DISTRICT OF COLUMBIA

ALCOHOLIC BEVERAGE CONTROL BOARD

MEETING

IN THE MATTER OF: : Public
Medical Marijuana : Hearing
Proposed Rulemaking :

Wednesday
April 28, 2021

The Alcoholic Beverage Control Board met via WebEx videoconference, Chairperson Donovan W. Anderson presiding.

PRESENT:

DONOVAN W. ANDERSON, Chairperson
BOBBY CATO, JR., Member
RAFI ALIYA CROCKETT, Member
EDWARD S. GRANDIS, Member
JENI HANSEN, Member
JAMES SHORT, JR., Member

ALSO PRESENT:

YVETTE ALEXANDER, Witness
SIMONE ANDREWS, DC ABRA Staff
MICHAEL BOBO, Witness
RABBI JEFFREY KAHN, Witness
DAWN LEE-CARTY, Witness
ADRIAN SALSGIVER, Witness
C-O-N-T-E-N-T-S

WITNESS TESTIMONY

Rabbi Jack Kahn ................................. 18
Dawn Lee-Carty ................................. 10
Adrian Salsgiver ............................... 20
Yvette Alexander .............................. 29
1 P-R-O-C-E-E-D-I-N-G-S

2 1:33 p.m.

3 CHAIRPERSON ANDERSON: Good afternoon, everyone. We have a public hearing on the
4 Medical Marijuana Proposed Rulemaking. Good afternoon, I am Donovan Anderson, Chairman of the
5 Board. We have six Board members here today.
6
7 The six Board members who are here today are Mr. James Short, Mr. Bobby Catto,
8 Ms. Raffi Crockett, Ms. Jeni Hansen, and Mr. Edward Grandis.
9
10 The Board has six members in attendance and that constitutes a quorum for the
11 conduct of business today. And so, as I said, again, good afternoon, everyone. Thank you for
12 joining us today.
13
14 As a public hearing on the --before I start, if anyone has any technical difficulties,
15 while we have this hearing, please, please contact simone.andrews2@dc.gov or you put
16 whatever technical difficulties you're having in the question and answer feature.
17
18 As I said, good afternoon, everyone.
19 Thank you for joining us today at the public hearing on the Alcoholic Beverage Control Board's
Medical Cannabis Emergency and Proposed Rules.

By way of background on July 28th, 2020, the Council of the District of Columbia passed legislation that transferred the Medical Cannabis Program from the D.C. Department of Health to the Board.

The Board assumed jurisdiction over the District's Medical Cannabis Program on October 1st, 2020. Since that time, the Board has taken deliberate steps to ensure a seamless transition of the program from Department of Health to the Board.

One of the Board's first steps was to host a public roundtable on September 6th, 2020. The public roundtable was well attended, informative and helpful to the Board to hear directly from industry stakeholders about the success, shortcomings and areas of opportunity for the Medical Cannabis Program.

After holding the public roundtable, the Board issued a series of emergency rulemakings to address many of the issues raised during the roundtable.

Those emergency rulemakings were:

1) the Medical Marijuana Delivery Notice of Third
Emergency; 2) the Non-Resident Notice of Emergency Rulemaking; and 3) the Temporary Registration Card Notice of the Emergency Rulemaking.

Since the adoption of these three emergency rulemakings the Board has had the opportunity to review the Medical Cannabis Program more broadly.

The greater understanding and long-term view resulted in the Medical Cannabis Notice of Emergency and Proposed Rulemaking adopted by the Board on March 3, 2021, and which is the subject of today's public hearing, public rulemaking hearing. The Emergency and Proposed Rulemaking does the following.

One, allows qualifying patients to administer or have medical marijuana administered at locations other than their residence, including the residence of another person is permitted, or at a school with a policy for administering medication on the premises.

Two, repeals the requirement for a mandatory training program for recommended, authorized practitioners.

Three, establishes the process for
conducted show cause, fact-finding and
safekeeping hearing.

Four, revises the composition of the
Advisory Committee.

Five, updates the selection review
process and selection criteria.

Six, allows applicants for employment
including managers at the cultivation center,
dispensary, or testing laboratory to obtain a
temporary registration card during the COVID-19
pandemic.

Seven, allows dispensaries or other
educational classes and demonstrations.

Eight, permits the delivery and
curbside pickup of medical marijuana and allow
dispensaries to have up to five delivery
vehicles.

Nine, eliminates from the regulations
the maximum number of marijuana plants that a
cultivation center can grow at one time.

Ten, updates the minimum age and entry
requirement.

Eleven, clarifies the civil fines
range and process while revises the appeals
process to clarify that appeals of the Board's
decisions are sent to the District of Columbia Court of Appeals, rather than to the Office of Administrative Hearings.

I want to thank everybody who is present today to share their thoughts with the Board. At this juncture, we will proceed with our first witnesses.

Ms. Andrews, can you please? It's my understanding that we have five witnesses who signed up today. And so, can you please allow the witnesses to be able to testify?

MS. ANDREWS: Sure, stand by. Mr. or Ms. Salsgiver, your rights have been elevated. Ms. Dawn Lee-Carty, I'm going to unmute your line for you.

Ms. Alexander, your rights have been elevated. Mr. Kahn, your rights have been elevated. And that's all, Mr. Chair. We do have few extra people on the line. But that's all my records show, that --

CHAIRPERSON ANDERSON: All right, currently, we have the people's who's name I have to testify are: Rabbi Jeffrey A. Kahn; we have Dawn Lee-Carty; Zoey Carty; Adrian Salsgiver; and Yvette Alexander. These are the people that I
have who are scheduled to testify.

If there are other people on the line who wish to testify, please identify yourself through the chat and Ms. Andrews will elevate your rights. So what I will do and the order, I will listen or that will follow.

I will have Rabbi Khan who will testify. Then, we'll have Dawn Carty, then, Zoey Carty, then, Adrian Salsgiver, and counsel member, former counsel member Yvette Alexander from Alexander and Associates will testify.

I will allow each party five minutes to testify. And once they have testified, if there are others who wish to testify, please alert us through the chat and I will recognize you.

And so with that, without further ado, we will go with Rabbi Jeffrey Kahn. You can -- I don't see you. I see that you are identified on my screen.

So if you are, if you have a camera, you can turn your camera on so we can see you while you testify, sir. But it's sort of like each party, prior to testifying, just identify themselves for the record please.
So we can start with you, Rabbi Khan.

Are you there, Rabbi Khan? I see him. I see his name in front of my screen, but I'm not getting a response.

