regulation authority - regulating a medical program to a vice-regulatory authority attempting to regulate a vice and not doing as well on alcohol as the OHA has done with Medical Cannabis Dispensary Regulation in relation to minors in possession. Statistics don't lie...

Additionally, the OLCC has a cloud of uncertainty over the ethics and integrity of some of their commissioners. I was reading an article in the Willamette Week Dated Oct 25, 2013, where it discussed a DUII arrest of Steve Marks, current OLCC Executive Director, where he was not convicted because the Washington County DA refused to press charges.

I would be curious, to see, how many DUII cases has that particular DA reviewed where he declined to press charges and what were the relative factors in those cases (e.g. wealth, status, public status, etc.).

Regardless, if he was convicted or not, that specific piece of information was known by Rob Patridge, OLCC Chairman for months prior to his confirmation, but Patridge had not shared that information with the other commissioners... Citing that it didn't matter because he wasn't convicted... He was intoxicated enough for an officer to take the time to initiate the contact...they are busy as it is...I don't see them wasting their time... I don't know about you, but I don't want alcoholics governing alcohol, any more than you want cannabis consumers governing cannabis...

Another Director of the OLCC, Teresa Kaiser resigned over a DUII in 2006 when she crashed into an SUV on the west end of the Sellwood bridge...does it matter to anyone that the Sellwood Bridge is less than 2 miles from the OLCC Headquarters? OLCC has a history of integrity issues, they do not need to be in any position of oversight for any portion of the Oregon Medical Marijuana Program or any medical records, medical patient names, medical patient addresses, medical anything because at the end of the day they are a vice-regulatory authority...not medical...

The way that the Oregon Medical Cannabis Patients have and are being betrayed by the Oregon Legislature, Oregon Health Authority, and Oregon Liquor Control Commission is embarrassing... I have personally volunteered and worked tirelessly as far back as SB1085 back in 2005 to aid Oregon in building the best program in the nation and prior to Measure 91 and it's support bills, we had the best...

Today, I don't see it as that anymore for patients, the betrayals from all areas of the industry and all walks of life over the mutual interest of making a dollar have turned the stomachs of the most compassionate of providers in the state...

I tell patients today to go to California, Colorado, or Arizona if they want to become medical refugees and seek a viable compassionate based model, fact is, Oregon's only saving graces have been gutted by bills like SB1057 and HB3400 and the like...

It is a sad day in Oregon for us all, as our mutual legacy will be etched in the marble slabs of history as a state that threw it's sickest patients to the floor and trampled over their program in an effort to generate the highest possible recreational cannabis tax revenues... Regardless, the laws have created a defacto – monopoly of power that continues to rule over the sickest of patients like they are some source of income....

As a state, we can continue to rob from the poor and spend it on more programs that serve the rich, or we can do what we all came here to do and we can all serve the people by scrapping any bill that further damages the OMMP program...

Respectfully Submitted April 11, 2017,
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