## DISTRICT OF COLUMBIA

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ALCOHOLIC BEVERAGE AND CANNABIS BOARD

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IN THE MATTER OF: :

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MEDICAL CANNABIS : Public Hearing

AMENDMENT ACT : RULEMAKING :

Wednesday June 7, 2023

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

## PRESENT:

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

## ALSO PRESENT:

YVETTE ALEXANDER, Y. Alexander & Associates LORENZO BELLAMY, Generational Equity Movement BARBARA BIDDLE, District Hemp Botanicals JEN BRUNENKANT, Herbal Alternatives HANNAH CLARKE, Executive Director, The i-71 Committee DAREL DAWSON, President, The i-71 Committee CHUCK ELKINS, ANC 3D01 MAX EWART, ANC 1A01 CHAD FREY, flowerz CHANDER JAYARAMAN, ANC 6B06 MEREDITH KINNER, Attorney, Kinner & McGowan MATT LAWSON-BAKER, Alternative Solutions

MACKENZIE MANNS, Generational Equity Movement
JOHN McGOWAN, Attorney, Kinner & McGowan
DAVID MOORE
JOSE ORELLANA, DC ABCA Staff
NORBERT PICKETT, DC Holistic Wellness
JEFF RUECKGAUER, ANC 2B02
ROBIN WALKER SALAS, Wounded Warriors Behind Bars
STEVEN SLAUGHTER, Vice President, The i-71
Committee
CHRISTOPHER SMOOT, The i-71 Committee
TERRENCE WHITE, Chairman, The i-71 Committee

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## P-R-O-C-E-E-D-I-N-G-S

11:06 a.m.

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CHAIRPERSON ANDERSON: All right. The next case in our calendar, we have a public hearing on the Medical Cannabis Amendment Act. Good morning, everyone. Thank you for joining us today at the public hearing on the Alcohol Beverage and Cannabis Board medical cannabis emergency and proposed rules.

As you know, the Board assumed jurisdiction of the District's medical cannabis program on October 1st, 2020. Since that time, new laws and regulations have been adopted and sweeping changes have been made to the program in an effort -- in a brief period of ABCA's management. Excuse me. The Board is holding a hearing today on a second round of emergency and proposed rules.

This rulemaking was adopted by the Board specifically to implement the Medical Cannabis Amendment Act, MCCA of 2022, which became effective March 22nd, 2023. Amongst other changes, the MCAA legislation allows qualifying patients to self-certify to participate in the program, provides the mechanism for unlicensed

cannabis business to obtain a medical cannabis facility license, creates new license categories and endorsements, creates various benefits for qualified social equity applicants and medical cannabis certified business enterprises, reforms the license application process, and allows advisory neighborhood commissions to protest the issuance of cultivation center, manufacturer, retailer, and internet retailer licenses.

The rulemaking also makes various technical changes and renumbers the regulations where appropriate. The Board's adoption of these rules ensures that a District's program continues to operate optimally for qualifying patients and caregivers who depend on the program for their medical needs. These emergency and proposed rules are also being issued to ensure the economic viability of existing medical cannabis businesses and to ensure that an adequate and safe supply of medical cannabis remains available for qualifying patients.

Lastly, the Board's adoption of the merging the rules meets our paramount goal of promoting the health, safety, and welfare of District residents. By way of background, the

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emergency and proposed rulemaking was adopted by the Board on April 12, 2023 by a vote of five to one and became effective immediately on that date. The emergency rules will expire 120 days from the date of adoption or on April -- I'm sorry, or on August 10th, 2023.

Thank you to everyone who is present today to share your thoughts with the Board. We received two pre-file sets of testimony and numerous email comments. In reviewing the email comments, it is clear that many of you, if not all of you, are concerned about the provision regarding the limitation of eight ounces of cannabis concentrated permitted per month for patients 21 years of age or older.

I want to ensure the industry and medical cannabis patients and caregivers that the Board is well aware of this issue and that we will be revising this issue on our revision of the regulations. I'd like to lay a few ground rules before we begin the hearing. The Board received over 35 requests from individuals who expressed an interest in testifying today.

For the sake of ABCA staff, IT, the court reporter, and you, the witnesses, we need

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to ensure that this hearing is orderly so that parties are promptly identified and the testimony is properly recorded. To that end, please know that witness testimony is limited to five minutes per person. If there's any time left at the end of the day or the hearing, we may permit additional limited comments.

When I recognize you to speak and after IT has elevated your speaking privileges, please clearly speak your name and the company or entity you represent. If you're testifying on your own behalf or as a consumer, simply state that. I ask everyone for their patience and for their indulgence.

This is the largest virtual hearing the Board has held. We want to ensure fairness and opportunity for everyone. All right. There will be a five-minute timer that is visible to everyone.

Once you begin to testify, you'll have the timer. You will see your time, and I'm asking that everyone comply with the time limits. Everyone will have an opportunity to testify today.

I've also asked our IT in person to

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post in the chat the witness list. So these are the folks that have informed us previously that they will testify. I will be calling the witnesses in this order.

If your name is not on the list, at the end of the hearing once we are done, please identify yourself and I will allow you to testify. What I'm also going to do is I'm going to call probably panels of three to four individuals per time to testify. So I'll probably call all the ANCs together.

And if at least on the list if you are identified from the same organization, I will ask that you all testify -- I will ask our IT specialist to elevate your rights so you will be all identified. But I will have -- what I will do, I'm going to ask the IT specialist to each time elevate four individuals -- a maximum of four individuals unless you are -- unless there's more than four individuals in a specific group to testify. So we'll have a group of four or more persons on the screen each time identified to testify.

If you have any questions, please put them in the chat and we will start. So let me

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find our list that's next in the chat. So you'll have an idea when it is that I will be elevating your rights. So hold on. Get to my list so I can start calling the first panel.

So the first panel that I'm going to ask the IT specialist, Mr. Orellana, to elevate, Mr. Orellana, can you please elevate Chuck Elkins, ANC Commissioner 3D, Mr. Max Ewart, ANC Commissioner 1A, Mr. Zachary Adams, ANC Commissioner 2B, Mr. Jeffrey Rueckgauer, ANC Commissioner -- and I apologize if I butchered your name -- ANC Commission 2B, and Mr. Chander Jayaraman, ANC Commissioner 6B. Can you please elevate those individuals to testify, please?

CHAIRPERSON ANDERSON: All right. So

I do not see Max Ewart.

all right. So I'll ask everyone to turn their camera on. And you should see -- you'll also see

MR. ORELLANA:

an on-screen timer for five minutes.

And I will -- so I'm going to call -good morning, everyone. So what I'll ask
everyone to do is to identify themself for the
record. So let's start with Mr. Chuck Elkins.
Can you -- who is Mr. Elkins? Can you please
just identify yourself for the record? And I'll

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start the timer if I can figure out how to do
that. Once you identify yourself, I'll start the
timer.

MP. FLKINS: Thank you Mr. Chairman

MR. ELKINS: Thank you, Mr. Chairman.

I'm Chuck Elkins, ANC Commissioner for 3D01.

CHAIRPERSON ANDERSON: All right.

Good morning, sir. Go ahead, sir.

MR. ELKINS: Well, thank you, Mr. Chairman. In my written testimony to you, members of the Board, I make five recommendations. But we'll focus on the first three in this oral testimony.

But I do hope the Board will read my complete testimony and justification for these recommendations. As you know, serving as an ANC Commissioner is a voluntary job. So each of us have other lives.

In my case, it happens that for 25
years I worked at the Federal Environmental
Protection Agency where I served for several
years as the senior manager of the Nationwide Air
Pollution Program. And therefore, you should not
be surprised that I am focused on smoke today.
That is exposure to secondhand cannabis smoke
from the Safe Use Treatment Facilities, SUTFs,

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and the summer gardens. While I'm not an expert in the capture and treatment of the products of combustion cannabis, it is my professional opinion that the proposed regulations provisions for SUTFs and summer gardens as now written could prove to be a disaster for both applicants and ABCA.

The problem with the current draft is this. The counsel was careful in its cannabis amendment to strike a balance between the needs of the cannabis users and the needs of those who might be exposed to second-hand smoke from cannabis combustion at the SUTFs. Recently, a Supreme Court -- a Superior Court judge in the District struck the same balance between users and the public as you may have read in the Washington Post this morning.

Specifically, the council directed as you know that the licensee must collect the polluted air, run it through a control device, and ensure that he has eliminated all detectable odor, smoke, and byproducts of combustion so as to prevent any and all public nuisances. The current draft regulation, however, does not reflect this directive. In order for a licensed

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applicant to be sure he is not creating an SUTF that turns out to be a nuisance, he must become familiar with the construction of airtight rooms, the necessary level of air exchanges in order to capture the smoke, air pollution equipment that will in fact successfully treat the smoke, and the proper discharge of the treated air which may still smell despite the best control equipment in order to keep it out of nearby businesses and residences.

In fact, not only does the license applicant need to understand these technical matters but so does, I believe, the ABCA Board and staff. Of course, one could argue that the Board should leave it up to the private sector, the license applicant in this case, to figure this all out, letting the Board simply enforce the nuisance provisions. However, preventing problems in the first place is almost always easier and cheaper than trying to fix them after the fact.

If the Board determines that an SUTF is creating a nuisance, the Board will need to shut it down. But at a potential loss of thousands of dollars and investment by the

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licensee and perhaps in the case of a smaller licensee drive them into bankruptcy. This drastic action may occasionally be necessary, but it would be so much better to prevent the problems from the start by having the Board, the staff, and the potential licensees gain an understanding of exactly what is required in order to be able to create an SUTF that will not be a nuisance in the first place.

The proposed regulation provides no such guidance and asks for so little information about the construction and the equipment that the Board -- about the construction and equipment that the Board and the public will not be in any sort of position to head off disasters in the making. The Board and the staff need to be told by the applicant in detail what he plans to do. And then the Board needs to know enough to tell the applicant whether or not what he proposes to do is likely or unlikely to be successful in aborting the creation of the prohibited nuisance.

So my recommendations are as follows. Delay the SUTF and the summer garden portions of the regulation and hold a separate set of hearings to focus on the technical aspects of

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running a nuisance free SUTF and summer garden and then finalize these provisions separately. Recommendation No. 2 is once those regulations revised are in place, initially approve only a very few SUTFs and summer gardens until the Board, the staff, the applicants, neighbors, and ANCs learn through experience how these provisions can be effectively and fairly enforced and remedied if they are determined to be out of compliance.

I envision lots of problems with having to use an inspector's nose to detect violations. And just to finish my last one very quickly, Mr. Chairman, suggesting you be very judicious in choosing where these summer gardens are located. Thank you.

CHAIRPERSON ANDERSON: Thank you, sir, for your testimony. And we have received your written testimony. And I have reviewed them, and we will take them into consideration. Thank you for appearing this morning. Thank you, sir. All right. Mr. Zach Adams, state your name. Go ahead, sir.

MR. ADAMS: Good morning. My name is

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1	CHAIRPERSON ANDERSON: Mr. Adams, I
2	can't hear you.
3	MR. ADAMS: M-S. I am ANC
4	CHAIRPERSON ANDERSON: Go ahead, sir.
5	MR. ADAMS: You cannot hear me?
6	CHAIRPERSON ANDERSON: Go ahead, sir.
7	I can hear you. Go ahead.
8	MR. ADAMS: Oh, okay. You can hear
9	me? Okay.
10	CHAIRPERSON ANDERSON: All right.
11	Hold on. All right. So
12	(Simultaneous speaking.)
13	CHAIRPERSON ANDERSON: Okay.
14	MR. ADAMS: Circle and the west end
15	of U Street can you
16	CHAIRPERSON ANDERSON: Let's start
17	over again because I'm having
18	(Simultaneous speaking.)
19	CHAIRPERSON ANDERSON: So let's start
20	again. Go ahead, sir.
21	(Simultaneous speaking.)
22	CHAIRPERSON ANDERSON: All right. All
23	right. Mr. Adams, are you in the same location?
24	Is there anyone else in that area with you who's
25	online? All right. I'll give you another

opportunity, sir, to testify. Go ahead, Mr. Adams.

MR. ADAMS: Can you hear me?

CHAIRPERSON ANDERSON: There's a delay. There's a delay. So I hear you, like, 20 seconds or 5 seconds after you speak. What I'll ask you to do, Mr. Adams, why don't you log out and log back in. Let me move on to the next person and then I will come back and call you.

Okay. So let me call Mr. Jeffrey Rueckgauer.

MR. RUECKGAUER: Thank you. It's

Jeffrey Rueckgauer. I'm the Commissioner for

2B02. And also my testimony today is based on

conversations and other experiences with the ANC.

But it does not reflect an official ANC 2B

position.

The cannabis regulation that's being considered has considerable improvement in expansion of the existing regs and it's become largely consistent with the existing alcoholic beverage regulation. There are a number of issues that bear further examination and clarification so as to not create confusion or greater burden upon our volunteer Commissioners. I begin with Section 5200.1 and .2, the distance

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requirements.

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This section specifies that a cannabis business other than courier cannot be sited within 300 feet of schools, rec centers, except the main entrances of commercial or industrial sites. Retailers cannot be located within 400 feet of another. The regs don't specify who performs this measuring.

I presume it would be ABCA, and I recommend it be ABCA to determine that as part of the application intake process and decline it so it does not become something the ANC Commissioners have to deal with. In the alcohol regs, Section 25-314 uses 400 feet from schools except for restaurants and hotels or another establishment at the time of the application. It would be helpful to either make these uniform or clarify why the distance of only 300 is suitable for cannabis versus 400 feet for alcohol.

And 5421.5, the appropriateness criteria for an applicant as defined, these essentially are the same as the liquor establishments. It includes residential parking and vehicular and pedestrian safety, including the availability of parking near the

establishment. In the alcohol context, this refers to impacts on parking by employees and customers.

With respect to road delivery and courier businesses which would be allowed in mixed use zones, this could create a particularly disrupted conditions without a mandatory traffic control plan required. There was a GoPuff list on delivery service on 22nd Street between my apartment building and another building. Their drivers constantly block the alley, frequently preventing residents from getting in or out, blocking trash trucks and moving bins.

There was also frequent double parking on 22nd Street which caused congestion, unintended noise from horns being blown. I recommend a requirement that if a cannabis business that will rely upon or generate traffic in a mixed use zone or adjacent to a residential zone must provide a DDOT approved traffic control plan to mitigate conflicts or congestion. Seeing that this is a new program that needs to build experience with the many different situations and experiences for owners, neighborhoods, and ANCs that license renewals be on a two-year rather

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than three-year cycle for at least the first two renewal cycles.

This will be provide a better framework for debugging the process and addressing problems that may arise much sooner. 5417.1 specifies 50 percent of all new cultivation, manufacturing, internet, retailers (audio interference) be set aside for social equity. It's laudable to build equity into the system.

However, this should be refined so that 50 percent requirement does not prevent all establishments opening if there aren't enough of the missing operator supply. It also does not specify if the equity ratio is aggregate citywide or is at a quadrant or coordinate. 5425 needs better explanation, possible revision.

For alcohol applications, the notices go to ANCs within 600 feet of where the establishment is or will be located and any registered citizen associations. For cannabis, it's all the ANCs in the ward who are noticed and allowed to weigh in, reject, and know citizen associations. The rationale for this in the corresponding potential for more than one ANC

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entering into a settlement agreement with a business must be clarified.

Citizens associations frankly will be outraged to being excluded as parties to the renewal process is something clearly of concern to them. While it may prove expeditious to consolidate all public comment through ANCs, there are situations where a citizens group held a dissenting view from their ANC. It's important that all residents' views are considered as parties with standing when deciding whether to approve a business.

It also must be explained why all ANCs in the ward are soliciting. I urge this to be made the same as for alcohol licensing. The primacy of the ANC where a business is located must not be subjected to contradiction or dilution by other ANCs. Businesses having Safe Use Treatment Facility and/or summer garden should be required -- I'm sorry -- should be required to have someone who has certification for emergency medical aid present at all times and open for public use.

They would be able to provide immediate aid such as CPR, using a defibrillator

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in an emergency until EMS arrives. As you're all aware, the smell of smoked marijuana has become pervasive everywhere, even around buildings where smoking tobacco or cannabis is prohibited.

Borrowing a paradigm from bars well established may religiously follow the law, they have zero control over customers once they exit the premises nor does ABCA have any enforcement authority. There's nothing stopping someone from opening a container and lighting up in the street as police are unlikely to intervene.

(Simultaneous speaking.)

MR. RUECKGAUER: -- recommend including a requirement that a no smoking zone within 25 feet of property is authorized by D.C. code and that ANCs include this in their settlement agreements.

CHAIRPERSON ANDERSON: All right.

(Simultaneous speaking.)

CHAIRPERSON ANDERSON: All right.

Thank you. Everyone, you can submit your written comments to ABAC.LEGAL@DC.GOV. You still have an opportunity to send your written comments to the agency at ABCA.LEGAL@DC.GOV.

Mr. Jayaraman, you can go. And I'll

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get back to you, Mr. Adams. So all right. Thank you, Mr. Rueckgauer. Mr. Jayaraman, you go ahead, please. Please spell and state your name.

MR. JAYARAMAN: Thank you for the opportunity to testify on this important timely topic this morning. My name is Chander Jayaraman, and I'm here as an ANC Commissioner for 6B06 and not on behalf of ANC 6B. I currently serve as ANC 6B's alcohol beverage committee and I have held the same position for six of the past eight years.