MS. ANDREWS: Stand by, Mr. Chair.

He's logged in like three times. I'm going to elevate another.

CHAIRPERSON ANDERSON: Okay, thank you.

RABBI KHAN: Hello?

CHAIRPERSON ANDERSON: Rabbi Khan?

I'm sorry. I'm not sure how many lines you have open. So I'm getting feedback. So need you to just unmute one line.

RABBI KHAN: How about is now better?

CHAIRPERSON ANDERSON: Yes, it's now better. I can't, I cannot see here.

RABBI KHAN: I can't hear you, but can you me?

CHAIRPERSON ANDERSON: I can hear you. I cannot see though. But if you have a camera, that's fine. But it appears that you might have more than one line open because I'm here feedback.

RABBI KHAN: I'm going to close out,
and try and come back.

CHAIRPERSON ANDERSON: All right, thank you.

MS. ANDREWS: I just wanted to make an announcement for all those that are attending, if there are more than one person in the same room, you guys should be wearing headphones. There should be no speakers in the background.

CHAIRPERSON ANDERSON: Thank you, Ms. Andrews.

CHAIRPERSON ANDERSON: What I will do -- do I have Dawn Lee-Carty, here? Is that person on the line?

MS. LEE-CARTY: Yes, I'm here.

CHAIRPERSON ANDERSON: All right. I can't see you, so that's why I'm asking. So I don't know where you are on the screen. So we can have you please identify yourself for the record. And then, you can have five minutes to speak.

MS. LEE-CARTY: Okay. I'm trying to enable my camera but it's not giving me an option. Give me one second, please.

Unfortunately -- can you still hear me, sir?

CHAIRPERSON ANDERSON: Yes, I can hear
you.

MS. LEE-CARTY: Okay. Unfortunately, I don't know why I don't have the camera availability.

CHAIRPERSON ANDERSON: Well, that's fine. I can hear you loud and clear. So go ahead, please.

MS. LEE-CARTY: Okay. So good afternoon. My name is Dawn Lee-Carty, Founder of Speak Life and mother of Zoey Carty.

It's been 443 days of me wanting to reach any Government official possible from Department of Health, to the Attorney General's Office regarding a situation with my child that almost took her life.

And today makes 443 days that I'm actually able to speak today. And I'm thankful that I am here, today. And I'm thankful that it didn't happen 200 days, or 100 days in because the emotions were way too high.

And today I'm here on a very even and level, you know, solution focus playground for all of us. I'm here today because I saw going to Section 602, I mean, Section 204.A, the limited liability that you have, where there is no
liability assumed for the patients who ingest medical cannabis.

I'm here to speak out on that on behalf of being a patient advocate, a Medical Cannabis Patient Advocate for six years and an epilepsy advocate for 13 years.

My young daughter would have up to 65 seizures a day. She was born with frontal lobe epilepsy. She's ingested over 17 different pharmaceuticals in her short period of life. And to most of them she was drug resistant.

But in 2015 when all other matters failed, you know, I dove into the research of medical cannabis. And it was hard for me to make that decision, but it was the best decision that I've made.

Because, you know, five years later, my daughter went from having 68 seizures a day to being 85 percent seizure free, to having four years of being pharmaceutical free, and to being five years hospital free. Some place where we always stayed.

She recently enacted law in 2019, this Fair Student Act, which allows children to medicate on school property with a licensed
health care professional and she championed that law.

And we were forced by the Department of Health to submerge into the Medical Cannabis Program and was told that our home grow would not be allowed on school grounds.

Well, at that time, it was just the fact that Zoey actually having access was the benefit. So November 19th, once we got all our credentials together, she began medicating with a local dispensary, CBD.

Only three months into this ingesting, Zoey, on February 8th, 2020, went into a grand mal seizure, went into respiratory arrest, and stop breathing for a minute.

She was rushed to Children's Hospital where they did a toxicology report to find that Zoey -- I hold on. I informed the attending physician that Zoey was medical cannabis patient for five years. So it's quite obvious that she would test positive for cannabis.

However, the toxicology report came back positive for ecstasy. So this was mind blowing to me, the attending physician, everyone at the hospital.
My daughter was admitted into ICU for six days because the intensity of the seizure caused mild swelling on the right side of her brain.

The doctors, everyone, were under the assumption that, you know, I didn't have access to give it to her, that her CBD bottle must have been contaminated.

When Zoey was discharged from the hospital six days later, I waited like about five days. And drove Zoey and the bottle of CBD oil to Massachusetts to have a third party test it. And when it was third-party tested, it came back five days later that there's an additive that was in Zoey's CBD oil called pipernonyl butoxide. It's an additive that is commonly used in general cannabis cultivation practices.

However, pipernonyl butoxide was banned by the FDA in 1979 because it has the molecular and chemical structures of MDMA. Hence, my daughter's positive ecstasy result in the hospital.

CPS was called. An investigation was launched. And it was by far the worst. Four
hundred and forty three days later, Zoey is no
longer medicating with cannabis. And it's not by
choice. It's by safety.

And I'm here today with only five
minutes and I'm trying to push it as fast as I
can, is to say that there is a public health
crisis that is prevalent in Washington D.C.

I understand that we do not have
funding for regulations or testing because it's,
you know, still federally illegal. However, I
propose one contaminant at a time.

And with one contaminant at a time,
I have all the science of PBO. We've been
studying this for 443 days. We have a case study
that's been submitted to California University
Berkeley, which is currently under peer review.

We understand that a college student
could be going out to apply for that dream job
they stood eight years in school for and, you
know, he medicates with CBD because he has
problem sleeping at night.

However, his employer is requesting
him for urine tests. So this young college grad
presents his ID showing that he is a licensed
medical cannabis patient. However, his urine
comes back positive for ecstasy.

This is why we need to test for all 68 contaminants. But I think that that's a far reach, especially, with the rapidly growing of the cannabis industry. Everything is so fast. There's not enough research. There's not enough science.

But guess what? We have science on piperonyl butoxide. We have science to know that it acted as an antagonist opposed to a protagonist when my daughter was ingesting CBD. The PBO actually blocked her CB1 receptor from receiving CBD. And for three months, she slowly ingested small amounts of PBO, which is ecstasy.

I'm like, once again, I have to announce that I'm very thankful that I did not have anyone that, to return my calls when I was requesting this for 443 days. I'm so thankful that no one did.

At that time, I was an enraged mother. I was an emotional mother and my child was back to like seven different pharmaceuticals. She no longer has any drive. I have to fix my house now because she falls just randomly.