I'm here today to propose some common sense recommendations to the proposed rules that will reduce the adverse impact on public health, protect our children, and maintain peace, order, and quiet in our communities. First, let me start with the enormous amount dry cannabis purchased by right for personal use each and every month. Eight ounces, that's half a pound.

For Board members who don't know what eight ounces or half a pound of dry cannabis looks like, let me show you. This is a two gallon bag filled with eight ounces of dried law grass. It's 14 inches tall, 12 inches wide, and 2 inches thick.

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In my research, I found that you can make about 450 joints with eight ounces of grass which if smoked in a month would be the equivalent to smoking five and a half packs of marijuana cigarettes a week or 15 a day.

According to the American Lung Association, smoke from marijuana combustion is shown to contain many of the same toxins and carcinogens as tobacco smoke which we all know can damage the respiratory system. Allowing the sale of eight ounces of dry cannabis per month coupled with the right to self-certify would be reckless and contribute to increased lung cancer among a list of other adverse health effects.

ABCA has been given the charge the control the responsible use of cannabis. I encourage ABCA to strike a balance between responsible cannabis use and medical need. This can be achieved by lowering the maximum amount a person can buy each month to four ounces but allow for the purchase of additional amounts with a prescription from a doctor.

My second point is regarding the availability of a summer garden endorsement for cannabis retailers. In my view, this is

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premature and fraught with problems. In ANC 6B, approximately 70 to 80 percent of businesses on commercial blocks are adjacent to a residential property, usually the rear of the premises.

Likewise, many of the spaces that can be used as a summer garden are also located at the rear of the property. This sets up a no win situation for both retailers and residents because a puff garden would be right next to the people's backyards. Specifically Section 5626.4 only prohibits odor from being detectable on the interior of the dwelling with the windows closed but does not protect the right of residential property owners and families to peaceably enjoy their backyards and not have to worry about their children breathing secondhand cannabis smoke.

Just this morning, Washington Post reported on a ruling that neighbors can't allow their marijuana smoke to affect others with a judge stating that, quote, the public interest is best served by eliminating the smoking nuisance and the toxins as it deposits into the air, toxins that involuntary smokers have no choice but to inhale, unquote. I would recommend that ABCA delay implementation of the summer garden

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endorsement for cannabis at the present time.

Alternatively, I would recommend that ABCA

prohibit the issuance of a summer garden

endorsement for cannabis where the summer garden

is located adjacent to one or more residential

properties, even if these properties are

separated by a narrow alley.

Third, I would like to respectfully request that the renewal year for cannabis retailers not fall on the same year as renewals for restaurants and tavern licenses. As chair of managing the renewal process for ANC 6B through two cycles with over 50 restaurants and tavern licenses. And all this creates a tremendous amount of work for Commissioners and I suspect for ABCA staff and ABCA board members as well.

Adding the renewal of cannabis establishments to the same renewal schedule as restaurants and taverns is, in my opinion, self-inflicted insanity. Finally, the application process as described by ABCA is unfair and may result in a chaotic scramble for retailer applicants. At a recent training on the proposed rulemaking, ABCA announced that applications for retailer cannabis license would open on November

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1st and licensees would be approved on a first come, first served basis.

This Hunger Games approach would disenfranchise longer operating cannabis businesses and result in applicants completing for line placement by camping outside of the Reeves Center on October 31st in order to get ahead of other retailers within 400 feet of their store. ABCA should consider implementing a more organized approach that supports retailers who have been operating quietly in an area for multiple years. By giving longtime retailers with the first opportunity to become licenses would be a more equitable approach and less destructive to current customers.

In a worst case scenario, a wellestablished retailer will see their business
shuttered and their investment lost because of
their place in line. On a related note, the
regulations state that 50 percent of all retail
licenses would be issued to equity applications.
Put another way, the number of total retailer
licenses would be capped at twice the number of
equity licenses and then increased on a one-toone basis.

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So for 100 equity applicants that are approved, then the maximum number of total license would be capped at 200 and then only increase when another equity application is approved. I ask a rhetorical question of whether this is what the law and applicant intended. Surely applicant did not intend for unlicensed retailers to continue operating with the threat of being shut down until additional equity licenses enter the market.

(Simultaneous speaking.)

MR. JAYARAMAN: Again, I would like thank you for the ABCA Board for holding this public hearing, and I would be pleased to answer any questions you may have.

CHAIRPERSON ANDERSON: All right.

Thank you, sir. Mr. Adams, let me see where -
MR. ADAMS: Yes, can you hear me all?

CHAIRPERSON ANDERSON: Yes, I can hear

you, sir. Go ahead.

MR. ADAMS: Great. Thank you for your patience here. Good morning, everyone. I'm Zach Adams, Z-A-C-H A-D-A-M-S, ANC for 2B08. And much like Commissioner Rueckgauer, I am here on behalf of myself and my SMD, not on behalf of ANC 2B.

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I cover a chunk of North Dupont Circle and the west end of U Street. I'd like to thank ABCA for taking the time to have this meeting and hear stakeholders including ANCs and for thoughtfully engaging in this cannabis license rulemaking process. I'm making three short asks here.

I ask for further harmonization of cannabis licensure requirements, in particular the distance requirements between cannabis locations and schools and between each other. These licensure requirements -- they cause legislative burden on ANCs who need to keep them all straight when negotiating settlement agreements and informing their constituents. I ask for there to be an established submission period for applications so that it's not first past the post and that the speed at which applications are submitted does not give an advantage to any application looking for a license.

I think this will only result in frustration as businesses are subject to the whims of the online portal or mail service. For those of you who participated in the vaccination

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lottery in D.C. or have participated in any sneaker drop, you my empathize with this. And someone participating may give up trying to submit or feel like the system is unfair if this is not met.

I also lastly ask that criminal background checks are eliminated fully from applications, not just for the social equity applications as I believe that they are inconsistent with the social equity lens of the new licensing process. That's it for me. Thank you all very much and I'm here for questions.

CHAIRPERSON ANDERSON: All right.

Thank you, sir. Any questions by any board

members of the three -- I'm sorry, of any of the

persons who testified? Any questions by any

Board members?

I don't have any questions at this moment. But I will advise -- remind all parties to please send us a copy of their written testimony to ABCA.LEGAL@DC.GOV. And the comment period will remain open until -- you have a 30-day period. You have a 30-day period to continue.

Yeah, I don't have any questions for

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any of the parties. Just because since I was not

-- the Board wasn't privy to your questions that

we couldn't formulate any questions to ask. But

I know someone talked about the location and

who's going to do the measurement.

ABCA will provide the measurement to all the parties. So the same for alcohol, we're the one who will provide the measurement with the distance. So that's something that is taken care of.

And I know Mr. Jayaraman, you talked about the eight ounces. I think so far you're in the minority because we have gotten many, many submissions by patients and others regarding the eight-ounce limitations. So the Board will be look at that.

But your visual at least for me made sense because I've never seen eight ounces myself. But thank you for the visual. All right. So I want to thank you for your presentation today. And you're welcome to submit your written comments to ABCA.LEGAL.DC.GOV.

Thank you very much. All right.

So let me call the second panel. All right. Thank you. So the second panel that I'm

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1	going to call now is that I'm going to call
2	I'm asking Mr. Orellana to please elevate Hannah
3	Clarke, Meredith Kinner, John McGowan, those
4	three people I'm asking that they be elevated,
5	please.
6	MR. ORELLANA: One second.
7	CHAIRPERSON ANDERSON: Thank you.
8	MR. ORELLANA: Apologies, Chairman.
9	Can you repeat that list one more time?
10	CHAIRPERSON ANDERSON: The last person
11	would be I'm sorry John McGowen. The
12	Meredith Kinner and John McGowen from the Kinner
13	and McGowen Group. And Hannah Clarke from the i-
14	71 Committee.
15	MR. ORELLANA: For some reason, I
16	can't elevate Hannah Clarke.
17	CHAIRPERSON ANDERSON: Hannah Clarke.
18	MR. ORELLANA: One second. There we
19	go.
20	CHAIRPERSON ANDERSON: All right.
21	Thank you. All right, everyone. So let's start
22	with Hannah Clarke. I would like everyone to
23	turn their camera on if they have that ability.
24	All right. Good morning, everyone.
25	So let's start with you, Ms. Clarke. So can you

1 please identify yourself for the record? 2 have five minutes, please. I can't hear you, 3 ma'am. 4 MS. CLARKE: Hi, can you hear me now? 5 CHAIRPERSON ANDERSON: Yes, ma'am, 6 yes. 7 MS. CLARKE: I'm Hannah Clarke. 8 the executive director for the i-71 Committee. 9 Do you need me to spell my name? 10 CHAIRPERSON ANDERSON: Yes, ma'am, 11 please. 12 MS. CLARKE: Yes, sir. H-A-N-N-A-H C-13 L-A-R-K-E. Thank you for the attention today. 14 I'm going to head into my testimony. 15 I want to give first thanks to the 16 ABCA Board staff and other attendees of today's public hearing. I'm the executive director of 17 18 the i-71 Committee. The i-71 Committee is a 19 coalition of citizens, industry leaders, and 20 stakeholders who recommend passing equitable, 21 fair, and socially conscious cannabis 2.2 legislation. 23 We prioritize safe and equitable access for all. We are excited for the future of 2.4 25 the cannabis industry in D.C. to join the

pioneers in a regulated market. We're a diverse industry reflective of the fabric of this great city, employing people of color, women, veterans, disabled, and LGBTQ identifying people.

The i-71 Committee has 24 due paying members who employee D.C. residents, pay D.C. taxes, host and support charitable events, and make contributions to local nonprofit organizations. While ensuring that the members of our committee operate with the highest standards and provide safe and quality cannabis products, the i-71 Committee is working to ensure D.C. like every jurisdiction has the ability to make its own decisions around cannabis access and regulation without interference from U.S. The i-71 Committee is thankful to the ABCA Board, its staff, the D.C. Council, and the mayor for their collective efforts to create a more equitable and high functioning cannabis industry.

We believe that the proposed regulations are a massive step in the right direction. However, we do share some concerns. Firstly, it is evident that there are not enough supply and cultivation in Washington D.C. support

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to meet the demand that accounts for the total market value.

The current infrastructure lacks the capacity with the demand for cannabis products.

We have been in communication with licensed medical operators who agree and echo the same concern. The shortage poses a challenge for both existing and potential retailers as they would struggle to source sufficient cannabis to satisfy consumer needs.

By postpone recent licenses, we can allow for cultivation operations to expand and fulfill the market demand adequately. This ensures the consistent and sustainable supply chain for retailers leading to a healthier overall market. The second is business regulatory environment would be crucial for the success and longevity of the cannabis market in Washington, D.C.

To foster an environment that encourages entrepreneurship, innovation, and investment, regulations must strike a balance between compliance and flexibility. It is the committee's opinion that this legislative body should postpone retail licenses so policy makers

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can reassess, refine existing regulations to ensure they are conducive to business growth and market development. By postponing retail licenses, policy markets can carefully evaluate the equity landscape and implement measures to support and empower existing operators which may include targeted programs, resources, partnerships aimed at providing technical assistance, access to capital and other support services necessary for their success.

Prioritizing equity not only fosters social justice but also enriches the diversity and inclusivity of the cannabis market. In conclusion, I urge this committee to support the postponement of cannabis retail licenses in Washington, D.C. By doing so, we can address the current supply and cultivation of locations, foster business friendly regulatory environment, prioritize equity and social equity for existing operators, and develop regulations based on unique market indicators.

Delaying licensure for retail businesses allows for a more comprehensive evaluation of the market dynamics and consumer preferences. The cannabis industry is rapidly

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1 evolving and is essential to gather the data and insights from existing retail establishments 2 before introducing players into the market. 3 observing and analyzing the performance of 4 5 current retail businesses, we can better understand the demand patterns, market 6 7 saturation, and potential areas for growth. approach enables policy makers to make informed 8 9 decisions, objective decisions that foster a 10 healthy and competitive marketplace. Thank you. 11 CHAIRPERSON ANDERSON: Thank you, Ms. 12 Clarke. 13 MS. CLARKE: Of course. 14 CHAIRPERSON ANDERSON: Ms. Kinner, can 15 you identify yourself for the record, please? 16 MS. KINNER: Yes, thank you. 17 Meredith Kinner. I am an attorney at Kinner and 18 McGowan. And actually my colleague, John 19 McGowan, is going to be speaking on behalf of our 20 firm. 21 CHAIRPERSON ANDERSON: All right, 2.2 Go ahead, Mr. McGowan. Can you please 23 identify yourself for the record, please? It's John McGowan. 2.4 MR. McGOWAN: an attorney in D.C. with Kinner & McGowan. 25 May I

begin testimony?

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CHAIRPERSON ANDERSON: Sure, go ahead, sir. And I'll give you some more time since I had both of you separately. So go ahead.

MR. McGOWAN: Thank you so much.

Yeah, thank you for the opportunity to testify
today on the Medial Cannabis Emergency and
Proposed Rulemaking. We're submitting this
comment on behalf of our clients and other
industry stakeholders that plan to apply for
medical cannabis license with ABCA throughout the
year in 2023.

Our law firm, Kinner & McGowan, was established in the District in 2015 with a primary practice area focused on cannabis law. Since inception, we have witnessed, like, the evolution of the gray market firsthand, from popup shops to brick and mortars and e-commerce delivery companies. In our eight years of practice, we've had the opportunity to counsel with a significant number of unlicensed operators, i.e., i-71 operators and also other ancillary stakeholders in the District's gray market.

We believe this experience gives us a

unique perspective on this issue and insight on how ABCA can amend the proposed rules to make D.C.'s medical cannabis market practically more inclusive. We do commend ABCA for envisioning an expanded program that promotes social equity and provides some kind of mechanism for eligible unregulated operators to actually become licensees in the District. However, as currently drafted, the proposed rules will significantly limit the number of social equity applicants that will actually be able to apply and qualify and fails to provide an actual pathway to licensure for the majority of otherwise qualified unlicensed operators that will be applying.

Now we do recognize that the ABC
Board's authority is regulatory, not statutory,
and that amending the D.C. code provisions are in
the purview of the council. However, ABCA is
ultimately responsible for the administration of
the program and does have the authority to amend
the proposed rules to account for certain
problems created by the statutory language. The
following comments are intended to propose a
variety of ways ABCA could amend the proposed
rules to make the regulated cannabis market more

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inclusive for all applicants, including unlicensed operator applicants.

First, the criteria for determining an applicant's social equity status as far too narrow and should be expanded to be more inclusive. Social equity status is key to becoming licensed this year because social equity licenses are definitively uncapped. As such, the criteria for social equity should be expanded to include more prongs and encompass more social equity applicants.

The definition of social equity as proposed in the rules represents a drastic departure from social equity measures that have been implemented in other jurisdictions. The goal of an effective social equity program in the context of cannabis, medical cannabis, must be inclusion, must create opportunities for individuals impacted by the criminalization of cannabis to enter the legal cannabis market as beneficial owners. More broadly, social equity programs are intended to create pathways for economically disadvantaged communities to benefit from legalized cannabis through employment quotas for all licensees and community reinvestment

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initiatives.

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These dual social equity goals are accomplished by focusing the criteria both on applicant ownership as well as applicant employees and contractors. Second, if applicant does not expand the social equity criteria, they should amend the criteria to allow applicants to satisfy one prong instead of two in order to qualify for social equity status. The proposed rules require an applicant to satisfy two or more of the social equity criteria proposed.

Amending the rule to require an applicant to satisfy only one or more of the criteria would increase the number of applicants that would be able to actually qualify for social equity status. A one-prong approach also would in term have a trickle-down effect across the entire spectrum of application in all subsequent open application periods. Specifically, it would affect nonsocial equity applicants because the number of nonsocial equity licenses that ABCA can award including unlicensed operators is contingent on the number of social equity licenses that have already been awarded.

It stands to reason that if an

applicant can satisfy one of the three prongs for social equity, they should reasonably satisfy any social equity applicant standard that the council envisioned. Further, the one-prong approach will not diminish the council's intention of promoting a fair and equitable program. Third, the 50 percent social equity set-aside should not be applied to unlicensed operators in the November 1st, 2023 open application period.

The proposed rules apply the set-aside to all licensees. However, this should not be applied to the unlicensed operators or the rules should be amended to apply the social equity set-asides specifically to applicants that apply in the 2024 nonsocial equity application period. By limiting the 50 percent social equity set-aside to future applicants only, ABCA could satisfy the statutory requirement for the set-aside while still offering an uncapped number of licenses to qualifying unlicensed operators as it has been suggesting throughout its guidance.

The extremely restrictive criteria for social equity coupled with the 50 percent setaside will practically speaking when this all plays out prevent the majority of unlicensed

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operators from transitioning to the medical cannabis market. Denying these operators that otherwise meet the statutory qualifications for a license will have ramifications frankly on the viability of the program based on supply and demand issues and undermine the council's goal of transitioning good faith business owners from the gray to the regulated market. Another issue with this is there is no way to determine the number of licenses that will be set-aside or available for unlicensed operator applicants during the November 1st period until after the application period has passed.

This is because ABCA is not offering social equity retail licenses until 2024. But it's offering retail licenses for unlicensed operators in 2023. This disconnects and create a situation where applicants for unlicensed operators licenses that otherwise meet all the statutory regulatory requirements for licensure will be left waiting for an indefinite time period for ABCA to determine if it can license nonsocial equity applicants during the actual period.