Because cannabis really saved her
life. And taking away the patient's right to grow clean medicine, I think that is unfair because we grew organically.

And it's good when patients know when they're ingesting, especially, when we're in a market where we have, patients are required to sign a limited liability, so that there's no liability if you ingest something that makes you sick.

If a patient needs to sign this, then they should also have a Plan B, an the option to grow their own medication. And in the interim of it all, I strongly propose one contaminant at a time.

And then, let's build from it. Let's create our own framework, you know, that will ensure the safety of the patient and the consumer.

CHAIRPERSON ANDERSON: All right, thank you, Ms. Carty. Thank you, very much for you're your testimony. All right. Now we will go back to a run by Jeffrey Kahn. Can you please identify yourself on record and you have five minutes to testify, please.

RABBI KAHN: I am Rabbi Jeff Kahn and
my family and I created, own, and operate Tacoma Wellness Center, D.C.'s oldest, continuously, operating medical cannabis dispensary in Ward 4.

I've asked to speak today to just spend a moment in support of the Medical Cannabis Notice of Emergency and Proposed Rulemaking, which the Board approved on March 3rd.

We appreciate the clarification of the civil fines, range, and process, and the establishment of the process for conducting show cause, fact-finding, and safekeeping hearings.

Additionally, Tacoma Wellness Center supports allowing qualified patients to administer or have medical cannabis administered at locations other than their residence, including the residence of another, if permitted, or at a school with a policy for administering medication on the premises.

And allowing dispensaries to offer educational classes and demonstrations. The permitting of delivery and curbside pickup of medical cannabis and eliminating from the regulations, finally, the maximum number of cannabis plants that our cultivation center can grow at one time.
We'd also like to go on record today to thank the Council and Mayor Bowser for shifting regulatory authority for the Medical Cannabis Program to ABRA. We've already seen many, many positive changes the past six months. And we look forward to working with ABRA to strengthen our Medical Cannabis Program to keep medical cannabis safely and readily available and to remove the remaining roadblocks that prevent patient access here in the District of Columbia. Thank you.

CHAIRPERSON ANDERSON: Thank you, Rabbi Kahn for your testimony, for your presentation. All right. All right. Is Ms. Zoey Carty, are you on the line?

MS. LEE-CARTY: Unfortunately, Zoey Carty is my daughter, and she wanted to speak on behalf of herself and her experience. However, she's kind of lost faith in our government. And she's a very outspoken young advocate. So we will submit a written testimony on her behalf, sir.

CHAIRPERSON ANDERSON: All right. Thank you. All right. Thank you very much. Adrian Salsgiver? Can you please identify
yourself for the record, please?

MR. SALSGIVER: Yes, I live in uptown, D.C.

CHAIRPERSON ANDERSON: All right. Go ahead, sir.

MR. SALSGIVER: And I'm a medical marijuana patient. And I would like to say that first off, nobody and no government has the right to tell me not to smoke marijuana. Now government has the power because it's enforced with guns and violence, but it doesn't have the right.

The right to self medicate is a God-given right, not a privilege. And the people in D.C. voted instinctively for the right to self medicate when Initiative 81 passed with 70 percent of the vote last year.

Now, medicating with cannabis is not just a quality of life issue, or to help some people deal with the little problems that could be addressed with aspirin. Cannabis is a lifesaving medicine. And there should be no fines and no penalties for smoking marijuana.

Everyone cigarettes are permitted to be smoked, smoking marijuana needs to be allowed.
And all patients need to administer or have medical cannabis administered at locations other than your residence, including just about everywhere, everywhere smoking cigarettes is allowed.

Also, I see that you want to allow dispensaries to offer educational classes and demonstrations. Well, I've taken classes at the Rabbi's Tacoma Wellness Center.

Yes, I used to grow, I used to go to grow class on Saturday mornings and it was very educational, informative, and fun because you get to meet other like minded people.

So you know that educational stuff should continue. And oh, you want to permit delivery and curbside pickup of medical cannabis? Well, I think it's a little late for that because delivery services are doing quite well in D.C.

My building management has sent out nasty emails telling people not to smoke and how it is against the law. Yet my building is a hotspot for marijuana delivery services. Overregulating delivery will not work.

The free market must determine how many vehicles a dispensary can operate because
they will be going into competition with already
established delivery services, which offer much
lower prices than for dispensaries.

One of my other major concerns is
seniors. Now, my pharmacist says that half the
neighborhood is on some kind of pill. Well,
these are dangerous pharmaceutical medications.
And most seniors don't need this. All they need
is a little marijuana.

So there needs to be an outreach to
seniors. Now we have funds to try to get people
vaccinated. You need to have funds to promote
cannabis as a medical alternative to these
dangerous pharmaceutical drugs. So you know
we're looking at funding to promote cannabis.

And oh, also, I'd like to talk about
my medical marijuana card. Recently, I've been
told that effective Thursday, July 1st, all
residents must present a valid medical Marijuana
and Cannabis Program card, or caregiver card to
purchase up to four ounces of marijuana.

Well, I don't see why they're limiting
that or would want to limit. You know, who's
going to smoke more than four? If you if you're
going to smoke more than four ounces of marijuana
in a month, you probably need it.

Anyway on, so in January I paid for my medical marijuana card. But on February 3rd, without any kind of a warning, I was issued a privilege letter, called an approval letter instead of the card that I paid for.

I was told the approval letter was the only ID verification being provided at this time and that the Medical Cannabis Program is not issuing cards during the so-called pandemic.

All doctors, dispensaries, citizens of the District and everybody else involved needs to be informed that, so they can tell everybody they will be getting a letter instead of a card. What rights --

You know, I really don't want the letter. I don't want a privilege letter. I want a card, you know, an ID card, Muriel Bowser Medical Marijuana card.

So I feel like I got ripped off having to spend money on a doctor and paying for the card and everything. And then, I get a privilege letter.

So I'm hoping I get a card pretty soon since I paid for it. Maybe sometime after the
pandemic is over, which I don't think is going to end.

But anyway, another thing is the farmers' market. Cannabis is already being sold at the farmers' markets. I have here cannabis that I purchased at the DuPont Circle Farmers' Market.

And the problem is it's not any good. It just says it CBD. And you know, it's just, I smoked some and it made my lungs sort of felt like I snuffed a whole pack of marbles or something.

So what, you know? We need to let the, you need to be able to sell cannabis at the farmers' market and it needs to be good stuff. Not this.

So let's what else? Also, I noticed that some of the Mayor's safe cannabis sales after 2021 takes away some of the Initiative 71 that the people voted for.