Many applicants while they're waiting

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will likely be incurring significant expenses such as paying rent for commercial property and also the 8,000-dollar non-refundable application fee while waiting for ABCA to determine the set-aside limits on licenses. This could also by capping the number of unlicensed operators by applying the set-aside to them could also lead to unintended consequences for the program. This means effectively that the unlicensed operators' licenses will be capped.

And this critical fact conflicts with multiple representations made by ABCA that licenses are uncapped for unlicensed operators.

ABCA has provided guidance for unlicensed operators or suggests that applications submitted during the application period will be reviewed on a rolling basis. However, practically speaking as I just mentioned, there will be no way as the proposed rule suggests as now for ABCA to process applications on a rolling basis while also having to wait until the next until the next application process to determine what the license cap is.

It may just be, like, we accept your application. Now you're in a holding pattern until we figure out what the numbers are until

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next year. The practical implications of ABCA inviting qualified unlicensed operators to transition to the regulated market only to deny the majority of these operators the opportunity to enter the market are significant and will disrupt several small business centers in the District. This was not what the council intended.

There's a popular perception we have heard among unlicensed operators that the council's effort to license and regulate the gray market is really a de facto Venus flytrap, right? It's designed to lure them in to the regulatory ambit only to deny them and eviscerate their livelihood and the real opportunity to become licensed, or worse, not actually having a license for them to actually obtain. This perception is not unfounded.

ABCA has repeatedly represented that similar to liquor licenses, licenses for unlicensed operators will be noncompetitive and uncapped. But the notion of an uncapped number of licenses also ostensibly eliminates the significant financial risk associated with a glut of applications applying for a very limited

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number of licenses. Finally, the 50 percent social equity set aside is also problematic because it does not account for a scenario where there are no social equity applicants that apply in one or more categories.

For instance, there's currently an application timeline going on right -- time period now. If there are no social equity applicants that apply the current social equity application window from May 1st to June 29th, 2023, there will be no new cultivator manufacturer licenses available for the general public making the open licensing application period for nonsocial equity manufacturer and cultivation licenses that going to be available to the public in August effectively moot because there will be zero available.

CHAIRPERSON ANDERSON: Mr. McGowan, thank you very much for your testimony today, sir. I remind you that you have until June 21st to submit comments -- your written comments to ABCA.LEGAL@DC.GOV. All right.

MR. McGOWAN: Thank you for your time.

CHAIRPERSON ANDERSON: Thank you. Any questions by any Board members of any of the

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witnesses who testified this morning?

MEMBER GRANDIS: Mr. Chairman?

CHAIRPERSON ANDERSON: Yes, Mr.

Grandis. Go ahead.

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MEMBER GRANDIS: Thank you. Mr.

McGowan, thank you for taking time out of your

work schedule to provide testimony and written

testimony today. We appreciate the guidance that

the public can give us, so thank you for that.

In reading your testimony, I may be confused. And that's easy because this is a subject that we all are learning and working on thing. But is it the law firm's perspective that one of the ways to be considered a social equity applicant is that they've had a conviction? And if they did not have a conviction, they would not be eligible under the program we're trying to establish?

MS. KINNER: I can actually speak to that if that would be okay, Mr. Grandis. So the regulatory -- the proposed rules say that to qualify for the second prong of the social equity criteria, so that's the qualifying family member prong, that family member has to have been incarcerated due to a conviction. And we

1 corresponded with ABCA's general counsel about 2 this. 3 And they confirmed that, yes, in fact, 4 that qualifying family member, they have to have 5 been incarcerated due to a conviction. It cannot be because they were in jail overnight. 6 7 cannot be because they were in jail leading up to 8 trial which was eventually dismissed. It has to be due to a conviction. Does that answer your 9 10 question? 11 MEMBER GRANDIS: Yeah. Ms. Kinner, am 12 I saying your name close enough? Ms. Kinner, is 13 that correct? 14 MS. KINNER: I'm sorry. I can't hear 15 you. Ms. Kinner? 16 MEMBER GRANDIS: 17 MS. KINNER: Oh, I'm sorry. 18 couldn't hear you. Can you say that again? 19 MEMBER GRANDIS: Can you hear me now? 20 MS. KINNER: Yes, I can. My fault. 21 I'm very sorry. That's cool. 2.2 MEMBER GRANDIS: So your last name is Kinner. I hope I'm pronouncing it 23 2.4 somewhat --25 MS. KINNER: Kinner.

MEMBER GRANDIS: -- correct.

MS. KINNER: Kinner, yes, Meredith

Kinner.

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MEMBER GRANDIS: Okay. Thank you for your perspective. We will look into that to the understanding you have to make sure that what is intended to be in the statutory and regulatory provisions accurately match what the law that was adopted says. So thank you for pointing that out. Let me ask either one of you. Have you counseled your clients who I think you say would fall in the current i-71 provision that after that provision sunsets that they could no longer be for sale or gifting cannabis?

MS. KINNER: Oh, yes.

MEMBER GRANDIS: And your firm is supportive of that requirement?

MS. KINNER: Yes. I mean, I think if there is a good faith attempt and there is a good faith -- more than attempt. If there is a good faith effort as John stated in our comment to actually allow -- this is an opportunity to envision that I think if they're given a fair opportunity, they need to comply with the law once that safe harbor provision sunsets. We've

counseled our clients to that effect.

MEMBER GRANDIS: But this is what the government is trying to do is handle a privilege, not a right --

MS. KINNER: Of course.

MEMBER GRANDIS: -- correct?

MS. KINNER: No, of course. It's if they otherwise meet statutory qualifications and if the social equity set-aside that's preventing them from becoming licensed, that is what we think could create a problem. I mean, we're referring to -- when I'm speaking of people who can go through that and become licensed, I'm speaking of otherwise qualified i-71 applicants.

MEMBER GRANDIS: So Ms. Kinner, so this is theoretical. So it's possible that there may be a disagreement. And if I could use that concept between what the government is trying to do which is to regulate and not have the Wild West, there could be a situation where you all would advise your clients to go back to counsel to extend.

And this hypothetical because quite frankly, it has been a concern with our legal market and how to make sure our legal market is

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1	successful. So just know that we appreciate the
2	fact that you are counseling your clients, that
3	there is a sunset on this at this time. Ms.
4	Clarke? Hello, Ms. Clarke? Can you hear me?
5	MS. CLARKE: Yes, hello.
6	MEMBER GRANDIS: Are you a resident of
7	D.C.?
8	MS. CLARKE: As of 2023, I am in
9	Arlington County. For the last three years, I
10	have been in Ward 2.
11	MEMBER GRANDIS: And I think you
12	mentioned in your testimony something about
13	taxes. I think you said that if I understood
14	that you are an executive director of an entity
15	called the i-71 Committee.
16	MS. CLARKE: Yes.
17	MEMBER GRANDIS: So has taxes been
18	determined? How do you determine taxes?
19	MS. CLARKE: Business taxes
20	MEMBER GRANDIS: I'm sorry?
21	MS. CLARKE: There are sales tax,
22	business tax, payroll tax. A lot of these i-71
23	businesses who are trying to be as compliant as
24	possible to prepare themselves into this
25	regulated market, they have documentation, like,

Certificate of Clean Hands or Certificate of Good Standing. So they don't owe the District more than 100 dollars. They --

MEMBER GRANDIS: But the taxes, what is it based on? My understanding that a number of these retailers are gifting and not selling.

MS. CLARKE: So part of the gifting process is to have tangible goods and services. So those technically are what sales tax is being applied to.

MEMBER GRANDIS: Okay. Thank you.

And do you know as part of being a member of this

171 committee that's a retailer, do they test
their products that they are gifting or selling?

MS. CLARKE: There are avenues in which specific retailers have the ability to test. But the District does not have protocol for these stores at the moment, although we are continuing working to create some sort of collaboration between future licensed businesses and opening new testing facilities.

MEMBER GRANDIS: And are your members prepared to shut down if they do not qualify for a license under the current provisions for each social equity of the other licensing

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opportunities within this 300 and so many days?

Are they prepared to stop gifting or selling cannabis products?

MS. CLARKE: The understanding of the committee is that once they either are approved for a conditional license or approved for a retailer in a retailer cultivation manufacture license, there's a period of time where they will have to shutter operations on top of that. They also understand that there is a sunset period within that safety harbor.

MEMBER GRANDIS: And your committee understands that once they are licensed that they have to purchase the cannabis products from our cultivating centers?

MS. CLARKE: Yes, they are. And actually, one of our largest focuses is on providing support for the current cultivation facilities in the District, either expanding their current operating processes or focusing primarily on adding new cultivation licenses, new manufacturing licenses which will bring more supply to the i-71 demand that they've been shouldering for the last eight, ten years.

MEMBER GRANDIS: Ms. Clarke, I want to

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thank you and I want to thank the law firm for the time of answering my concerns. I want to thank you all very much.

(Simultaneous speaking.)

CHAIRPERSON ANDERSON: Thank you. All right. Thank you very much. I thank everyone for their participation this morning. And just want to remind you that you can send your written testimony to ABCA.LEGAL@DC.GOV. You have until June 21st to send comments for this hearing, or you can -- once regulations are published, you have 30 days after to do that. But thank you very much for your presentation this morning.

So let me call the next set of witnesses. So I'm calling -- so Mr. Orellana, can you please elevate Antione Pritchett, Sr., Antione Pritchett, II, Rabbi James Kahn, Rabbi Jeffrey Kahn, Stephanie Kahn, and Joshua Kahn. Can you please elevate them?

MR. ORELLANA: Apologies, Chairman. Was the last person Donald Temple?

CHAIRPERSON ANDERSON: No, no. I'm not calling him into this panel. Joshua Kahn is the last person. So everyone from Takoma
Wellness and from Renee and Andria Health, yes.

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1	MR. ORELLANA: Okay. They should be
2	elevated.
3	MR. PRITCHETT, II: There should be
4	another Antione Pritchett, Sr. that should've
5	been elevated. I'm the second.
6	CHAIRPERSON ANDERSON: Right. Yes, I
7	did call Antione Pritchett, Sr. and Antione
8	Pritchett, II.
9	MR. PRITCHETT, II: Thank you, Mr.
10	Chairman.
11	CHAIRPERSON ANDERSON: So do we have
12	everyone here now? All right. So let me state -
13	- sorry. Good morning, everyone. So let me
14	start with Mr. Antione Pritchett, Sr.
15	Good morning, sir. Good to see you
16	again. So can you please start by spelling and
17	stating your name? Not I'm going with I'm
18	sorry. Let me see.
19	I'm going down the list. I'm going to
20	go withoh, I'm going with Mr. Pritchett, Sr.
21	All right. So I guess that's a person who's
22	about to speak. Good morning.
23	MR. PRITCHETT, SR.: Good morning,
24	sir.
25	CHAIRPERSON ANDERSON: Mr. Pritchett,

Sr. can start.

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MR. PRITCHETT, SR.: Good morning, sir. How are you?

CHAIRPERSON ANDERSON: I'm well, thanks. Go ahead. You have five minutes.

MR. PRITCHETT, SR.: Thank you. Good morning to the wonderful members of the Board and my fellow stakeholders this morning willing to listen to a person who had a little experience in the regulated market. My name is Antione Pritchett, Sr. and I hope to one day soon be able to help my son and his business partners, launch Renee and Andria Health in D.C. as the COO.

I will not bore you with credentials but simply say I've been there, done that, and got the t-shirt, in D.C. and Maryland. What I would like to speak about are parts of the legislation as it currently exists and some things that are not in there but could be. Most importantly, I want to talk about how the legislators, the regulators, and the operators can work together to make the D.C. cannabis market the bellwether for the country.

Teamwork makes the dream work. When it comes to a regulated market like cannabis,

that cannot be any truer. The market is comprised of legislators, regulators, and operators.

So much of what makes a market successful is the cooperation amongst all the oars in the ships that has regulated cannabis. It was originally tossed around that there would be an advisory board that would include industry experts, industry operators, regulators, and legislators. I would like to recommend -- we put a panel together to talk about what makes sense and what doesn't make sense with operator input.

For instance, if a batch fails testing which is covered by Section 6600, then there are no methods of recourse or remediation. No one is perfect including testing labs and cultivators. So there should be a method of retest remediation.

By not including language that allows for retest remediation, you might be dooming smaller growers who don't have the volume of flowers to withstand the loss of an entire harvest. Considering that cannabis businesses as they stand right now do not have bankruptcy protection, this could spell the end for a

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smaller grower like a social equity applicant.

Allowing for retest and remediation through processing would enable a cultivator to at the very least recoup some of the expenses of growing that harvest.

Since adulterated was specifically spelled out in the legislation, how it can be retested and remediated needs to be spelled out as well or simply remove the words unfit for use and then spell out acceptable remediation methods. The specifics of how and why this is something that an advisory panel would tackle. A social equity advisory board would work with current social equity applicants to figure out what their hurdles are so that with each iteration or amendment to the program, it gets even stronger.

And an advisory panel would help to drive this. This will give legislators and regulators an opportunity to hear the points of pain when standing a cannabis business up from a social equity perspective, of course, the most crucial of which being raising capital. Unlike other businesses that have access to traditional lending sources, most cannabis businesses are

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launched by trading equity for capital.

Unfortunately, there's nothing in the bill that makes sure to take this issue to account when helping social equity applicants to be successful and still lawful. As the program moves forward, this needs to be addressed. And my hope is that there will be some emergency legislation to account for capitalization and how it can be accomplished in the current legal framework for cannabis business, mainly an amendment that deals with the capitalization hurdle.

Bringing all the oars together with an advisory board to better inform a policy should be something that D.C. would be looking to be the bellwether for. Creating a social equity board to flesh out the details for social equity applicants and best practices to help them be successful. Enacting legislation that accounts for the way a cannabis business is capitalized will help to better set a social equity applicant up for success.

Creating regulations that protect the public and promote good business practices can only be accomplished by rowing the regulated

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cannabis boats with all the oars working together. Hearing from operators help to inform what regulations do and how they affect their business. But working together with operators, a regulator becomes someone that the operator looks to for guidance.

But without the input of operators, some regulations don't provide for a safe or a better product. Just creates an additional cost for doing business. I would ask as we move forward, there's more communication with the current operators, the current licensees, and that we concentrate on rowing the cannabis ship in the right direction.

So much is riding on these success of this program. And we all owe our very best efforts and voices to ensuring that D.C. is poised for a market explosion and market evolution. And I would recommend that we get the oars together in the form of advisory boards so we row D.C. cannabis boat towards success instead of possibly rowing in a circle. I would like to thank the Board for their time and consideration this morning and looking forward to helping row D.C. towards being the bellwether for cannabis in

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this county.

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CHAIRPERSON ANDERSON: Thank you, Mr. Pritchett, Sr.

MR. PRITCHETT, SR.: Thank you, sir.

CHAIRPERSON ANDERSON: All right. Mr.

Pritchett, II. Go ahead, sir.

MR. PRITCHETT, II: All right. Good morning, Chairperson as well as to the ABC Board and my fellow stakeholders. I want to thank you. My name is A-N-T-I-O-N-E P-R-I-T-C-H-E-T-T. Suffix is Roman numeral II. And I'm the CEO of Renee and Andria Health, the first medical cannabis CBE to be approved for a license in Washington, D.C.

We believe that the newest regulations are a step in the right direction. But as we've already submitted written comments to ABCA and Antione Sr. has touched on a few of our concerns, I'd like to shift the discussion with my testimony today. It is my professional opinion that the shortcomings of the emergency regulations are merely symptomatic of the root cause of our current objections as well as the source of many of the challenges we face not just in the District but in the industry as a whole,

the lack of adequate, proactive, and clear communication and collaboration between those who regulate the businesses and those who run them.

So often in this industry, policy is enacted without consulting subject matter experts on how to best accomplish the goal of effective regulation and the industry professionals, business owners, and the public are left to deal with the fallout. The role of government in a capitalist economy as defined by the international monetary fund is to maintain an orderly environment that facilitates proper functioning of markets. And for the government to accomplish this objective, it requires they meet industry in the middle, establishing opening channels of communication between the regulators and the regulated.

This is why every other industry in the United States has a seat at the table when policy is being made. Yet somehow despite the unparalleled over-regulation, taxation, and complexity of the cannabis industry, we are still the only industry that does not have a seat at that table. These newest emergency regulations are only one example of the many symptoms of the

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regulatory dysfunction that current plagues our industry throughout the country.

anti-business approach to regulating cannabis.

And it has backfired each time, largely to the detriment of social equity operators like myself.

The smaller the operator, the larger the risks associated with operating a cannabis business.

And I think the Board would agree that inadvertently erecting additional barriers to success is neither the goal nor the function of government. The only benefactors of poorly crafted regulations are those with the resources and money to withstand the unnecessarily elevated costs of doing business, in other words, multistate operators. The more we are regulated without making social equity licensees a meaningful part of the conversation, the more regulators will contribute to the shuttering of those social equity businesses and the thriving of corporate giants and conglomerates whose chief goals is to eliminate competition.

You'd be essentially doing their job for them while harming the people you claim to champion, and no one wants that. So let me be

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clear. I'm not here to lambast ABCA or the Board but to illustrate the gravity of this unprecedented opportunity which will not come again.