I mean, there shouldn't be any changes to that. And, you know, there should not be any limits to any, you know, amount that you have, or can grow, or anything like that.

I mean, you know, this is crazy. And
illegal casual sales, people need to be able to,
you know, have adult consensual activity,
meaning, you know, if somebody sells me
marijuana, you know, whatever. You know what I
mean?

And well, I'd like to just end by
saying that in 1992, I saw the Rodney King police
beating on television. And without me missing a
beat, like, I immediately said out loud, that's
nothing compared to what the Syracuse police did
to me.

The reason the Syracuse police got
away with their brutal heinous crimes was because
I had a tiny amount of marijuana on me. And my
lawyer said, you know, no Court or Judge, or
anything is going to believe some kid that smokes
marijuana over Police Officers.

And so that's why the police got away
with it. And because of that event that happened
in the late 70s, I'm still collecting Social
Security Disability for my PTSD. And I really
don't want anybody to tell me that I can't smoke
marijuana.

Because I have, I've been, you know,
I've been through all the other medications that,
you know. And I have several bottles of pills here. You know, I mean, just crazy stuff, Remeron, Propenol, just all these pills.

And, like, this one is from 2003. So, I knew, I've always known that marijuana was the only thing that ever helped my PTSD, but I didn't know what PTSD was. And I was never able to put two and two together.

But I can now. I can now. And I'm telling you, big pharmaceutical pills like this are very bad and very dangerous. And the only good thing out there is marijuana, and it should be legal.

There should be no police involved at all. You know, that's another thing. I remember talking to Chief Peter Newsham. And he was saying that when the police smell marijuana that means that there's some other kind of criminal activity going on.

And that gives the police an excuse to pounce. You know, like, if you smell marijuana in an alley that means that there's some other criminal activity going on, like, they might be negotiating prostitution or something.

And so you know, this kind of
attitude, this kind of stuff has got to stop.

So, well, I think I've been taken up a lot of
your time. And I don't hear anybody, you know,
asking me any questions. But if you got any
questions for me, I'd be glad to answer.

CHAIRPERSON ANDERSON: All right.

Thank you very much for your testimony,
Mr. Salsgiver.

MR. SALSGIVER: Anything for me from
the Board?

CHAIRPERSON ANDERSON: I'm going to
let everyone testified first, sir. And when, if
we have time, I would open the forum up for
people to ask and answer questions. So let me go
through the other folks who need to testify.
Then we'll have an opportunity for that. Thank
you.

MR. SALSGIVER: That's great, thank
you.

CHAIRPERSON ANDERSON: Thank you. All
right, sir. We now have former Council Member
Yvette Alexander. You have, I give everyone five
minutes.

And I'll go, I'll be happy, I have had
some leeway. But I know, Ms. Alexander, when you
were the Council Member, I know what, you know what it means. So you have five minutes. Thank you. Go ahead.

MS. ALEXANDER: Thank you, all.

Greetings to you, Chairman Anderson and the ABC Board Members. I'm Yvette Alexander with Y Alexander and Associates and I'm representing the position of the District of Columbia Cannabis Trade Association.

Linda Mercado Green is the Board Chairperson. The DCCTA was formed to advocate for improved access for patients in our city's Medical Cannabis Program.

And they've actually been in inception since this year. It was originally they started the D.C. Medical cannabis Trade Association, which is, which was in existence from 2013 to 2021.

The DCCTA would like to provide their recommendations for the Emergency and Proposed Rulemaking Amendments of Subtitle C of Chapter, of Title 22 of the DCMR.

We strongly feel that emphasis on civil fines and penalties, in addition to criminal penalties should focus on illegal
cannabis operations.

I think some mentioned it, previously, what the outcomes can be. You don't know what products you're getting. Sanctions must be established for property owners, allowing these illegal activities to take place on their properties. Liens on their property should be considered, as well.

The Board's decision on the appeals process should remain with the Office of Administrative Hearings, referring cases to the Court of Appeals will be a longer and more costly process.

The association agrees with the locations allowing qualifying patients to administer their medical marijuana and dispensaries should be included among these locations provided if they have the designated space and the desire to give patients that option.

We support repealing the requirement for mandatory training program for recommending authorized practitioners. And the revision of the composition of the Advisory Committee should include: at least one member from a D.C. licensed
cannabis, medical cannabis dispensary; at least one member from a D.C. licensed medical cannabis cultivation center; and at least one member from a D.C. licensed medical cannabis testing lab.

Updating the selection review process and criteria should address all areas of social equity, not just one particular aspect or group. Since there is extensive work to be done in this area, the conversation should commence and this should move forward before adult recreational use starts.

To ensure fairness, for now, a point system should be used rather than a set-aside system for selection, giving point preference for predetermined criteria such as CBE, District residents, returning citizens, etc.

The temporary registration for employment at dispensary's cultivation centers and testing labs currently being considered through the duration of the COVID-19 pandemic should be made permanent.

This will allow businesses to hire without delay, waiting for the completion of background checks, which have been proven to be very time consuming. Dispensaries should be
allowed to offer educational classes and
demonstrations on site.

    And in addition to the maximum of buy
vehicles allowed for delivery, there should be an
option of using their employees or third party
delivery service.

    The association is in full support of
the plant count elimination to address adequate
supply and producing a variety of strains and
edibles.

    Updating the age and entry
requirements, we do support medical patients 18
years and older should be allowed to enter
dispensaries. Also, a parent who is present with
the child should be able to bring them in at the
discretion of the dispensary owner.

    The association requests that before
any regulations are finalized, they're able to
offer additional input and approval and look
forward to serving in an advisory capacity and
developing future regulations.

    In closing the DCCTA looks forward to
the renaming of ABRA to the Alcohol Beverage
Cannabis Regulatory Administration to reflect its
new role in the cannabis regulation.
And requests to have at least one non-voting member in the legal cannabis industry to serve on the Board. And that said, I'd be glad to answer any questions that you may have.

CHAIRPERSON ANDERSON: Thank you, Council Member Alexander. I'll just ask that you formally submit your testimony in writing to the Agency. Our agency would appreciate receiving your testimony. All right. Thank you.

Are there any other? I don't have a witness list. I don't have any other witnesses who have informed the Board that they're willing to testify. If there's anyone else online who would, who are willing to testify, can you please, excuse me --

Can you please identify yourself in the chat and I will have your rights elevated allowing you to testify. So if there's anyone else out there, please announce yourself in the chat.

And we'll have your rights elevated. I'll give you about maybe about another minute to see if we have anyone who wants to who wants to testify.

MR. SALSGIVER: I would just like to
say something.

CHAIRPERSON ANDERSON: I'm sorry. Can you -- hold on, hold on one minute, Mr. Salsgiver. Hold on. I just want to make sure that we don't have anyone else who wishes to testify. And I said I'd give you one minute.

It doesn't not appear to me that anyone has identified themselves. Yes, sir? What is it that you have to say? Please, again, identify yourself for the record.

MR. SALSGIVER: Oh, hi. This is Adrian Salsgiver, again. And I would just like to say that I think that alcohol is a very vicious, dangerous drug. And does not belong in the same category with marijuana, which is a very kind and good medicine.

CHAIRPERSON ANDERSON: Thank you, sir. Do, does any Board members have any questions for any of the witnesses? And they want to ask any questions?

MEMBER CROCKETT: This is Ms. Crockett, I do.

CHAIRPERSON ANDERSON: Yes, go ahead, Ms. Crockett.

MEMBER CROCKETT: Ms. Lee-Carty, are
you still on the line?

MS. LEE-CARTY: Yes, I am.

MEMBER CROCKETT: How are you today?

MS. LEE-CARTY: I'm better. How are you?

MEMBER CROCKETT: I'm great. I'm sorry that Zoey is feeling defeated and didn't want to testify today. I've seen your bright, dynamic daughter advocating for herself and advocating for medical cannabis patients. And I was hoping that the my fellow Board Members would have that honor, as well.

But I do, definitely understand, you know, her stance. And I'm so sorry about that. I just want to be clear that you are, there are two things that you really, really want from us. One is testing for PBOs and banning of PBOs. Am I correct?

MS. LEE-CARTY: Yes.

MEMBER CROCKETT: And the second is the ability to provide home growth for your minor child or any other minors who are also medical patients?

MS. LEE-CARTY: Correct. I feel simply because there is a very low lack of
testing with supposedly being 68 contaminants that should be tested in the cannabis plant in order for it to be deemed medical.

And we're lacking with barely no testing due to regulatory issues. It's only safe, that you know, a parent like myself who is very critical on what her daughter puts in her body medicates effectively with clean medicine.

And this should expand not only for Zoey, but for any patient or any consumer due to the fact of the horrible backlash that she's gone through and others may experience. I'm addressing this issue because it, it's really a very critical issue that can affect people in ways that you would not believe.

Zoey is a bright light. My daughter, like, I'm constantly trying to reassure her that it will be okay. But she doesn't have hope at this moment. She doesn't like that she's taking pills after not taking pharmaceuticals for five years.

She doesn't like the fact that she tested positive for ecstasy. She doesn't like that it fell on the hands of the dispensary, the cultivator, the processor.
I don't like that. Like, we advocated and educated patients for years on how to medicate for what illnesses and also promoted product safety and making sure that you're not just buying from the corner store or from the guy on the street.

But when you walk into a dispensary and ingest a bottle of CBD oil that is contaminated with a pipernonyl butoxide that should never even be there. And then, a child's totally life changes, it raises concern for how this cannabis climate should go moving for it.

And like I said, I'm just thankful because 100 days ago, 200 days ago, 300 days ago, I was a broken mother. I mean, my child would take showers and seize in the shower. We had to pad up her room because she was dropping in seizures.

So she's on all these pharmaceuticals. Nothing's helping. But the only thing that had helped was cannabis. And then, it was in the middle of a pandemic.

So we didn't have the access of having drivers pull up and drop off her medication. I'm now researching pharmaceuticals and getting those
and they're still not working.

Or calling 911 and having to make the decision of whether I'm going to allow Zoey to go back to the hospital because she had a grand mal, and be exposed to COVID. Or just let them stabilize her here and keep her home.

So these 443 days have by far been the roughest days as a mother, challenging to keep, that was challenged to keep her child alive. Dealing with COVID, angry that there was no accountability with anybody in the government office.

And you know, then I just dove myself into science. I dove myself into research of these contaminants. And it's not just PBO. But I'm just asking for one contaminant at a time.

I think that if we create a framework of one contaminant at a time -- we already know the knowledge of PBO. I can give you all the information. You can cross research my information.

Then we can go on to the other 68 contaminates, as time goes along, which will ensure public safety, which will ensure clean medicine for patients to ingest.
Because this is supposed to be the alternative to pharmaceuticals. No one has died from cannabis, no one. But my daughter almost lost her life. And it's been hard to Speak Life. This is what we do for seven, six years is Speak Life.

And for this past year, it's been hard to Speak Life. It's been hard to, you know, consult. And I haven't consulted with anyone because I don't know where they're getting their product from.

It's a dispensary, but has it been tested? Has it been tested for contaminants, you know? And so, I have to now mute my voice. And this is something that I saw my child again.

I saw her lights, her eyes light up. I saw a child that thrived. I saw a child that was so happy she would speak with you and tell you how pretty you are.

And, you know, advise you, and educate you on cannabis. And now, I have a child that doesn't even want to stand before a camera and testify, something that she's so comfortably able to do.

She doesn't want to do it. And I
don't want to force her because she's already had enough. But I wish she was here to speak her voice. I know she does say that she doesn't like taking pharmaceuticals. She wish it never happened to us. Why did they do it to her?

And it's been questions that I've been challenged as a mother to ask because I'm asking myself the same thing. How did this happen? How do we have a program and we don't have testing? How do we have a program and we don't have regulations, you know?

So I propose, 443 days later, to ban PBO, one contaminant at a time and to allow patients to grow their own medicine since they have to sign the LLC in order to submerge into a Medical Cannabis Program.

I'm able to grow basil. I'm able to grow thyme. I'm able to grow tomatoes. I don't know any other Agency that is requiring someone to sign a limited liability and assuming no responsibility for what you ingest, except for this program.

So if we have these regulations or these, this structure that you have in place, allow the patient and the consumer, some kind of
safety net if they choose to grow their own medicine.

MEMBER CROCKETT: Thank you so much.

CHAIRPERSON ANDERSON: All right.

Thank you, Ms. Crockett. Ms. Carty, thank you very much for your presentation. As you are aware, the Board is actively soliciting proposals for a testing lab in the city.

And I know that you had expressed the Board granting ability for patients to provide for caregivers to grow and dispense medication to, in your case, your minor child. And unfortunately, at this juncture, it is not a regulatory change.

It's the law needs to be changed to allow that to occur. So that is something that the law would have to be changed to allow a caregiver, such as yourself, to provide medication to your minor daughter.