We will not have another chance to develop this market. And if done improperly, the consequences will be dire for many vulnerable people. With the District's cannabis market entering a new phase of development under ABCA, it requires that we adopt a new approach to how we accomplish our common goals.

Those goals being to establish and grow a stable medical cannabis market which provides patients with safe, high quality medicine and ample choice, to provide real opportunities for social equity applicants in the District to create generational wealth, and to help undo the damage done by the war on drugs, and to make Washington D.C. the international benchmark for what a cannabis market and a social equity program can be when regulation is rolled out and executed properly. I can tell you that in the absence of meaningful conversation, the stated goals of the Board will be undermined and the outcome of the D.C. medical cannabis market

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will likely echo that of other more developed markets where social equity businesses will largely fail. And without bankruptcy protection, people's lives will be destroyed.

And the only ones left standing at the end will be profiteering multi-state operators.

Therefore, I implore any and everyone at the D.C. counsel, ABCA, the Board, DSLBD, and all Password other governmental stakeholders to speak with myself and other industry experts on how to avert this crisis and take a stand for their standards which we all espouse: diversity, equity, and inclusion. Let us work together to create what we all envision for Washington, D.C. and its residents, a thriving medical cannabis market which provides patients with consistent relief and Black and Brown entrepreneurs in our nation's capital with unprecedented opportunity.

To accomplish an unprecedented goal, unprecedented measures are necessary. And to that aim, my recommendation to facilitate this meaningful conversation is to create a social equity advisory commission as Antione Sr. alluded to, chaired by stakeholders such as subject matter experts, social equity business owners,

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1 and members of the public. I am open to any and 2 all dialogue necessary to realize this recommendation and welcome all collaborators who 3 share the same values and goals. Thank you for 4 5 your time. CHAIRPERSON ANDERSON: 6 Thank you, Mr. 7 Pritchett, II. All right. So let's have Rabbi 8 James Kahn. 9 RABBI JAMES KAHN: Thank you. Chairman Anderson --10 11 RABBI JAMES KAHN: Good morning --12 good afternoon, sir. Go ahead. 13 RABBI JAMES KAHN: Good afternoon, 14 Chairman Anderson and distinguished Board 15 members. My name is Rabbi James Kahn. And in 16 2013, my family opened Takoma Wellness Center, a 17 D.C. owned independent mom-and-pop medical 18 cannabis dispensary which is now home to more than 55 full-time staff members, mostly D.C. 19 20 residents. 21 As you know, the cannabis industry is 2.2 facing immense challenges. Onerous tax laws, 23 banking restrictions, cumbersome regulations have 2.4 all combined along with an over-saturation of

licenses and unchecked competition from the

legacy market. And it's proven too much, even for big businesses.

A recent report by Whitney Economics studied more than 400 licensed dispensaries around the country. Only 26 percent had turned a profit in 2022. This is not sustainable, especially for small businesses.

entrepreneurs cannot access traditional sources of capital, making it difficult to weather even normal market downturns and leaving us vulnerable to predatory lending practices. And as Antione, Sr. mentioned, we also lack the protection afforded by federal bankruptcy laws, leaving too many struggling business owners, especially those of social equity applicants and license holders saddled with the nightmare of generational debt, not the dream of generational wealth. Far too many have been and will continue to be forced to sell as distressed assets purchased by one of a handful of uber-wealthy corporations destined to monopolize our industry.

Companies with pockets deep enough to endure cannabis' slim margins and immense tax obligations capable of riding out the storm. Now

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I'm not here to depress but to highlight the power of regulations, to highlight your power as regulators. Over the past decade, I've watched as the District's cannabis regulations have evolved in ways that have strengthened D.C.'s cannabis license holders, first by allowing reciprocity with other states, then by increasing purchase allotments and finally through self-certification.

You have a lot of new licenses only when demand existed and when supply was in place. These actions have allowed D.C.'s cannabis market to endure, even in the face of a lot of challenges and have kept D.C.'s original group of cannabis license holders, one of the most diverse in the nation, in control of their businesses and largely have kept large multi-state operators out. Unfortunately, many of those regulatory protections are set to disappear.

The Medical Cannabis Act of 2022 puts an end to D.C.'s license caps, opening the door to market saturation, price compression, and further divvying up an already small market.

Maryland's Adult Use Program will make the situation even more challenging, offering our

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customers access to cannabis without forms or fees. To continue to thrive, D.C. once again needs your help and needs its regulators to help bolster our industry, not to diminish it.

One such regulation already exists, the expansion of ABCA's nonresident visitor passes to include both short and long-term options at discounted rates. However, ABCA's decision to wait to institute that change until October 1st is a missed opportunity with real world implications. We have seen patients reluctant to purchase monthly passes, knowing more economic options are coming in October.

And patients that purchase them must be convinced to do so again every 30 days. This is no easy feat with so much competition surrounding us. In short, this decision is costing stores critical income and costing D.C. lost tax revenue.

Please reconsider this and allow us to implement that change as soon as possible. And please consider the other changes that will be requested by my colleagues today. Let's not wait for D.C.'s program to decline and for businesses to close or to be sold to large operators before

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we act. I am proud of the District's program, and I want to thank you for all you've done to make that the case. Thank you.

CHAIRPERSON ANDERSON: Thank you, sir.

So we'll have Rabbi Jeffrey Kahn speak. Rabbi

Kahn, Jeffrey Kahn?

RABBI JEFFREY KAHN: Yes, good afternoon, Chairman Anderson and members of the ABCA Board. I am Rabbi Jeffrey Kahn, a Ward 4 resident and business owner. My family and I founded D.C.'s very first medical cannabis dispensary, Takoma Wellness Center, in 2013 after participating in the application process form 2011.

We're now celebrating our tenth anniversary of serving the public. Today, I want to call your attention to language in Section 301.1 of the regulations, the maximum amount of medical cannabis concentrates a qualifying patient or a caregiver may possess or purchase within a 30-day period which will be reduced from eight ounces to eight grams. There are several reasons why some medical cannabis consumers may require high dose cannabis products to achieve significant benefits, as much as eight ounces a

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month.

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Medical conditions, certain medical conditions require higher doses of cannabis to effectively manage symptoms, for example, patients with severe chronic pain, multiple sclerosis. Cancer-related pain may find that lower doses are insufficient. Tolerance development, cannabis consumers develop a tolerance over time, requiring higher doses to achieve the desired effect.

Individual psychology, every person's psychology is unique -- physiology is unique, sorry. And some individuals may require higher doses to experience the desired therapeutic effects. Treatment of resistance, in some cases, individuals may not respond adequately to lower doses.

This can occur with certain medical conditions such as epilepsy or severe nausea associated with chemotherapy. And cost inconvenience, for individuals who consume cannabis regularly, using high dose products can be more cost effective and convenient. Higher potency means smaller amounts are needed, reducing overall consumption and cost in the long

run.

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This can be particularly beneficial for patients who rely on cannabis for which there was no insurance or any other kind of financial reimbursement. Since 2015, we have worked really closely with counsel, our regulators both at the Department of Health and ABRA and now ABCA to increase the amount of concentrates available to eight ounces per month. That amount now meets the needs of our patients.

We don't have any issues. Please don't force our patients to the unregulated, untested market to get the meds they need now and we now supply them. We fixed this problem once. Please don't take away the right of D.C.'s sickest patients from legally purchasing the medicine they need. Thanks so much.

CHAIRPERSON ANDERSON: Thank you,
Rabbi Khan. Do we have Stephanie Kahn?

MS. KAHN: -- very much.

CHAIRPERSON ANDERSON: I can't hear you, ma'am. Okay. Go ahead now.

MS. KAHN: Thank you. Good afternoon,
Chairperson Anderson and distinguished Board
members. I'm Stephanie Kahn. And you've heard,

my family and I have owned and operated Takoma Wellness Center for the past ten years.

I will be addressing one of the concerns we have with the current practice. I spend many hours a week helping patients navigate D.C.'s medical cannabis program. And I see the barriers to patient access that continue despite the many improvements that ABCA has made.

Too often, patients are unable to contact ABCA to work out problems because the office is closed, even though the dispensaries are open. We certainly do not expect you to work the same hours as dispensaries. But it is vital to have a workaround to allow patients who have difficulties obtaining a registration or self-certification to obtain their medication without waiting 24 to 72 hours until your office is open.

We request that either ABCA provide us with a list of numbers that can be allocated to these patients or that we can use their drivers' license numbers as their patient ID number as many other states do now. Allowing a workaround for medical cannabis would address this issue by enabling patients to obtain their medication in situations where they would otherwise be unable

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to do so. During this last quarter, we've had 50 patients come to us after applying for either self-certification or a non-resident visit or pass and receive neither registration nor payment link.

These individuals did not know if their application had been received or if they had made errors. They had no idea that if they had made errors, what those errors were or how to fix them other than to submit another application which is discouraged on the ABCA website. Many of the patients have tried to contact ABCA on their own but did not receive a response.

We contact ABCA on their behalf.

However, 30 percent of these problems come after working hours or during weekends and holidays.

And the current climate of hundreds of illicit dispensaries and some with Maryland opening a recreational program on July 1st. These patients can easily choose to go to a dispensary without restrictions, limitations, or charges.

We've asked numerous times for a workaround, but none has been granted. Many of the patients currently leave and go elsewhere now, and more will do so once Maryland opens up.

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This currently affects patient satisfaction or patients blame us.

And we have received numerous bad reviews regarding this practice and will soon severely impact all of the licensed businesses.

ABCA has worked tirelessly to ensure the D.C. medical cannabis program is a success. And we know that is your goal. Please provide us with either a list of patient numbers to be allocated or allow us to use drivers' license numbers as a workaround so that we don't continue to lose patients due to glitches and the certification process. Thank you very much for your time, your work, and your consideration.

CHAIRPERSON ANDERSON: Thank you, Ms. Kahn. And Joshua Kahn?

MR. JOSHUA KAHN: Yes. Hi, I'm Joshua Kahn, co-owner and operator of Takoma Wellness Center. I'm here to express our strong opposition to the proposed limitation on patient concentrate purchases in our medical cannabis program. Concentrates such as oils, tinctures, and edibles offer an alternative method of consumption that can be easier on patients who may have difficulty smoking or vaporizing

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cannabis flower.

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Imposing limitations on these products can severely impact their quality of life and push them towards more expensive and less effective pharmaceutical alternatives. For example, many patients battling progressive forms of cancer turn to RSO or Rick Simpson Oil. There have been promising reports that attest to RSO's efficacy such as severely decreasing the leukemic blast cell count in a 14-year-old terminal patient with no toxic side effects, for example.

Anecdotally, RSO has helped patients manage conditions such as MS, epilepsy, cancer, insomnia, chronic pain, and asthma amongst many others. However, the recommended dosing of RSO with those battling progressive forms of cancer is to ingest 20 grams of oil a month over a three-month period. These regulations would prevent patients from being able to obtain such medicine, limiting them to solely eight grams of concentrated oil per 30 days.

These new regulations would also unnecessarily prevent patients from easily purchasing CBD oils, CBD dominant vape cartridges, and CBD dominant concentrations as it

will vastly reduce the amount of flower products they'll be able to purchase. For example, a patient would now only be able to purchase -- if these regulations pass, a patient would only be able to purchase eight one-gram CBD dominant oil cartridges which contain only ten milligrams of THC in each, equaling 80 milligrams within 30 days. Or they could purchase eight ounces of flower that's testing at 33 percent THC which would equate close to 74,000 milligrams of THC within 30 days.

By restricting concentrate purchases, we may inadvertently force patients to consume larger quantities of less concentrated forms, leading to potential over-consumption of unwanted side effects. For the patients who are unable to obtained the required dosage from legal channels may go to the illicit market, putting themselves at risk, and undermining the entire point of this well-regulated program. The proposed regulations state Colorado's regulations as a blueprint for these changes to our program.

However, Colorado limits are eight grams of concentrate per day, not 30 days, and allows for exemptions for patients that travel

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far to purchase which is the majority of our patients as they're out of state. I would like to again emphasize medical patients in Colorado can purchase eight grams of concentrates per day, not per 30-days. A Colorado patient can purchase 240 grams of concentrates within a 30-day time period.

A D.C. patient starting October 3rd, will be able to purchase 8. A Colorado patient can purchase 2 ounces of flower a day equaling 60 ounces in 30 days. A D.C. patient, 8 ounces in 30 days.

Most importantly starting July 1st, anyone can legally purchase up to 12 grams of concentrates per visit in Maryland. D.C. patients, 8 grams in 30 days. Lastly, last month alone, 25 percent of D.C.'s regulated cannabis revenue came from concentrate sales.

Our sales will drop and the ability to attract new patients will be undermined by regulations that seek to fix a problem that does not exist. Please leave the purchase limits alone. Our patients are counting on all of us.

And lastly, I also would like to just mention again July 1st anyone will be able to

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purchase adult use cannabis in Maryland about pain for any sort of visitor pass. They'll be paying a nine percent sales tax, only three percent higher than D.C.'s sales tax on medicine. We desperately need an ability to provide visitor passes that are not 30 days, that do not cost 30 dollars.

We need to be able to capture these patients now before they're able to purchase in Maryland without any sort of fee. We ask that we speed up the time frame of the implementation of these new categories or at the very least allow patients that do have a visitor's pass to use that visitor pass until October so we don't have to beg and plead these patients to still visit our program when they again can just simply go into Maryland with no few for a visitor's pass. Thank you very much for your time and your consideration.

CHAIRPERSON ANDERSON: All right.

Thank you, sir. I see everyone has testified.

As I had stated in my opinion, the Board has heard from the patients and the industry. And we will revisit the eight ounce.

So be assured that that will be

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revisited as part of the review process. And if the Board makes no changes to any other provision in the regulation, there will be a change in that specific one. So rest assured that we have gotten lots of comments and we've heard loud and clearly and that that is an issue that we should revisit. And we've heard and we will revisit that issue. Yes, Mr. Short?

MEMBER SHORT: Concur with your statement wholeheartedly. And I think that I've heard from this panel some very interesting information. And I'm enlightened and encouraged that our Board now will be able to make some decisions based on the information that we've received and from these three panels today. Thank you very much, Mr. Chair.

CHAIRPERSON ANDERSON: All right.

Thank you, Mr. Short. I have some questions that
I believe I want to ask you, Mr. Pritchett. We
did receive your previous -- your written
comments.

And so there are just some questions

I want to ask you. You had indicated that the

rules should contain remediation procedures if a

product is found to be adulterated. Are there

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examples of the jurisdiction, whether in the U.S. or abroad, that allows for or has procedures for this? Are you aware of any?

MR. PRITCHETT, SR.: Yes, Chairman.

Maryland has specific requirements for retesting,
so and Maryland lays it out very clearly.

Depending on what the -- what your failure is
for, you are allowed remediation of sorts. There
is only one failure that you get -- that you get
no remediation for.

The only thing that you do not get any remediation for is salmonella. Everything other than that, what you are allowed to do is if it fails test the first time, you can retest it. If it fails a second time, then you either have to destroy it or it has to be remediated.

Remediation means simply processing that through someone who is a processor, or if you have a processing license yourself, by doing -- creating concentrates and things of that nature from that same material.

CHAIRPERSON ANDERSON: All right.

Thank you. Now, another question, if the Board allows the testing for the product, if it's in finished form, doesn't this create a gap where

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MR. PRITCHETT, SR.: That's a good question. What happens is when that -- when the flower goes out for testing, no one enters or touches that sample until we get the results back. And the reason why is if you were to do anything except for keeping it in the perfect environment, you could alter it.

For example, if you are -- you have someone who doesn't practice great hygiene, you could actually have someone who could adulterate that product. That's why it's very important that you have SOPs in place that no product is ever touched without the proper PPE. Things like that will reduce that possibility, but also when a batch is out for testing, the access to that batch is very limited to the GM and normally the person responsible for the testing.

CHAIRPERSON ANDERSON: So if I'm facing the cultivator or manufacturer, aren't they responsible to ensure that a product is safe at the time of delivery to the consumer or transfer to another licensee?

MR. PRITCHETT, SR.: They are indeed.

CHAIRPERSON ANDERSON: So there is

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another question about IP. So can concerns about IP be handled by a contract or specific confidentiality requirements in the regulation for testing labs?

MR. PRITCHETT, SR.: Yes. So one of the things that really makes a difference is depending on what a craft grower would be looking to do, we would consider ourselves a craft grower. So there are very specific things, what we would like to call the secret sauce, in the way that we would actually use it to create our end product.

Giving that and making that allowable for anyone to see, like a testing lab or something like that, I wouldn't say that they wouldn't collude with a competitor and pass that information off, but one thing you can agree, Chairman, is more people become successful. People try to look and find out why they are successful.

So if that is part of our success, you can believe that that will be something that would be a very sought-after item. So us being able to do that and not reveal that portion of it, it makes it safe for us to make sure that

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nobody is going to be copying what we're doing. And because of how competitive this market is, how you fertigate and what you're going to use can change your end product, which gives you a unique selling proposition, which allows you to be successful in the market.

CHAIRPERSON ANDERSON: All right. You also indicated that you prefer that licensees file nutrient management plans. Nevertheless, D.C. Code Section 7-16 7-1671.5, .05, requires testing labs to provide a report regarding the presence and concentration of fertilizers or other nutrients.

Do you disagree that such a proposal would likely require a legislative change?