And so that's something that has to be pursued through the City Council. And it's not a fix our, we, ourselves can do. It has to, the law has to be changed. So --

MS. LEE-CARTY: What can we do as a group? As a team as you're introducing -- your
the replacement of DOH. What can we do together to ensure? Because the only thing this is a positive thing. I'm not asking for the outlandish.

I'm just asking for quality assurance, product safety. That's all that I'm asking for as a parent and as an advocate. So to just throw it off and say it's a law. That's once again, like that, LLC, not wanting to assume.

This is about change. Like, I know that the science and the research, we're behind that. And we've advanced into licensing. But let's go back to quality assurance. So what can we do? Or what can I do? Or what can I do to help you? Or what can we do together to ensure quality and assurance?

CHAIRPERSON ANDERSON: But remember that I stated, as I've stated that we are actively soliciting a test lab. Because there's, unfortunately, there are no current, currently any testing labs in D.C.

And so, we are in the process of soliciting testing test labs for D.C. So we're hoping that we will be successful in this go around
MS. LEE-CARTY: Well, I guess I'll be reaching out to you after this, maybe off grid, to talk more about that. Because that is something of interest.

I believe in integrity for the plant. I've always promoted it. And if that is what it takes, I would like to talk off screen about that with your Board, perhaps.

CHAIRPERSON ANDERSON: All right. Well, if that's possible. You can always reach out to our General Counsel. And you can always reach out to a General Counsel and information can be shared that way. Well, thank you for that.

MS. LEE-CARTY: Thank you, thank you.

CHAIRPERSON ANDERSON: All right. Any other comments, questions by any other Board members, to anyone? Or any other comments or questions about any of the presenters to the witnesses today? None?

I thought that, you know, I always look forward to public hearings and thinking that we'll have 100 witnesses who wants to testify. But I'm glad to hear that it appears that most of the participants are pleased with the ABC Board.
That our --

Since we've been regulating this industry that it appears that the public is happy with the tenure that the Board has taken. And the Board does look forward to continue working with the industry.

To ensure that this is, this program works, and that it works for the residents of the city of the District of Columbia. Do you have a comment you want to make Council Member Alexander?

MS. ALEXANDER: Yes, I had a question. I was wondering with regards to the Medical Cannabis Emergency Act for the cultivation center, the two, the two cultivation, one dispensary and one, two testing facilities.

I know that LOIs were extended for a month. Are you able to answer that, at this time, why that was an extension made for those LOIs.

CHAIRPERSON ANDERSON: I believe the extension was made based on some changes were made. And it was based on the date that the Mayor had signed off on the changes.

The City Council had, I believe, it
was because of the enactment of the law. And so, to, because I think some changes were made regarding social equity participants, I believe.

And I think because, I think, there were some changes made regarding people who had certain criminal convictions, and with a previous law, they couldn't have apply.

And so, we had made some changes, making it, allowing those folks to apply. And so, based on the enactment of the new law, it was, it's my understanding, that's why the date was extended.

To allow those applicants who were not eligible to apply, given them an opportunity so they can apply. But that was the, that was the extension.

And it's my understanding that we have had some robust, that there, there, actually, there are interests for both the dispensaries, both the cultivation centers, and both the testing lab.

And so, I'm, I am hoping that the, once we go through the process, that the dispensary for either Ward 1 or Ward 5 will be -- well, I'm sorry, Ward 1 or Ward 3, will be
issued. And that the two cultivation center licenses will be issued.

And I'm hoping that we will finally have a dispensary in D.C. I'm hoping, I'm positive that it will happen this time because we cannot have an industry where there is not an independent testing lab in D.C. So I'm hoping that, finally, we will find that in D.C. once we go through the process.

MS. ALEXANDER: Thank you.

CHAIRPERSON ANDERSON: You're welcome.

All right. Any other questions before I bring this hearing to a close? Any other questions or comments by anyone prior to bring closure to this matter? Yes, sir?

MR. SALSGIVER: Yes, I would like to add that at some people who smoke cannabis, medically, you know, have not been to a doctor and not been to a psychiatrist or anything. They just know that smoking marijuana eases their PTSD.

And for the people to have to go and talk about it with a doctor and government, and all this stuff, just to be able to get medical cannabis is, it brings up the trauma, again.
It's just like taking a beating all over again.

What we need is to allow people to use cannabis and not have to go through all these loops and all this over regulation. And you know, I read, I skimed through the 85-page document.

And I'm warning you that you know you can over regulate cannabis into oblivion. And what we're really, you really need to look at less, you know, less regulation and more availability.

CHAIRPERSON ANDERSON: All right. Thank you, very much, Mr. Salsgiver for that presentation today. All right. Thank you. Any further comments by anyone before bringing this matter to closure?


CHAIRPERSON ANDERSON: Yes?

MS. LEE-CARTY: I have one more comment.

CHAIRPERSON ANDERSON: Go ahead.

MS. LEE-CARTY: I believe that it's considered medical cannabis, then when you're using the word medicine, it should not have any additives, or any microbials, or any arsenic.

So the name medical cannabis
dispensary should either be removed, especially if the assumption and we don't have these lab testing sites in place yet.

I literally in March of 2020 had to call the FDA. Had my biochemist and I wrote an adverse effect report to the FDA, simply because the bottle that my daughter ingested, I was concerned that that whole batch might have been contaminated.

Zoey is an epileptic. So she's going to react differently than average human. Anyone with a neurological disorder will react as Zoey did simply because the additive PBO acts as an antagonist to the CB1 and CB2 receptors.

The other person that medicates with it might get a nice, slow buzz because it just got that little extra something in it that keep you coming back for more. So we literally had to call, to write and submit a Form 3500 to the FDA to show that there was an adverse effect.

Because even though Tacoma Wellness, the place where we purchased the CBD from, and the product being Jackson's Courage, was contacted by Child Protective Services to tell, to let them know that a child ingested something
that had ecstasy in it. They continued to carry
the product on the shelf.

And it was me being a mother, an
activist, and a person that cares about the other
patients that maybe another, someone else could
have consumed that particular batch and had an
adverse effect.

So for you to say that we can't have
this program without testing, it's so sad that
this whole cannabis legalization happened in 2014
and we're here in 2021, talking about testing.

Like, with medicine being in front of
cannabis. Nothing with medicine should be
tainted with a contaminant. That's just common
sense. And it's FDA language. And it should
apply. And the sense of urgency should be swift
and rapid.

And I've heard talks of mobile lab
trucks driving around, and picking up product,
and testing it. However, I just wanted to
educate you on that.