MR. PRITCHETT, SR.: That's correct.

Because the way it's set up right now, everything that -- so residual solvents, mild toxins, heavy metals, all of that is part of the testing strategy that's laid out in regulations.

So if you were to use something like DDT or another growth regulator, that would show up on your testing, because those are all things that we're going to be certain -- that you are -- that are set as parameters for the testing for

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1 D.C. 2 CHAIRPERSON ANDERSON: This was one of 3 the problems when you -- when you guys provided 4 written testimony. Then everyone will have an 5 opportunity to read it and then have questions to 6 ask, so 7 MR. PRITCHETT, SR.: I love it. 8 CHAIRPERSON ANDERSON: But I -- but so 9 far you have been on point in responding to the some of the concerns that -- or some of the 10 11 questions that at least the agency has regarding 12 some of the recommendations. 13 So you also indicate that leaf tissue 14 samples 15 MR. PRITCHETT, SR.: Leave tissue 16 samples. 17 CHAIRPERSON ANDERSON: I'm sorry? 18 MR. PRITCHETT, SR.: Leaf tissue 19 samples. 20 Right. CHAIRPERSON ANDERSON: 21 said that that's too expensive. However, D.C. 2.2 Official Code Section 1671.05 requires the 23 testing lab to provide a report regarding the

presence and concentration of fertilizers or

other nutrients.

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Is there an alternative means of complying with this requirement that can be implemented by regulation?

MR. PRITCHETT, SR.: Well, you already have those means in place by having a testing facility that is going to be testing for residual solvents, heavy metals, mild toxins. Those -- and there are a list of banned substances that of course would show up with your current testing parameters. You wouldn't have to do anything different.

If the Board were to look for a reason to create a leaf sample and have people do leaf tissue tests, I would implore the Board that if they were doing that they would be doing that for our benefit to try to eliminate the hop latent viroid, which has struck almost every other market and exists in 90 percent of the facilities in California. That is something that could hinder the industry as a whole.

That is something that I would be all for, but changing it just so you can note the nutrients. A test like that -- for example, a hop latent viroid test -- those test kits run anywhere from \$7 to \$8 a test kit.

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So when you're talking about testing each time with those leaf tissue samples, there is no specific guidance on how many plants are a part of that leaf tissue sample, how many times you need to do it. Do you need to do it in every single phase? Because of course in every single phase the nutrient combination that will be present in that plant will be different.

So earlier on you're going to have more nitrogen. Later on you're going to have more phosphorous. So the question would be, what are the parameters? Is it a wide scale? And for, Chairman, we're getting into those bushes for something that's already taken care of in your normal testing procedure. It just creates another burdensome cost for the business rather than creating product safety for the patient.

CHAIRPERSON ANDERSON: All right. So regarding flower, is there a state with a better means of comparing flower's concentrates in other products?

MR. PRITCHETT, SR.: Is there a state that I -- I -- do you mean in terms of looking at their total allotments?

CHAIRPERSON ANDERSON: No. Just

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comparing -- I think comparing the quality of flower concentrates in other products. Is there a state that you're saying would say, okay, if you want to mimic, this is a state you can look at to see what's offered?

MR. PRITCHETT, SR.: So there are several on -- and it depends on which particular front you're talking about. But in terms of flower, I can tell you that Massachusetts has one of the most restrictive policies in which you are having in Massachusetts is you are having the exodus of a lot of the big players just because Massachusetts they never spoke with the operators.

So the requirements that they put in made it a very, very, very narrow scope by which you could be successful. So because of that, a lot of the people who invested millions of dollars are leaving that market simply because it's too hard.

On the opposite side you have

California, where it may not be as stout as I

think it could be. They are getting much better

at how they are applying the rules and regulation

for your flower quality. For me, for my money,

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1 right now it would be somewhere, if I have to 2 choose one, it would be Colorado, simply because 3 of the quality of flower they actually produce. I would stay away from Oregon, simply 4 5 because of the adulterated market in Oregon and the fact that they are doing about 500 percent of 6 7 what's supposed to be grown for the people in 8 So there are a lot of shortcuts taken that area. 9 because they know that that product is going to end up in the black market. 10 11 So, Chairman, if I were to say, I would look at Colorado, and I would also look at 12 13 Maryland, look at some of the testing 14 requirements and features and flower quality 15 requirements they have there. 16 CHAIRPERSON ANDERSON: You also talked about security plans, and you're aware that 17 18 security plans can be amended at 54 -- 15.4. 19 Does that address your concern? That does. 20 MR. PRITCHETT, SR.: 21 CHAIRPERSON ANDERSON: And there is a 2.2 rule that eliminate all plans except for security 23 Does that -- would this be sufficient for plan. 2.4 you?

MR. PRITCHETT, SR.:

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I'm going to let

the -- I'm going to let the big boss answer that question. I'm the weeds person. I'm into the deep details. The more grand, open concept, is more Junior. So, please, sir, please answer that question for him.

MR. PRITCHETT, II: Clarify the question for me, Chairperson.

CHAIRPERSON ANDERSON: No. There was a -- this is your comments. The rule eliminates all plans except for security plans. So that's the only plan that you have to have is a security plan. So I'm saying, is it sufficient to address your concern?

MR. PRITCHETT, II: So I would say no, simply because one of the things that you see, especially in an uncapped market where licenses — the process is no longer competitive — is that you find people who may not otherwise be qualified or have the resources to stand the business up, to do it effectively and to serve the patients in that district, or in this district specifically, become a part of that market and that runs significant risks, right, to — not only to the public but also to themselves as business owners.

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So I do think that it's imperative that it not just be security plans. I know that you're aware of our application process. It could also contain business plans, architecture plans, right? There are so many different facets of this business that need to be accounted for, and the -- I think I am in favor of lowering barriers to entry, but not of lowering the standard of that entrants.

And, for me, there needs to be an additional qualification, not just of a security plan, but also of a business plan to be included, and I would also say a cultivation plan, because if you're going to have people who are generating the product that's going to end up in this market, you want to ensure that what they are putting in that product, although there will be independent testing, there are still avenues by which that product can be adulterated.

So we want to make sure that we're getting qualified people into the marketplace and not just getting bodies in, because those are two different things, and I think quality matters much more than quantity does.

So to answer your question,

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Chairperson, I think that security plans are necessary, but there should definitely be more required in terms of the plans required when applying.

CHAIRPERSON ANDERSON: All right. And so regarding 7-1671.03, 7-1671.03 limits by law where medical cannabis may be used and does not appear to allow medical use at a licensed facility even for employees.

Do you disagree with this reading of the law, or such a change would require a legislative change?

MR. PRITCHETT, SR.: So I'll jump on that one. So most -- most employees that you find within the medical cannabis industry, somewhere between 60 and 80 percent of the employees are medical cannabis patients themselves.

And they have this medication where they are supposed to be able to administer this medication to help what -- keep them in whatever state it may be to allow them to function, not making some kind of allowance for that. That's tantamount to having a child that's at school that has a medical condition, and you're deciding

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they can't have it because you don't want them to have it while they're doing -- while they're at school.

We've seen time and time again how that has been overruled, and now cannabis can be administered to children while they are at school. The idea that an adult cannot administer their cannabis while they're at work is something that creates a hindrance, because as I said, a large portion of participants within the medical cannabis industry are medical cannabis patients themselves.

And I don't know if you have ever looked at what a wage scale is for most entry jobs -- entry level jobs in medical cannabis, but it doesn't pay a whole lot. People are here because they love what they do and they love to be able to help people and they know how impactful and positive cannabis can be.

So not allowing them to be able to do that, to medicate themselves, it could create a situation.

CHAIRPERSON ANDERSON: And I guess what I'm asking is, wouldn't this then require a change in the law, the regulation? So that's

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what we're trying to clarify.

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MR. PRITCHETT, SR.: Well, it could. But because the change in regulations that are within your purview, which this is -- and it would be for the betterment of the industry, which is within your power, that would be how you would make that change instead of it having to be legislated, because you, as the regulator, you could say, "Hey, this is -- would have a negative impact on the industry as it is written, and you can change it if" -- maybe I misunderstood that, but I thought that that was something that was within your power and your purview to make that type of change if the legislation puts an undue or unfair burden on the industry that you're regulating.

CHAIRPERSON ANDERSON: That's fine.

All right. We'll look at it.

And the final question is regarding -it's regarding social equity. So the social
equity program of course is established by
statute. So what change would you require to
allow your business to participate?

I know that we had had a public hearing before, so is it what we had in the

public hearing, or is it something different?

MR. PRITCHETT, II: Great question.

Great question, Chairperson. So what would allow us to participate would be -- I think what's necessary is an inclusion in the parameters of that bill. I think what it currently does or in the current statute we are excluded and sequestered into what is effectively a gray area in the regulation.

And so I think to that point it may require a legislative change, and that's something that we are open to working with the Board and would really appreciate and welcome the Board's help in making that happen, as I'm sure you recognize that the challenges that are being faced, as we had our discussion in the hearing prior to today regarding some of those challenges.

So I think that getting the Board's support on those little legislative changes and to make those happen, to make sure that not only ourselves but every other social equity applicant that follows does not end up in that same legislative gray area. It is incredibly important, and it's something that we are

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continuing to pursue.

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And the last thing I want to say, because I know that you said this is your last question, is that I sincerely appreciate all of the Board's questions on our written comments. We did spend quite a bit of time combing through the regulations and providing those, because it's very meaningful for us and we see the value in spending time having these conversations and providing that feedback.

And that's exactly the nature and this

-- the past 10 minutes is the -- exactly the

nature of the Social Equity Advisory Board that

we are proposing, because as you can see, there

has been a ton of clarification and industry

subject matter expertise that has been lended to

this discussion that is going to allow us to have

informed policy moving forward.

So I think everyone on the call and on the Board would agree that this has been fruitful and productive and we would absolutely love to see it continue, and I think it would be a travesty not to put something permanent in place to ensure that these discussions continue, because as we know, the regulations are going to

continue to change as the market develops, so let's make sure that we have the right discussions prior to those regulations becoming enacted and enforced to make sure that all of the consequences, both anticipated and unanticipated, can be accounted for and dealt with prior to those -- you know, that fallout occurring.

So, once again, I appreciate the Board's time. I appreciate the discussion and the questions. It has incredibly meaningful, and thank you for your time.

CHAIRPERSON ANDERSON: And just -- all right. Thank you. I want to -- I just want to inform the public. I'm asking questions. I know every -- I give the other Board members an opportunity to ask questions, but I am asking questions based on written -- written comments that the agency received.

So since I -- since we received written comments, the Board members can review those written comments and have fruitful questions to ask. I don't want to sit here and just -- off the bat just ask questions. If I saw a comment saying that why is it that questions are being asked, well, questions are being asked

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because we got written comments that were provided previously and so, therefore, I have had an opportunity to review them. And so, therefore, I can ask questions based on the comments.

I do not want to ask questions off the fly based on -- based on just someone just testifying and just ask a question off the fly that -- and that's one of the reasons I have not asked questions.

But the only question I'm going to ask, Ms. Kahn, you had mentioned the fact -Mrs. Kahn, you had mentioned the fact about the problems that you're having or your customers/clients were having with the application.

Now, I have been telling folks that, no, you can go online, apply right now, and you'll get a card. So what is the problem that your customers are facing?

MS. KAHN: Our patients are going online, and most of the time the majority of them are able immediately to get a payment link and to pay and get their registration. But as I said, over the past quarter, 50 of them have received

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nothing. And some of that is because of patient error. They either didn't complete it, or they completed it with information with the wrong email address, whatever. But they get no response, so they don't know what to do.

On the web -- on your website it does say, "Please don't submit a second application."

Many of them have done that because they don't know what else to do. And then they don't get a response.

So what I do is I contact the ABCA offices, and your staff has been for the most part very, very timely, because often they are waiting outside, and help -- and help guide them through. But because there is -- they get confused, not everybody is -- many of our patients actually are not computer literate, and they don't understand what to do, so they contact us.

But 30 percent of the problems that we had over this past quarter came after hours, and obviously you can't -- you know, you can't staff your offices 24/7, I mean, or whatever our -- for our hours. But if we could have a workaround, if we could have some kind of number that we could

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enter into metric system, so that they would be able to purchase -- because we're not -- you're just asking for their information. We have that. And then they could have that patient identifier. And then once working hours have resumed, then you would be able to get more information from them.

But because now they're either waiting
-- we've had people wait an hour and then in
anger leave, while I've been trying to contact
people, or they just leave and say forget it, and
they then -- right now they go a couple blocks
away to the next illicit dispensary and nobody
asks them anything. And starting July 1st, they
are going to be able to go two blocks away from
where we are and go without a problem.

So it causes -- and then we get nasty reviews, and it's not our fault.

MR. KAHN: I just wanted -- just to interject. Some of the

CHAIRPERSON ANDERSON: I'm sorry. I'm sorry, Mr. Kahn. You need to identify yourself for the record, so -- remember, we have a court reporter, so identify yourself, please.

MR. KAHN: Joshua Kahn, Takoma

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Wellness Center, and I just want to interject on what my mom was saying regarding why it's happening. It often happens with certain email addresses. You know, when someone comes and registers using a hotmail email account, it might not -- they might not get that response so quickly as opposed to a gmail account.

Sometimes the system has crashed. The registry with ABCA, simply they just get a blank screen. So there has been a few days where for about an hour a few different times someone will register and just receive a blank screen. But the biggest issue is when a patient applies for a second -- for a second visitor card after the first one has expired, if they accidentally use the original payment link to pay for their second visitor's pass, it will get stuck in limbo because they need to use their -- a new payment link.

But it's not really written on the website, anything about this, and we often have people come to us after submitting their payment on the original payment link and they have heard nothing. So they come to us asking for help, and we hope that they come to us before 4:00 p.m.,

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1 not on a weekend. 2 CHAIRPERSON ANDERSON: All right. Thank you. 3 Any questions by any Board members 4 5 before I move on to another panel? All right. Thank you very much for 6 7 your comments today. Again, written comments can 8 be submitted on or before July -- I'm sorry, on 9 or before July 20 -- I'm sorry, on or before 10 July 21st at -- I'm sorry, June 21st, on or 11 before June 21st, to abca.legal@dc.gov or after 12 -- or once we have published the new regulation, 13 then you'll have 30 days to do that. 14 So thank you very much for your 15 appearance and testimony today. All right. 16 Thank you very much. So let me call the next panel. 17 All 18 So the next panel that I'm going to call 19 is the Generation -- Generational Equity 20 Movement. So Donald Temple, Mackenzie Manns, Kim 21 Johnson, William Harris, and Lorenzo Bellamy. 2.2 They're from Generation -- Generational Equity 23 Movement. They're the folks I'm going to ask to 2.4 be elevated.

And we're going to be off the record.

Give me I'll be off the record for about two
minutes, please. Okay? I'll be off the record
for two minutes. But please elevate those
parties.
(Whereupon, the above-entitled matter
went off the record at 1:02 p.m. and resumed at
1:04 p.m.)
CHAIRPERSON ANDERSON: All right.
Well, we're back on the record.
MR. ORELLANA: Those who are in
attendance have been elevated, Chairman.
CHAIRPERSON ANDERSON: All right.
Thank you.
Let me make sure that we have a
quorum. We need at least a quorum for the
agency is three Board members. We need to make
sure at least three Board members are online.
So I do see three Board members
online, so we do have a quorum.
All right. Now, I all right. Let
me see. I and let me see who so let me
just ask a question, Mr either Mr. Mackenzie
or Ms. Manns. Is everyone from your group, are
they online, or are we missing anyone?
MS. MANNS: Everyone is online. There

1 has been a change, Mr. Chairman. And Kim 2 Johnson, Williams Harris, and Donald Temple are 3 no longer testifying today. CHAIRPERSON ANDERSON: 4 Okay. Fine. 5 I know that there was a change, but then I was --6 I thought -- all right. That's fine. 7 All right. So who wants to go first? MS. MANNS: I'll go first. 8 And then 9 my colleague, Mr. Bellamy, can go after me. CHAIRPERSON ANDERSON: 10 Okay. Fine. 11 So please identify yourself on the record, and 12 then you can -- I'll start the timer. 13 MS. MANNS: Absolutely. My name is 14 Mackenzie Manns, and I'm testifying on behalf of 15 Generational Equity Movement. 16 CHAIRPERSON ANDERSON: Go ahead, 17 ma'am. 18 MS. MANNS: Good afternoon, Chair, and 19 Board members. Generational Equity Movement is 20 an advocacy coalition has been successfully 21 advocating on behalf of black-owned cannabis shops since 2019. We've organized the community 2.2 23 twice to beat back emergency legislation that threatened to shut us down, and we've worked 2.4 25 closely with council over last year to create the

law that is now in place.

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We largely applaud the regulations that we're talking about today. We know that they represent a pared-down version of what was recently in place, and they create low barriers to access for a lot of the applicants. Although we definitely are frustrated with the social equity set aside, we understand that that issue needs to be taken up with council and not with you. And my colleague will speak more to this.

So we do -- really just wanted to say thank you for all the work that you put into these regulations, and we're excited for our continued communication as we watch this process play out.

CHAIRPERSON ANDERSON: Okay. So -- all right. Let me start -- hold on. So you're going to now testify, Mr. Bellamy? Please identify yourself for the record.

MR. BELLAMY: Yes, Mr. Chairman.

Thank you. My name is Lorenzo Bellamy, L-O-R-E-N-Z-O, Bellamy, B-E double L A-M-Y. And I am a consultant for Generational Equity Movement here to just talk very briefly about these proposed emergency regulations.

I want to commend you, Mr. Chairman, for in the beginning talking about the eightounce issue and that you all will be revisiting that. We hope that you will also consider revisiting the social equity definition. And there has been a lot of commentary on that, and so I've testified in many -- many hearings, different bodies.

And when you have someone in a group of folks who have testified on the same issue and pretty much are going to reiterate -- or I would be reiterating what they have already said -- the thing I would say at this point would be "Me, too."

So everything -- I would say that the -- Mr. Pritchett and -- Senior, the II, as well as Mr. McGowan and Ms. Kinner, when they were talking about the social equity piece, we are 100 percent -- well, 99 percent with them on that and agree and hope that there will be changes made.

We also recognize that this is probably an issue for council, and we are reaching out and have reached out to council as recently as this morning to express our concerns

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about the social equity piece, and hope that that can be expanded as well.

We also think that you, Mr. Chairman, and your colleagues on the Board can play a role on the social equity definition and expansion of it as well. And so we are asking that you would assist us and the staff at ABCA to reach out to the council. I think they are prepared to hear from you about how they can make changes through emergency legislation to the definition of social equity. We want that to be expanded and not limited as we see it in its current form.

There is also the possibility as well, Mr. Chairman, of even reaching out to the Mayor herself and the administration and maybe seek emergency -- executive order, excuse me, and make the change that way.

So I want to briefly just mention some

-- some folks have been talking about Maryland.

Maryland has, in my opinion, a more expansive

definition of social equity. We think that is

more inclusive. It doesn't limit it to, you

know, simply being incarcerated, and I know

Mr. McGowan mentioned maybe just looking at one

of the criteria as opposed to two, and that would

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be a potential solution.

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But we also think by expanding it to include some of the language that is published and will become effective July 1, we think that that is a good example of how to encompass and embrace social equity.

We also think that -- it was mentioned about a Social Equity Advisory Board. We think that's a good idea, as long as we can make sure that for my clients who are unlicensed right now that any delay in improving social equity applicants does not run afoul of the timeline that we would have to apply.

I think Commissioner -- I don't think he's on -- yes, Commissioner Grandis mentioned, you know, we are aware that this a privilege, not a right. But we think that, you know, we are in good faith trying to be good actors here and hope that this Commission and potentially the council would be good actors as well to extend courtesy and grace to us to extend or at least not allow us to bump up against the safe harbor provision that will be -- that will terminate.

So we will be submitting comments, Mr. Chairman, following up on our testimony.

We're also reaching out to the council to see the appetite that it would have, some specific members of the council, who have indicated during the hearing last year and early this year that they would potentially seek emergency legislation if things look like they weren't working. And from what I'm hearing today, and from what you all are hearing today, things are not working, and potentially, you know, need some fixes. And I think you've identified some of those.

Many of the panelists have already talked about that, and I think there's going to be more panelists who will be bringing up some of the similar issues as well.

So I'm going to save you 57 seconds here. Man, five minutes goes by fast. I thought I would only be on for like a minute or two.

But, anyway, I appreciate you hearing us, and I look forward to working with you and also keeping you informed about our conversations and efforts with the council.

Thank you very much.

CHAIRPERSON ANDERSON: All right.

Thank you, Mr. Bellamy. As you are aware, the social equity is a statute that has to be

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addressed by the council. And I have been going to several conferences and trying to find out myself if there are states that have a -- what would -- a workable social equity program. Are there any states out there that have the programs that you could recommend? Because I -- in my -- I have gone to several conferences, and I was recently in Europe. I went -- I participated in a conference -- a symposium -- the cannabis regulators of color symposium. I went to that in New York.

And just getting -- there were a lot of different states that were there, and I'm just -- I'm trying to find out. Does a state -- what state out there has a social equity program that works, that actually works, or that you'd recommend that this is something that needs to be -- that should be followed. And if the Board is going to recommend to the council to say, "Look at what they -- this is what the state has done. Look at this state."

MR. BELLAMY: Right. Mackenzie I think has the answer to that, Mr. Chairman.

Go ahead, Mackenzie, if you don't mind.

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MS. MANNS: Yes. Mackenzie talking -sorry -- for the record. New Jersey is a great
resource that we should be looking at. What they
have is like a three-tiered system, and so they
have an ongoing rolling basis for social equity
prioritization. However, there is no social
equity applicants in the queue, and they move to
economically disadvantaged individuals, and then
they move down another tier to impact zone
individuals.

And so it really rounds out people who have been affected by the war on drugs in multiple different ways, and ensures that there is preference given to all of those individuals. I think that would be a state that you should look to for advice or answers on what we could emulate, as well as Mr. Bellamy said Maryland.

I think Maryland has got a great definition, and their law is really amazing because they baked in a lot of time for the Board to go back and make sure that the first round of licensings accomplish the intent and the spirit of the law.

That's something that D.C. doesn't have in their law, but I think is something that

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we should look to as a practice that we could emulate.

CHAIRPERSON ANDERSON: All right.
Thank you very much.

MR. BELLAMY: Mr. Chairman, if I may just -- if you don't mind, if I may just add and plug the Maryland language. And I can -- we can forward that. If you don't -- if you haven't seen it, we can certainly send that to you, and I have follow-up written testimony which outlines some of the things that Mackenzie has been talking about.

They have a disparity study process as well. I think there was a mention about the Social Equity Advisory Board that may be similar as well in terms of, you know, let's look at this, and is it really working, and what are the true needs and definition of social equity as it relates to the disparities that have happened in the medical cannabis and also in Maryland now with recreational.

CHAIRPERSON ANDERSON: Well, thank you for that. I will ask that you can submit that to ABRA -- abca.legal and, again, it's a statutory change from the council. And so whatever, if

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1	that's something that you require, then of
2	course, you know, I think you describe yourself
3	as lobbyists, so, therefore, you need to lobby
4	the council to have this statute changed and we -
5	- as you know, the Board will implement write
6	and implement regulations based on the statute
7	that we are that the enabling statute.
8	MR. BELLAMY: We appreciate that.
9	Thank you.
10	CHAIRPERSON ANDERSON: All right.
11	Thank you.
12	Any questions by any Board members of
13	this panel? Yes, Mr. Grandis.
14	MEMBER GRANDIS: Thank you. Ms is
15	it Ms I'm not having your name. What's your
16	name, ma'am?
17	MS. MANNS: Ms. Manns, Mackenzie
18	Manns.
19	MEMBER GRANDIS: Mackenzie. Okay. I
20	see it here. Thank you. I want to thank you for
21	your excellent presentation today, and, you know,
22	we had sort of a discussion about having a formal
23	advisory board. I think what we're doing this
24	morning is an advisory board, and you all have
25	really you and the other panelists have really

enlightened me, and I'm sure other Board members, with your very thoughtful and good life experiences to help us frame a good program.

I have some -- I have some challenge of the idea of going down a ladder for social equity to the point of, let's say, being in a disadvantaged area, because -- because of life's circumstances, I have been blessed. I have had opportunities.

But I also could be living in a disadvantaged area, and I don't -- I don't think that -- I have a hard time seeing if in fact where I may be living would let me overstep someone who truly is who we are looking for through our council and through our agency of really helping people who, you know, have been wrongly arrested, who have had challenges of not having the economic opportunities that other of us have had.

So do you all have any thoughts that you all can provide after this hearing on why we should look at perhaps this -- the fact of living in a disadvantaged area? Because I worked many years on trying to be successful with the residents of Anacostia to have the Anacostia bid,

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and the whole idea was to try to bring economic opportunity to the small businesspeople who had been there for generations but needed help through regulation to promote their neighborhood so that people wouldn't have to get in a bus or metro to find a grocery store or other type of thing.

So I really support the whole methodology of trying to find different levels on how we get to the right people, but maybe after this hearing you could help me, because with -- with the idea of living somewhere, because I don't know if that really is a way to parse this economic opportunity, this social equity.

Thank you.

CHAIRPERSON ANDERSON: Go ahead.

MS. MANNS: I'll just follow up briefly that I completely agree. I think that there is an opportunity for people to use that qualification in a way that the spirit of the law and what we are trying to achieve is not, you know, what we want.

What I would say is that it wouldn't just be that qualification. We would pare together multiple qualifications, so that you're

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not just having lived in a disadvantaged area, but you also potentially attended a public school in a disadvantaged area or, you know, like we have right now, you need less than 150 percent of the median income. So we would definitely work on paring together qualifications so that it cannot be abused by people who the law is not intended for.

MR. BELLAMY: Perfect answer.

MEMBER GRANDIS: Thank you.

Mr. Chairman, thank you.

CHAIRPERSON ANDERSON: All right.

Thank you, Mr. Grandis.

I would like to thank you for your presentation today. And, again, you can send written comments. Your written -- your written testimony can be provided to the agency on or before June 21st. All right?

MR. BELLAMY: Mr. Chairman, thank you for that. And we do recognize that it is a legislative fix, but we are also encouraging you as well to use your authority and influence as well, and flexibility as well, to review some of this on our -- you know, in support of what we are just trying to say.

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1	So I do we do understand. We are
2	going to go the council the council route.
3	But I think, you know, there is also a role that
4	you and the staff at ABCA can play as well.
5	CHAIRPERSON ANDERSON: All right.
6	Thank you very much for your testimony today.
7	MR. BELLAMY: Thank you.
8	CHAIRPERSON ANDERSON: Have a great
9	day.
10	MR. BELLAMY: You, too, sir. Thank
11	you.
12	CHAIRPERSON ANDERSON: All right.
13	All right. The next panel that we're
14	going to call is Matt Lawson-Baker, David A.
15	Moore, Robin Walker Salas, and Norbert Pickett.
16	Hold on one minute, please. Hold on one minute.
17	Just want to make sure everyone is all the
18	names I called that they are elevated and we'll
19	start.
20	MR. ORELLANA: I believe I got them
21	all, Chairman.
22	CHAIRPERSON ANDERSON: All right.
23	Thank you, sir.
24	All right. So let's start off with
25	Matt Lawson-Baker from Alternative Solutions.

Please identify yourself for the record, and then I'll turn the timer on.

MR. LAWSON-BAKER: Yeah. Good afternoon, Board. It's Matt Lawson-Baker here.

I'm the President of Alternative Solutions' cultivation facility and D.C.'s finest.

We have been operating since 2015,

January of 2015 in the existing medical cannabis

market. And I appreciate all your work that

you've done for these new regulations, and

looking forward to them being implemented.

Today the major point that I want to bring up -- and it's to reinforce what has also already been raised previously by some of the operators -- is based on the limits that are being restricted on concentrates again.

I want to give you some perspective from the supply line, impacts that that will have. Right now we are talking about reducing the concentrate monthly limit to less than five percent of what it is currently. This is going to have a big impact on the market as a whole, but also this -- the expansion that is proposed with this legislation.

Right now the current operators are

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obviously going to be able to easily provide enough products to that marketplace, and they will also be expanding product lines to be able to make sure that we can get as much product biomass extracted and turned into concentrate products.

So this will impact the new manufacturing license holders coming into the market as the current operators will be -- you know, will be utilizing most of that product. So when we're talking about trying to expand the market and provide more opportunities in the D.C. market, this is actually doing the opposite.

All of the points that were raised previously based on how this affects the patients, I want to reinforce those as well. A lot of patients relying on these products and they have been using them for many years now. And once you reduce this limit, it's going to have a big impact on them gaining access to their medicine and their treatments.

So that's the major point that I wanted to bring up for today. Thank you.

CHAIRPERSON ANDERSON: All right.

Thank you, Mr. Baker.

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1 All right. Okay. So let's have 2 Mr. Pickett. MR. PICKETT: Hello. Good afternoon, 3 4 everybody. 5 CHAIRPERSON ANDERSON: Good afternoon, sir. 6 7 MR. PICKETT: Thank you, ABCA, 8 Chairman Anderson, Executive Director Moosally, 9 and the ABCA Board, for allowing me to add my voice to this discussion. Also, congratulations 10 11 to ABCA, the City Council, Mayor Bowser, Chairman 12 Anderson, Executive Director Moosally, and all 13 the licensed operators who worked so hard and 14 tirelessly on adopting and passing the State 15 Cannabis Act. 16 I believe it helps advance the 17 industry, and it's a good bill. So thank you for 18 all that -- all those that participated on that. 19 It wasn't easy. 20 My name is Norbert Pickett, and I'm 21 the owner of Cannabliss, the seventh medical 2.2 cannabis dispensary to come online located in 23 Deanwood in Ward 7, in a predominantly 2.4 disadvantaged and developing neighborhood east of

the river.

Currently, we are the only solely black-owned medical cannabis dispensary that is unionized in the United States, unionizing with the UFCW Local 400.

There are two issues I would like to spotlight this afternoon, one being the ending of the sliding scale discount regulation and the second issue the 30-day concentrate limits I know that we've all been addressing earlier on in this hearing.

I am uniquely qualified to speak on both issues. The original cannabis legislation provides for a sliding scale discount of so-called red box sales of 20 percent discount to economically challenged patients.

The regulation is outdated because the price of cannabis has declined significantly since the regulation was created and is no longer needed because the price of cannabis has gone down more than the discount. Let me repeat that one more time. The price of cannabis has gone down more than the discount.

In the beginning of the program, there was a plant count and lack of supply. Therefore, prices were high, around \$25 to \$28 per gram.

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With the plant count cap removed, and with more supply, the price per gram has been reduced to \$7 to \$9 per gram. And discounts are often on other products as well that the red box patient can take advantage of. So the regulation is no longer needed or relevant to the affordability for the patient.

We fought to bring down prices, and they have been reduced over 300 percent. The discount accounts for over \$1,351,239.80 in loss of revenue for Cannabliss since we opened in 2019. \$1,351.239.80 of lost revenue for a new business.

Soon there will be 1.5 million, then 2 million, then 2.5 million. When will the bleeding stop? How much more can the small solely black-owned business sustain for it not to be in the red?

I financed this business by myself with my own money. If this regulation is eliminated, the business can pay off its debts. If the regulation continues to exist, the business will be in debt.

Fifty percent profit automatically gets reduced to 30 percent profit, then gets

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further reduced to zero percent profit after we pay for labor, income tax, unemployment tax, payroll tax, tax 280E, paid leave, workman's comp insurance, product liability insurance, legal, accounting, payroll, rent, electric bill, water bill, advertising, Dutchie, which is a POS system, POS banking fees, metric monthly fee, yearly licensing fees, packaging and labels, various government agency fees, employee badge --badges, background checks, and other expenses that are paid, none of which the illegals pay. Let me repeat that one more time. None of these illegals pay any of these costs.

The social equity problem and policy solution falls on dispensaries alone. As a matter of equal responsibility and spreading the financial burden of shared cost and shared benefit of this social program, cultivators should share equally in the financial impact.

Secondly, a disproportionate responsibility falls on those dispensaries located in poorer neighborhoods east of the river. In addition, no effort is made to maintain records of changing income by patients. Patients who are qualified are not reevaluated or

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requalified on any periodic basis.

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Therefore, many patients who have become employed are still taking advantage of a program they should not qualify for. We would suggest that D.C. follow the lead of other jurisdictions that provide certain products at a steep discount for patients who cannot be able to afford top shelf products. That could come in the form of what is known as flower, shake, and lower THC level tinctures, et cetera.

Those products should be provided at a discount to dispensaries and further discounted by the dispensaries and set aside for lower income patients. A sliding scale of discount for designated generic rather than top shelf products that parallel various levels of need could also be instituted.

The current system is racially discriminatory against black owners operating in black neighborhoods and doesn't spread the financial burden among those in the line of production and provision of cannabis.

CHAIRPERSON ANDERSON: All right.

Mr. Pickett, you've exceeded your five minutes.

Please submit -- please submit your written

1 testimony to the agency, so we can further 2 explore your position, sir. Okay? 3 MR. PICKETT: Thank you, Chairman Anderson. I submitted it this morning at 10:30. 4 5 Thank you. CHAIRPERSON ANDERSON: 6 All right. 7 Thank you. I haven't seen it because I've been 8 on this hearing, but I look forward to further 9 reviewing it. 10 So let's have -- all right. Okay. 11 It's the Robin Walker Salas, and that's in the --12 yeah. 13 MS. SALAS: Good afternoon. 14 CHAIRPERSON ANDERSON: Good afternoon. 15 MS. SALAS: Robin Walker Salas. Τ 16 represent a fringe demographic with Wounded Warriors Behind Bars. 17 18 As a patient and advocate, I've got to say I have never heard the word -- or heard it 19 20 mentioned today about education, and I believe 21 that the people are uneducated. Now when you're 2.2 talking about limiting the amount, like for 23 myself, I have user error. 2.4 So when I get RSO or concentrates, and 25 I'm not sure how to use it, I'm wasting a lot of

product. Or if I get a strain of cannabis that I am familiar with and it doesn't react well with me, then I have excess and I have to find a way to get rid of it. So there's a lot of hit and miss that goes into the amounts that are allowed, and also the education part of it.

Now, I personally feel that a peer review type of situation, like a Mayor's Office of Cannabis Culture, where if people are willing to register to say, "Hey, I can help you learn about cannabis and help you through the process," and we make it so that we're supporting each other.