Having a mobile lab and having that
equipment on the van and amount potholes that we
have in Washington D.C., along with just wearing
tear will totally throw off the mercury in those
machines that's testing for contaminants.

So having a still building, it will be
more assurance that the testing accuracy is
correct. The mislabeling of the products of
cannabis is also a big issue in this medical
cannabis realm.

Because Zoey's bottle that I purchased
read 26 percent CBD. But when I went and got it
third party tested it read 13 percent CBD. And
then, when I requested it from Holistic, it read
66 percent.

So look at the mislabeling. Like,
this is a big bag of everything and we're calling
it medical cannabis. Once again, regardless of
the laws -- and I hear that we have to go act
according to the law.

Where do we draw the line with public
safety, public consumption, when we talking about
medical cannabis? Had it just been recreational,
I mean -- but we have people that need cannabis
to live.

So we have to draw a line somewhere
and create our own framework. And I will not
stop until we, as a city, understand that this
could have happened to you, sir.
You could have been urine tested and tested positive for ecstasy. And you're CBD for your arthritis. Like, this is how severe that this is. And it needs to be corrected on the medical aspect of it.

CHAIRPERSON ANDERSON: Thank you, again, Ms. Carty. As I stated, the law has always required that we have independent testing labs in D.C.. However, we have not had it. And as everyone has stated, ABRA has been regulating this industry since October of 2020.

And we are working to ensure that we have an independent testing lab, not a mobile lab, but an actual building in D.C. that can test the product. And that's what we're waiting for.

Because it's independent, we have to hope that there is some entity out there who will be qualified to come to D.C. to test the product. And because as, you know, the product cannot be legally transmitted across State lines. So for the testing to occur, the lab has to be in D.C. for it to occur.

And so, we are working on doing that. And I hear your concerns and your voice. And this Board will do whatever it can do to ensure
that this is a safe industry for all the medical clients who depend on the products, on the medical products that are produced by the cultivation centers and sold by the dispensaries.

But we are working towards establishing the requirements that, at least, we can offer the general public some semblance that the product, the medical products that are being ingested, that they are properly labeled and properly identified.

And free of certain, I'm not I'm not going to say all, but -- because I'm not sure what the testing requirements are, what substances need to be tested for. But at least you will be assured that there are specific substances that are being tested to know what is it that that the clientele are ingesting.

So again, I thank you for making us aware of what you have experienced over the past several years in D.C. Thank you. All right. Yes, Ms. Alexander, you anything, you have something that you want to say?

MS. ALEXANDER: Yes. And I promise this is the last couple of things I have to say.

CHAIRPERSON ANDERSON: That's fine.
MS. ALEXANDER: But I just wanted to express, I know that it's in the testimony, as well. It is so important, as Mr. Adrian Salsgiver mentioned. He got something at Dupont Circle. It's so important for ABRA to really crack down on these illegal businesses.

They need to be sanctioned. They're running rampant. We're compiling a list of these illegal operations. And we want to share them with you. I wanted to put on record the association is having a meeting with Chief Conti on May the 19th.

And we would love to have you attend that meeting if you are free. Because I think that ABRA and the Metropolitan Police Department definitely have to work together. We are all for the safety of residents in the District of Columbia.

And you know, they're only, their limited, licensed operations where people need to go. And they, you know, it's so rampant that a lot of residents are thinking that all of these locations are legally licensed cannabis locations, medical cannabis locations, and they most certainly are not.
So I just wanted to make that point, that you will receive a copy of the testimony. And also, just had a quick question about the medical cards. I know, the Mayor has lifted the emergency that everyone has to be up to date with regards to their medical cannabis card July 1.

However, I see a concern with that because I see a influx of just a flood of people waiting until the last minute, myself included, July 1, that that may be a lot of stress on the Department to have all of these people renewing at one time.

And the request would be consideration for their cards to go through the at least the end of this year. Because we see that there's just going to be a flood of July 1st. Thousands of people renewing their cards for that day.

And I don't, you know, I don't want to overburden the Agency. And I don't want people who have cards to be, you know, waiting for their card. And you know, things not happening in an expedient manner.

So it would really make, I guess, more sense efficiently to have cards extended through the end of this year. And it would create like a
rolling re-enrollment, so to speak. It wouldn't just have thousands going for that July 1 date.

CHAIRPERSON ANDERSON: Thank you for bringing that to the attention of the Board, Ms. Alexander. The Board has discussed it. And the Board will alert the dispensaries of whatever proposal that we think is appropriate to address the issue.

I do appreciate the fact that it could be overwhelming that July 1. That there are, 9,000 are the universe of people who, so -- but the Board is aware of that and the Board will proactively address that issue. So thank you for bringing that forward.

MS. ALEXANDER: They project it as 7,500 will be removed on July 1, so.

CHAIRPERSON ANDERSON: Thank you, very much. The Board, we are aware and we anticipate human nature. And so, we will provide some guidance to the industry of whatever it is that we are, we're proposing for July 1.

But we do hope that we're now in April and that people do come and renew their cards. And that the dispensaries alert folks when they come, to let them know that their cards have
expired and that they should work towards
renewing them and not necessarily wait till July
1.

But we are, we're, the Board has
anticipated that that would be problematic. And
we're, we will issue some guidance to the
dispensaries of what the --

MS. ALEXANDER: Because it's human
nature. And also, there's a cost assessed too.
So people still have to consider, you know,
getting their coins together for that, you know,
for that renewal, as well. So that's another
thing to consider.

And I don't know if you have any pull
with the DMV, but could you do something about my
driver's license too? I'd appreciate it. I have
a lot of tickets.

(Laughter)

CHAIRPERSON ANDERSON: Remember, I
think when it comes to pull, I believe that you
would have a little bit more than I do. Thank
you. All right.

MS. ALEXANDER: Thank you, all. I
appreciate all of you. Pretty short, always.
Nice seeing you, as well.
CHAIRPERSON ANDERSON: Thank you. It is my understanding that there is, sorry. That there is a Michael Bobo who would like to speak. And Mr. Bobo can you -- if you want, are you planning, do you want to testify or are you just making a comment, sir? Can you please identify yourself on the record?

MR. BOBO: Okay, this is Michael Bobo, owner of the National Holistic Healing Center.

CHAIRPERSON ANDERSON: Yes, sir.

MR. BOBO: And your --

CHAIRPERSON ANDERSON: I'm sorry, are you trying to testify or are you trying to make comment? Which one is it?

MR. BOBO: This really, merely a comment. And actually, Yvette actually covered my comments. So it was related to the medical cards and the extension dates regarding those.