We're Americans. Nobody should be discriminated against. As a veteran and all of these other things, I think that there needs to be -- for things that are equitable all the way across the board, and education should be one of the things they put in as far as being able to obtain anything when it comes to cannabis or cannabis products, because miseducation creates a lot of issues.

CHAIRPERSON ANDERSON: Let's see if -is that the end of your testimony, ma'am?

MS. SALAS: I believe so. I really

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1	feel that we should have more community supported
2	type of cannabis culture and cannabis industry
3	geared towards that, because if we're going to
4	keep each other in check it's a lot easier than
5	if we have to have a government person that has
6	to do all of that all the time. Does that make
7	sense?
8	CHAIRPERSON ANDERSON: Thank you for
9	your testimony, ma'am. All right.
10	MS. SALAS: Okay. Thank you.
11	CHAIRPERSON ANDERSON: Any questions?
12	Any questions by any Board members of any of the
13	witnesses?
14	MEMBER GRANDIS: Mr. Chairman?
15	CHAIRPERSON ANDERSON: Go ahead,
16	Mr. Grandis.
17	MEMBER GRANDIS: Ms is it Ms.
18	Walker? Ms. Salas?
19	MS. SALAS: Yes. Ms. Salas, Robin, B-
20	O-B-I-N like the bird, Salas, S-A-L-A-S, same
21	backwards as forwards.
22	MEMBER GRANDIS: Thank you. I find
23	your information very interesting. So enlighten
24	me. If you go to a D.C. dispensary, is it is
25	there someone there, or would that be a place

1 that people who need information and guidance on 2 dosage or the difference of the different strands, would that be a place to get that 3 information? If it's not now --4 5 MS. SALAS: Well, it's --6 MEMBER GRANDIS: -- is that something 7 -- help me with --8 MS. SALAS: It's my --9 MEMBER GRANDIS: -- where would you 10 think -- yeah, go ahead. 11 MS. SALAS: It's my understanding they 12 call them bud tenders. But as medical cannabis, 13 they're not really allowed to expand upon any 14 kind of information. And when it comes to the 15 different strains and the effects, not everyone 16 is educated on all of everything. That's just 17 too much to learn from one person. 18 And I don't think it's the bud 19 tenders' job to recommend one way or the other. 20 Now, maybe they can enlighten, say it's a sative 21 versus an indica, but if a patient doesn't know the difference between the two, or how to use the 2.2 23 different kinds of concentrates -- go ahead. 2.4 MEMBER GRANDIS: No, no. I'm 25 listening. I -- this is very enlightening to me

because I -- I wasn't tuned into the concern you're raising which is a very, very important concern. So it's just where would we -- you know, if we follow the line of trying to come up with policy regarding to meet the concern you have, where would we place this type of person?

It's just -- we want to help. You know, I think what your concern is, it's very important for us to be aware of and figure out if our Board is the place with the agency to come up with a solution. Do you have a suggestion?

MS. SALAS: Again, theoretically, the doctors are supposed to be the ones prescribing. But, unfortunately, the doctors don't know as much as, say, the growers or the dispensary or someone who has been in the industry for a while. I don't see any kind of screening for educational of whether a person knows what they are actually obtaining and how to use it. That has been my problem. I have obtained things and not know how to use it or it's not the right product, or whatever like that.

And then I've seen the amount I'm supposed to have in possession, because I'm not using that and it's just there until I see my

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1	friend or something, you know?
2	MEMBER GRANDIS: Thank you. And we
3	will we will discuss this issue. I want to
4	thank you for bringing it to our attention.
5	MS. SALAS: I really would like the
6	idea of the Mayor's Office of Cannabis Culture.
7	We have all kinds of mayor's offices of all kinds
8	of things, but cannabis culture exceeds past sex,
9	race, or any of that stuff. Cannabis culture is
LO	just cannabis culture.
L1	MEMBER GRANDIS: Well, thank you.
L2	Is Mr. Norbert still available?
L3	Mr. Norbert? I guess not.
L4	Mr. Chairman, I'm fine. Mr. Norbert
L5	may not be available. Thank you. Thank you,
L6	Mr. Chairman.
L7	CHAIRPERSON ANDERSON: All right.
8	Thank you, Mr. Grandis.
L9	All right. If there are no other
20	questions, then we're going to dispense with this
21	with this panel, and we're going to move on to
22	another panel.
23	The next panel we're going to move
24	onto, it's Jen Brunenkant, Michael Bobo, Chad
) 5	From and Vwette Alexander

1	MR. ORELLANA: One second, Chairman.
2	Apologies, Chairman. Did you include Linda
3	Green?
4	CHAIRPERSON ANDERSON: She's not
5	testifying. She is not available. I had gotten
6	a notation that she was not available to testify.
7	That's why I didn't call her name.
8	MR. ORELLANA: Okay. Thanks.
9	CHAIRPERSON ANDERSON: I'm sorry. And
10	Michael Bobo. He is not testifying, too. So
11	right. So let me so it's I'm sorry. So
12	it's it's Jen Brunenkant, Chad Frey, and
13	Yvette Alexander.
14	Are any of those I saw I thought
15	I saw a chat note from Ms
16	MR. ORELLANA: Yeah. I'm not even
17	seeing oh, I see her now. I believe that's
18	the only one present.
19	CHAIRPERSON ANDERSON: All right. So
20	all right. Well, if Yvette why don't you
21	then elevate Saurabh Paul, Brittany Carver, Ange
22	Priko, and Olivia Persons. See if see if
23	those folks are still online.
24	So it's Jen Brunenkant, B-U-N-K-E-N-A-
25	R A-N-T, Chad Frey. I see Ms. Alexander.

1 Either Mr. or Ms. Paul, Ms. Carver, Ms. Priko, P-2 I-R-K-O, and Ms. Persons. 3 MR. ORELLANA: It appears that only Yvette Alexander is the one present. 4 5 CHAIRPERSON ANDERSON: All right. What about Gretchen Kolsky, K-O-L-S-K-Y, Leila 6 7 Lewis, and Chloe Kruger? MR. ORELLANA: I have elevated only 8 9 the ones present. 10 CHAIRPERSON ANDERSON: All right. 11 So we'll -- all right. And, 12 Ms. Alexander, you only have five minutes. 13 now because I have called all of these folks, and 14 they are -- they are not around that you're going 15 to think that you can speak -- use their time. 16 Okay, Ms. Alexander? 17 I am -- I am now in a position to cut 18 your time off. Remember, you used to be in that 19 position where you would tell them that they have 20 three minutes to speak and that's all. 21 have -- all right? I am having some levity with 2.2 this. 23 All right. Ms. -- all right. 2.4 Ms. Alexander, can you please spell and state 25 your name for the record, please? And you have

1	five minutes. I'll start the timer once you have
2	identified yourself.
3	MS. ALEXANDER: Thank you. If I might
4	if you indulge me, Norbert Pickett I think
5	someone had a question for him. He said he was
6	available to answer that question.
7	CHAIRPERSON ANDERSON: I don't think
8	I think Mr. Grandis had moved on. So so
9	that's that. All right. Fine. I
10	MS. ALEXANDER: Okay.
11	CHAIRPERSON ANDERSON: he can put
12	something. So please identify yourself for the
13	record, please.
14	MS. ALEXANDER: Thank you. Yvette, Y-
15	V-E-T-T-E, Alexander, A-L-E-X-A-N-D-E-R. I'm a
16	consultant for the D.C. Cannabis Trade
17	Association.
18	CHAIRPERSON ANDERSON: Go ahead,
19	ma'am. All right.
20	MS. ALEXANDER: Thank you. Greetings,
21	Chairman Anderson and members of the Board. I
22	see also my neighbor and friend, James Short
23	there, too. Hello, all the Board members. So
24	glad that you allow me this testimony.
25	As stated, I'm Yvette Alexander, and

I'm representing the District of Columbia

Cannabis Trade Association. The Association was formed to improve access for patients in our city's medical cannabis program. The members represent the licensed medical cannabis cultivation centers and dispensaries in Washington, D.C.

The association would like to thank you all for your work and commitment to the medical cannabis program, and we look forward to your continued support. We have several recommendations for your consideration regarding the proposed rulemaking to implement the Medical Cannabis Amendment Act of 2022.

We are pleased with the law that allows for the out-of-state self-certification -- for the self-certification. But a reduction in the fees charged are necessary for the licensed medical dispensaries to remain competitive and give patients an incentive to purchase safe, legal, and tested products.

Currently the fee is \$30, as you know, and that has really caused a burden to our dispensaries. There is a recommended structure program that we have -- we have discussed with

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the agency. We think the \$30 for just the 30 days is too much, and it has caused a problem for those patients to go to maybe an illegal place to purchase that doesn't require that.

So we have a fee schedule, and I will present written testimony. Say, for example, \$5 to \$10 for 30 day, and then as you extend, maybe \$15 for 45 day, and \$30 would allow two to three months or more for a patient to purchase cannabis.

And we also have to keep in mind that I think someone stated July 1st Maryland will open up its recreational program, and currently they are -- Maryland is issuing medical cards I believe for up to six years for \$25.

So we know those are neighbors right across the border, and they -- patients can easily go there. So we want to maintain our competitiveness in the District of Columbia.

Also, the sliding scale, which mandates a 20 percent discount to low income patients -- and I believe that was mentioned as discriminatory in a previous testimony. But the sliding scale is taken from the revenue of the dispensaries with no tax credits or

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reimbursements from the city. And this impacts the financial means, which to succeed -- and it has an unintended economic impact on those who are currently undercapitalized and work in undercapitalized communities, for example, Ward 7 and Ward 8. They are being unfairly -- unfairly targeted for this sliding scale.

And with that, we also recommend to eliminate the sliding scale report. The metric system currently tracks from seed to sale, so that report is not leaked -- is needed.

With the passing of the recent legislation, there will be opportunities we know for more businesses to obtain their medical license. However, we do think it is very important before these licenses are issued that there would be a supply and demand study conducted by ABCA, because we need to know the amount of dispensaries and the amount of cultivators that are needed per capita of the persons who will participate in the program.

Right now, there is a burden with supply and demand with the existing cultivators and dispensaries. So to add more to that, we really need a study to capture the amount that is

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really needed for our market, for our cannabis -our medical cannabis program to continue to
thrive in the District of Columbia.

We don't want to limit -- we don't want to discourage i-71s, but we know that there can't be a come one come all with the amount of the operators that are currently in the District of Columbia. So we really need to do a study, and we need to have some solid way that you can -- you know, that the Board is going to present or that the agency is going to issue new license for that.

It was mentioned earlier about the concentrates that we really need to increase the amount of concentrates for some of our patients that require higher doses -- higher dosages of cannabis that don't opt to vape or smoke flower product. So we would really need to increase that, and the recommendation would be up to eight grams per day for concentrates for our medical patients.

And I believe Takoma Wellness did -said that in detail, so I won't prolong that
again for that, but I will present that written
testimony.

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1	And the other concern would be the
2	internet retailers. I know that that was a part
3	of the Medical Marijuana Amendment Act, and we
4	really need to know how we're going to regulate
5	those internet retailers. It's recommended that
6	the internet retailers would only be issued
7	that license would only be issued to those
8	businesses that already have a brick and mortar
9	business, because that can be regulated.
10	Other than that, the internet
11	retailers are no more than a delivery service.
12	So
13	CHAIRPERSON ANDERSON: All right. All
14	right, Ms. Alexander. I gave you I gave you
15	six minutes, so I have to
16	MS. ALEXANDER: Is that all? My God,
17	that went by fast.
18	CHAIRPERSON ANDERSON: Yes. I did
19	give you an additional minute, but so please
20	submit your written testimony and
21	MS. ALEXANDER: Will do. And I am
22	open to any questions that you may ask, but it
23	really is important that we're not saying delay
24	the license for new businesses, but we are saying
25	that there needs to be a study to see how many

1 new businesses are going to come on board in the 2 D.C. market. 3 CHAIRPERSON ANDERSON: All right. 4 Thank you, ma'am. 5 Now, Ms. Leila Lewis, I see that 6 you're here. Ms. Lewis? Ms. Lewis, can you 7 unmute yourself, ma'am? Ms. Lewis? Mr. Orellana, I see Ms. Lewis online. 8 9 I'm not sure what is going on with MR. ORELLANA: I sent her a request to 10 11 I'll reach out to her. unmute. 12 CHAIRPERSON ANDERSON: Okay. Thank 13 you. 14 While we're waiting for Ms. Lewis to 15 unmute to be unmuted, Ms. Alexander, is there 16 anything else you want to say until Ms. Lewis 17 comes -- I'm trying to -- Ms. Lewis is online and 18 I'm trying to have her speak, so while we're 19 waiting, I'll -- you can speak until she -- if 20 you so desire. 21 MS. ALEXANDER: Thank you. I cannot 2.2 stress enough for the 30-day fee for the self-23 certification. That has really hindered a lot of 2.4 our businesses because people can opt to go to an 25 i-71 or to these illegals and they don't have any

fee charged.

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So, you know, we want to -- like was said previously, that these are the businesses that have invested in the city, that pay taxes in the city, that abide by all the laws and regulations in the city, and they have weathered a storm.

So we would like to see that same, you know, deference given to them that we have invested in the city that, you know, you make it as -- you know, as easy for them to do their business as possible without all of these restrictions and things that get in the way of them to be successful.

They really, believe it or not, have not made quite the profits that people believe they have made for all of the regulation and all of the fees that they paid.

I would even recommend for the i-71s that I do truly believe that some of them want to become a legal medical cannabis business, that they could start doing some of the things that the legal businesses are doing.

They could start paying the taxes on their cannabis sales. They could start paying

fees. They could start taking -- you know, going through the metric system and the regulations that they need to once they enter -- once they enter the legal business. I mean, they really need to -- I think ABCA really needs to take into consideration those that are serious about this and really let them know what it is actually like to conduct a legal -- legally licensed medical cannabis business in the District of Columbia.

CHAIRPERSON ANDERSON: Thank you,
Ms. Alexander.

Ms. Lewis is having some issues, so she stated that she will email her testimony.

So thank you for your testimony, Ms. Alexander.

And, Ms. Lewis, I look forward to your testimony. It's abca.legal@dc.gov. And please email that to us prior to June 21st.

It appears that you have a question you want to ask Mr. -- and I'm trying to move on because I'm trying not to take a break. I want to -- I know that I have about 11 more people to testify, and I want to see if I can move through all of those witnesses before taking a break for the Board, since we have been here since 9:30.

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So go ahead, Mr. Short. You're on mute, Mr. Short.

MEMBER SHORT: Good afternoon, Council Member Yvette Alexander. I'd just like to say -- ask you if you would elaborate just a little more on the out-of-state fees, and how do you think that reducing them or otherwise working to make it better for the public -- what are your suggestions dealing with the out-of-state \$30 30 days?

MS. ALEXANDER: Thank you for asking that. Once again, I think the recommendation would be a lower fee. We realize that, you know, I mean, through fees that would be the way that your agency -- the agency makes money. I mean, you have staff and you have things that you need to support for that.

So we know that there is a fiscal impact involved in anything that there is a cost attached to. But for -- when you compare to -- to residents who are out of state being able to walk in other places without any fee whatsoever for purchase.

When you look at that competition, it would really be fair to say no more than \$5 to

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\$10 for a fee for someone to just come in and get that, you know, and self-certify or for the out-of-state self-certification. That would make sense, that if I was coming in, you're already going to have to purchase the cannabis. So for that time, you know, that may be a one-time purchase for someone, that a \$30 fee on that is way too high.

So it would be fair, \$5 to \$10 for 30 day. And then, as the time increases for your ability to purchase, then the cost would increase, say \$15 for a 30 day, and \$30 could be for three months to fix months. It would be a graduated fee

MEMBER SHORT: Thank you.

MS. ALEXANDER: -- depending on

MEMBER SHORT: Now, I'd also like for you to, if you could, to elaborate on the increase in oil, of the increased dosage. We heard testimony about that today.

MS. ALEXANDER: Now, I'm not an expert on that the way that the dispensaries actually are, but pretty much the increase -- you would need more for a concentrate than you would need for the flower product than a person may vape or

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smoke. That could -- that's a larger quantity.

But for the concentrates, you would

need -- well, I'm saying that's a smaller

quantity compared to the concentrates. For -- I

would say, for example, for eight ounces of flower, you may need, you know, two or three

7 times that for a concentrate, if not more.

So the eight ounces of flower does not equate to eight ounces of a concentrate. You would need more of a concentrate to get that same effect. So we're saying do not limit the amount of concentrate, because persons would need more. They're taking -- there is more of an amount that you need for a concentrate to be as effective as that same amount of a flower product pretty much.

And some people don't opt to smoke.

Some people opt to have oils or tinctures or suppositories, whatever, other -- other means to medicate themselves. So you would need a higher dosage of that -- of that particular product.

MEMBER SHORT: I do thank you very much for your testimony. It has been quite compelling.

That's all I have, Mr. Chair. Thank you very much.

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CHAIRPERSON ANDERSON: All right. Thank you.

All right. I'm going to move on to another panel, all right, since I was told that I believe that the numbers have -- so I was told these are the people -- so, Mr. Orellana, can you please elevate -- since you've told me these are the folks online -- Barbara Biddle, Terrence White, Steven Slaughter, Darel Dawson, and Chris -- is it Chris C? I'm not sure if that person -- I'm looking at my list, and I don't see the last name. But can you elevate all those folks?