CHAIRPERSON ANDERSON: All right, thank you. Thank you, Mr. Bobo. I will, as I stated before the Agency is aware that this could be problematic. And so, the Agency will issue some direction to the dispensaries as should be, what our process is.

However, I do alert and remind you
that once you -- all, all your clients who
currently come in, to please remind them that
their cards have expired and that they should
immediately go to our, to renew them, sir.

MR. BOBO: That we are doing. And you
know, I know all of the dispensaries in D.C. are
working towards that same very single period.

CHAIRPERSON ANDERSON: Thank you. But
we will, we are aware after July, we are aware of
human nature. And so, we are aware of the July 1
date. And we will try to come up with, we will
issue some guidance, whatever requires. Do you
have something to say Mr. Salsgiver?

MR. SALSGIVER: Yes, I would like to
-- I want everybody, to tell everybody that you
don't get a card. You people keep saying card,
card, card. You do not get a card. You get a
stupid privilege letter.

CHAIRPERSON ANDERSON: But I'm not
sure, sir. But it's my understanding that ABRA
will be issuing cards. So I'm not quite -- I'm
not, I, I don't know what it is. But based on my
conversation with the Director is that, it's a
card that will be issued. I'm not aware off of
privilege letter.
MR. SALSGIVER: I'm telling you.

CHAIRPERSON ANDERSON: Sir, I don't know.

MR. SALSGIVER: You don't a card. You get a privilege letter.

MEMBER CROCKETT: Mr. Salsgiver, that was an interim process while the program was transferred from the Department of Health to ABRA. Now, the ABRA is issuing cards. We do, in fact, have cards.

MR. SALSGIVER: Oh, good.

MEMBER CROCKETT: They have ABRA on them and you will be receiving a card, not a privilege letter. That was just an interim measure, sir.

MR. SALSGIVER: Okay, well, thank you.

CHAIRPERSON ANDERSON: Thank you for that clarification, Ms. Crockett.

MR. BOBO: One final, final, final point regarding to that. Is there any, has there been any --

CHAIRPERSON ANDERSON: Mr. Bobo, I'm sorry. Because this is being transcribed, so you have to identify yourself each time you speak, sir.
MR. BOBO: No problem, Michael Bobo, owner of National Holistic Healing Center. My final, final question/comment was, has there been any movement on --

The Mayor initiated, maybe a year or two ago, said the cards would be valid for approximately two years. And then, has there been any movement regarding that two year deadline for cards?

CHAIRPERSON ANDERSON: We have not made -- the Board has been in discussion regarding whether or not we should issue a two year card. And so, we are in discussions and a decision will be made in due course whether or not a two year card will be issued.

But the Board is aware and the Board has been, has discussed it. And at the appropriate time, a decision will be will be made whether or not we're going to have a two year card.

MR. BOBO: Okay. Thank you.

CHAIRPERSON ANDERSON: Thank you. I appreciate that you're keeping the, the industry has kept the Board on its toes, the Board and the Agency on its toes. But I'm proud to say that
the Agency under the direction of Mr. Moosally
has anticipated many of the questions.

   And so, the Board is able to respond,
in due course, to the concerns that you have.
And I assure you that we are aware and we're
trying to address those issues proactively. So
there'll be no surprises.

   You'll know in due course. Industry
will know in due course what the position is of
the Agency, and the City, and the Mayor. Okay,
thank you. Any other questions or concerns
before bring this matter to closure?

   All right, well, hearing none. The
Board, again, thanks all those were taken the
time to testify at today's hearing. Please know
that this is not your last opportunity to share
your thoughts with the Board.

   Written comments can be submitted to
the Board by emailing abra.legal@dc.gov to the
attention of our General Counsel, Ms. Martha
Jenkins.

   And you have, the record will remain
open until 4:00 p.m. on May 7th, 2021. So 4:00
p.m. on May 7th, 2021, you'll have an opportunity
to submit written comments regarding your
position on the Emergency and Proposed
Rulemaking.

So again, I want to thank everyone for
their participation today. The Board appreciates
your input and we will ensure that your comments
are taken in consideration once these rules are
finalized.

Thank you very much for your attention
and presentations today. All right. Okay. So
I'm going to thank you. I'm now going to bring
our session and our day to an end.

As Chairperson of the Alcoholic
Beverage Control Board for the District of
Columbia, in accordance with Title 3, Chapter
405, Office of Open Government, I move that ABC
Board call a closed to the meeting on April 29th,
2021.

For the purpose of discussing and
hearing reports concerning ongoing or planned
investigations of alleged criminal or civil
misconduct or violations of law or regulations
and seeking legal advice from our legal counsel
and the Board's investigative agenda, legal
agenda, and licensing agenda for April 29th,
2021, as published in the D.C. Register on April
23rd, 2021. Is here a second?

MEMBER SHORT: Mr. Short, I second.

CHAIRPERSON ANDERSON: Mr. Short has seconded the motion. I will take a roll call vote on the motion that was properly seconded by Mr. Short.

(Roll call)

CHAIRPERSON ANDERSON: Mr. Short?

MEMBER SHORT: Mr. Short, I agree.

CHAIRPERSON ANDERSON: Mr. Cato?

MEMBER CATO: Bobby Cato, I agree.

CHAIRPERSON ANDERSON: Ms. Crockett?

MEMBER CROCKETT: Rafi Crockett, I agree.

CHAIRPERSON ANDERSON: Ms. Hansen?

MEMBER HANSEN: Jeni Hansen, I agree.

CHAIRPERSON ANDERSON: Mr. Grandis?

MEMBER GRANDIS: Edward Grandis, I agree.

CHAIRPERSON ANDERSON: And Mr. Anderson, I, agree. As it appears that the motion has passed, I hereby give notice that the ABC Board will hold this aforementioned closed meeting.

Pursuant to the Open Meetings Act
notice will also be posted on the ABC Board
hearing room bulletin board, placed on the
electronic calendar, ABRA's website, and
published in the D.C. Register in as timely a
manner as practical.

We are now adjourned for the day. I
want to thank the public. I want to thank the
Board for their participation today.

I now ask that the Board return to
Executive Session for further discussions. Have
a great day and thank you very much. All right.

Bye bye.

(Whereupon, the above-entitled matter
went off the record at 2:52 p.m.)
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This is to certify that the foregoing transcript

In the matter of: Medical Marijuana
Proposed Rulemaking

Before: DCABRA

Date: 04-28-21

Place: teleconference

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[Signature]

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