And after Mr. Orellana has elevated the names I just called, if there is anyone else online who wants to testify, can you please identify yourself in the chat, and I will have you elevated after this panel is done.

So I think this is the last panel of people who have informed us that they want to testify. So if there is anyone else online who would like to testify, please identify yourself in the chat, and then we will elevate you for the next -- the next and final panel. Okay?

Mr. Orellana, is this everyone that -- is this everyone that was on your list?

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MR. ORELLANA: Yes. Apologies. This is everyone.

CHAIRPERSON ANDERSON: All right.

Fine. So let's go on with -- let's start with

Ms. Barbara Biddle. Can you please identify
yourself for the record, please? And then after
you have identified yourself, you'll have five
minutes.

MS. BIDDLE: Okay. My name is Barbara Biddle. I'm the owner and founder of District Hemp Botanicals. I'm also the Board member of the Virginia Hemp Coalition and a member of the i-71 Committee.

I want to start off by saying that I appreciate the opportunity to provide my thoughts and concerns as a small business owner and local community member, and how the incoming changes to the medical program will impact the industry's or the District's industry.

I personally came across CBD, the non-intoxicating compound found in the cannabis plant while battling depression-like symptoms after the birth of my first son, and I've watched thousands of customers have life-changing benefits from these products since opening my

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first store in 2017.

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As an owner of a hemp retail business, it's critically important to maintain access for not only my customers but myself, and I'd like to offer a unique perspective on the situations that have arisen in Virginia when it comes to the regulation of marijuana and hemp. Many businesses will not be able to comply with the regulations proposed by the new medical regulations.

As businesses start to seek a safe haven once loopholes from the i-71 industry close, many will inevitably -- or inevitably continue operations under the black market while others may try to move into the legal hemp industry.

In an effort to be preemptive and create an environment where small businesses can flourish under the legal conditions created by federal law while upholding safety standards, I ask you to consider a few things.

One, clarifying the legality of hemp-derived food products and regulating the production, processing, manufacturing, and sale of industrial hemp products. Business owners and

consumers alike want to ensure safe and reliable access to therapeutic hemp products, and there has been concerning comments made by local industries or agencies that challenge the ability of business owners that provide federally legal hemp-derived CBD products to their consumers.

Part of facilitating reliable and safe access includes clearly defining that hemp-derived products, separate from marijuana products, are legal and implementing reasonable regulation on ingestible and smokable hemp products, and creating a clear path for businesses and consumers alike to navigate the space.

Requirements on packaging, labeling, testing, and age restrictions can help ensure that D.C. residents and visitors can acquire reliable products that contain the amounts of cannabis that's marketed on the label and gives city officials peace of mind when it comes to the safety of these products.

Explicitly allowing dispensaries to provide hemp products in waiting rooms without the regulatory and tax burdens found in the marijuana industry can also help alleviate some

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concerns. Not only could this help alleviate supply concerns as the lines between hemp and marijuana become less distinct with the proliferation of federally legal hemp-derived THC products, but it can also help with demand for dispensaries, since concerns around patient tracking is a huge barrier for residents and tourists alike that prefer shopping with hemp providers or on the block market.

Adding hemp retail growing,
manufacturing, and processing license into the
new licensing structure can also help things.
Examples to review include regulatory models
implemented in Tennessee and South Carolina that
utilize commonsense guardrails without decimating
small businesses in the industry.

Things to consider would be allowing open licensing and capping licensing costs at \$500 for CBD-specific businesses. This will allow the industry to still remain competitive and allow small businesses to operate in the space.

Three, protecting the craft industry.

Some of the most amazing products are made in small batches by local producers. It's important

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to allow this market to thrive and flourish and perhaps follow New York's lead by allowing sales at farmer's markets and pop-up markets. These small producers are driven by passion and the need to help others, and this instills genuine creativity and boundless innovation unrivaled by most other industries.

I fear some of the licensing requirements may be prohibitive to those in the space, and careful considerations need to be made as to whether licensing costs and location parameters can be changed to allow them to continue to compete.

In regards to the process of rewarding licensing, I highly encourage you to postpone the issuance of licensing for medical retail locations until there are sufficient amounts of supply to handle the demand. I also recommend you consider tenuring your licensing approval criteria.

Creating a first-come first-served process will create dangerous situations for business owners in highly concentrated operating areas. Desperate times call for desperate measures. And many of these business owners will

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1 have nothing to lose and may utilize aggressive 2 tactics to discourage competitors from applying. Currently, there is no urgent safety 3 issues regarding hemp products in the District, 4 5 but it's my intention to think ahead before a large proliferation of businesses enter the 6 7 market and potentially change the integrity of 8 the market. 9 Without taking preemptive action, I watched things spiral fast in Virginia, and I'd 10 11 like D.C. to learn from the mistakes of our 12 neighboring state. 13 Thank you so much for your time. 14 CHAIRPERSON ANDERSON: Thank you, 15 Ms. Biddle. 16 Mr. White, are you there? Terrence You're on mute, Mr. White. Unmute 17 White? 18 yourself, please. Mr. White, you have to unmute 19 yourself. I cannot hear you, sir. 20 Sorry about that. MR. WHITE: Oh. 21 CHAIRPERSON ANDERSON: All right. 2.2 ahead, sir. 23 MR. WHITE: Good afternoon, 2.4 Mr. Chairman, and Board members. Thank you for 25 this opportunity to speak with you.

I am Terrence White. I am the Chairman of the i-71 Committee going on a year now, and today I come before you with a couple of issues that I need for your consideration.

Number one is cultivation and the lack of cultivation. Currently, the District has eight cultivators, which five are online. Right now up to year to date we're talking over -- roughly over 2,000 pounds of cannabis have been grown and processed and sold in the medical aspect.

That is equivalent to about 88,000 square feet of cannabis, which if you're asking another 25 to 30, i-71 or first-come first-served people to get into this particular market, that is going to allow a big issue with lack of cannabis.

So today what I'd like to do is present a couple of things that, as we are asking for your consideration, to take that up for consideration, is thinking about how we plan on moving forward and not being like states like New Jersey and Illinois as it pertains to cannabis.

If we roll out the current legislation, we're going to be right back where

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we are with a huge illicit black market, because the problem will always lie there is not enough cannabis being grown.

And so, therefore, I ask that you think about this very seriously. How do we tackle this matter? And that matter is -- basically comes down to this. We've got 8.8 square miles, 800,000 people, that we serve here in the District. But we also have to think about the 31 million people that visit the District on a year-to-year basis or, if not more now after post-COVID.

So, therefore, we have to look at how we plan on tackling this issue with also bringing along a new 25 to 30 licenses as proposed. And it could even be more.

So, therefore, I ask that you think about this very seriously, because if we don't halt the licenses that we're -- that we're asking about and tackle the cultivation side, there will be a bigger problem, and that problem will go back to day one. The lack of cannabis being grown and the amount of licenses will never be created equally.

And so, therefore, my testimony today

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is based on fact. And as someone that's in the market, as you guys say illicit, i-71, I can tell you 2,000 pounds of cannabis year to date, and here we are, you have eight medical dispensaries just doing 2,000 pounds, and you're asking for another 30 to 40 licenses to come aboard, it's going to create a massive problem, got a massive interception. And that's one of the things that I really wanted to speak about.

The other part of my testimony is, as we ask these license -- or these licensees to come aboard, we are not giving them the ample opportunity to serve their business properly.

And what I mean by that is currently your eight medical dispensaries, they're not able to advertise and market a business as any such other business.

If we look at cities like Los Angeles, states like Colorado -- let's just go state to state -- New York, California. Canada's owners are able to express themselves and also able to market their businesses as such.

Here we're at -- we're basically handcuffed. And so when you ask these businesses to come aboard, if they can't do print, if they

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1 can't market, if they can't do proper social 2 media and other advertising and marketing strategies, like SEO, SOLV, those type things, in 3 order to win, it's going to be -- it's not going 4 5 to be fair, because some of these businesses have 6 already been in business eight and ten years, if 7 not more. 8 So now you're asking a new business to 9 come and compete in a market with no 10

come and compete in a market with no advertisement or marketing. So that's something else that's critical, that's important to the i-71 Committee, and also important -- should be important to the District. If we want to maximize the \$650 million potential in this market, we have to be able to allow everyone with the essential tools, and that's pretty much my testimony today.

CHAIRPERSON ANDERSON: Thank you, Mr. White.

So Mr. Slaughter, please. Please identify yourself for the record.

MR. SLAUGHTER: Sure. My name is Steven Slaughter, spelled S-T-E-V-E-N S-L-A-U-G-H-T-E-R.

Good afternoon, members of the Board.

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My name is Steve Slaughter. I'm the Vice

President for the i-71 Committee, and I just

wanted to express the gratitude for the

opportunity to speak today. I hope every

business owner here was heard today throughout

this sentiment, obviously for the betterment of

the industry.

I'm here today to express basically -my testimony today is to speak on behalf of
basically some of what Yvette said earlier as
well as what Terrence just said prior to -Terrence White who spoke to me prior, which is
that basically in our industry at its current
state that there should be a survey or there
should be something done to understand what's
going on in the market when we have these new
licensees come on board from the initiative-71
markets as well as the sociable, equitable
applicants who come on board as well.

I think there is going to be a huge problem when it comes to that, just in the sense that we have the cultivation centers' data currently representing the same eight legal cannabis dispensaries right now, and we have a bunch of new people who are going to come on

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board in the next year. And essentially there is an imbalance that is going to take place.

And I don't want to speak so much to that, because I think it has already been spoken to, but I also think that this is going to be a huge problem when it comes to the capital for these new businesses that come on board.

In some instances, we have -- and you mentioned it earlier -- where we have businesses that will have to shut down during a certain timeframe while they wait to come on board to get their license.

And, in some cases, not having the ability to do marketing and not being able to function as a business during this timeframe, after, you know, the sunrise period has ended, I think it causes a lot of problems, and it sets new small businesses up -- that are coming into this industry up for failure in a sense, because essentially you are asking new businesses to start off and have a certain amount of capital without operating or being able to function their business for a set period of time while they wait to find out if there's a decision on if they can actually get their licensing or not.

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And I think that's going to cause a huge problem, especially for applicants who are coming on board who take -- the sociable, equitable route to come on board, it's going to cause a problem there, because we already have problems at our banking system with the SAFE Banking Act, which doesn't allow for businesses to participate fully in the banking system.

Myself, I have a -- what you would call an auxiliary business in the cannabis space as we speak. And even for me, I find that financing and things like that can be challenging as I bring my business on board.

And I think it causes a huge problem because if you're talking about things like merchant services, you know, processes, which these new businesses will have to set up when they come on board, there's not a lot of big banks or not a lot of financial institutions that are able to help these new businesses out.

And I think that's going to cause a problem as well, and I just think that that's something that should be looked at, because there is going to be a period, even for i-71 companies who are able to transition into this new market

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1	where they will have to shut down and there will
2	not be, you know, the same amount of financing or
3	funding coming in to allow them to be successful
4	in this new market.
5	And so that's pretty much my testimony
6	for today.
7	CHAIRPERSON ANDERSON: All right.
8	Thank you very much, Mr. Slaughter.
9	And so let's have Mr. Dawson, please.
10	Mr. Dawson, please state your name for the
11	record, and then I'll turn the timer on.
12	MR. DAWSON: My name is Darel Dawson.
13	Are you able to hear me?
14	CHAIRPERSON ANDERSON: Yes, I can hear
15	you. So spell the
16	MR. DAWSON: Okay.
17	CHAIRPERSON ANDERSON: Spell your
18	name. The reason why I ask everyone, we have a
19	court reporter, so we have a transcript. So
20	that's why I ask people to spell their name for
21	the record.
22	MR. DAWSON: Okay. D-A-R-E-L D-A-W-S-
23	O-N.
24	CHAIRPERSON ANDERSON: Thank you,
25	Mr. Dawson.

1	MR. DAWSON: Oddly enough, I have a
2	little echo. Hold on. Let me figure this echo
3	out. Hold on.
4	CHAIRPERSON ANDERSON: I don't hear
5	one, sir, so I
6	MR. DAWSON: Okay.
7	CHAIRPERSON ANDERSON: I think you're
8	on is someone else are you on two lines?
9	Or is someone
10	MR. DAWSON: Yes, I am. Hold on just
11	one second.
12	CHAIRPERSON ANDERSON: Then that other
13	person needs to mute their line. Mr. Dawson?
14	Mr. Dawson? Mr. Dawson, I don't know what you
15	did with your phone, but I'm not
16	MR. DAWSON: Okay. Can you hear me
17	now?
18	CHAIRPERSON ANDERSON: It's not a
19	matter of whether I can hear you, Mr. Dawson.
20	I'm looking at something. I don't know what I'm
21	looking at. So I'm not seeing your face. I
22	don't know what I'm looking at. That's why
23	all right.
24	Let me have Mr. Smoot testify, and
25	then hopefully Mr. Dawson will be able to join.

1	So, Mr. Smoot, why don't you spell and state your
2	name for the record. Please spell and state your
3	name for the record, and then I'll turn the time
4	on.
5	MR. SMOOT: Christopher Smoot, C-H-R-
6	I-S
7	CHAIRPERSON ANDERSON: Hold on a
8	minute, please. I think are you and
9	Mr. Dawson in the same location?
10	MR. SMOOT: No.
11	CHAIRPERSON ANDERSON: All right.
12	Mr. Dawson, put your okay. Go ahead. Why
13	don't you speak, Mr. Smoot? Let me see.
14	MR. SMOOT: My name is Christopher
15	Smoot, C-H-R-I-S-T-O-P-H-E-R S-M-O-O-T.
16	CHAIRPERSON ANDERSON: You have five
17	minutes, sir. Go ahead, please.
18	MR. SMOOT: Okay. So I'm a member of
19	the i-71 Committee and business owner of an
20	i-71-compliant business. First of all, I want to
21	thank you all for the allotted time and the
22	opportunity for myself and our committee to
23	address the concerns that we see and the ones
24	that especially the ones that we feel strong
25	about.

I joined the i-71 Committee recently because I believe in the sustainable and equitable entrance for the unlicensed owners in the cannabis industry in the District. In Washington, D.C., right now, even with only the seven or eight dispensaries that we have now, we see unprecedented diversity in the industry that we can't even begin to see across the entire rest of the nation.

As a collective, us as the operators in this market, unlicensed and licensed want to see and reach the success that we know is possible, and we are hopeful that with meetings like we had today that we will be able to make the necessary changes to walk forward confidently.

So our biggest concern about the proposed regulations and my reason for being here today is to bring attention to the opportunity for success in a local cultivation hub in the city. So when we look at true demand versus projected demand, a lot of the i-71 businesses right now are shouldering the weight of the demand that the medical dispensaries could be seeing.

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This is due to a lot of factors, mainly patient access, as a lot of the people on here said, the 30-day pass is a new speed bump when people are trying to get their medicine.

And they will turn to easier, quicker, and cheaper alternatives, as well as the inability to advertise and market and promote to those patients for all of the licensed individuals.

In an industry that has close to no bankrupt protection, and close to no support from any type of financial institutions. It is extremely important for businesses that are in the cannabis sector to be able to market and be able to retain their consumer conversations, especially as the market becomes more competitive.

D.C. has the ability to lead the nation. In a new cultivation and a new manufacturing regulation, we can set a good example. As we have seen in many other states that previously have legalized, cultivation timelines tend to be a little longer than they are originally projected, and they can face a lot of hurdles on the way to actually being online.

As everyone else has mentioned, you

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know, the demand does not necessarily match the supply that we see right now. There's a supply shortage, I dare say, and if you were to add 20 to 30 new licenses, there would be no supply to meet those licenses. So you would be setting those businesses up to fail. Without the beginning product, which is the flower, which is the cultivation, there is no manufacturing, there is no extracting, there is no -- there is no retail.

So at the end of the day, the entire industry depends on the cultivation timeline being correct. And so that's definitely something that I think needs to be looked at in the current regulations.

And, in addition to all of this, we in the industry know how tedious, how difficult it can be, to set up processes and regulations for all of this stuff. And I, as well as pretty much all of my other colleagues from what I've heard, believe that a cannabis-specific advisory board would be extremely useful for regulators and legislators.

I would like to recommend a group consisting of industry experts be assembled --

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1 cultivators, extractors, business experts, even 2 maybe from other states that have previously and successfully implemented a program like this --3 to inform the Board and everyone as to what the 4 5 reality is of operating in this industry. 6 And that's pretty much my testimony 7 for today. Again, I want to thank everybody for 8 their time. Yeah. 9 CHAIRPERSON ANDERSON: All right. 10 Thank you, sir. Mr. Smoot, thank you for your 11 testimony. Mr. Dawson? 12 Are you getting our technical issues 13 now correct? 14 MR. DAWSON: I hope so. Can you hear 15 me? 16 CHAIRPERSON ANDERSON: I can hear you. 17 And I do not hear any interference. You have 18 already introduced yourself for the record and so 19 you have five minutes. 20 Hello, everyone. MR. DAWSON: 21 Darel Dawson, President of the i-71 Committee, 2.2 local business owner, cannabis justice advocate, 23 and an active D.C. community member. I'm here 2.4 today to voice my support for the temporary 25 postponement of halting cannabis retail licenses

in our District to ensure the successful establishment of cultivation facilities.

With patient access, safe and sustainable cannabis products as our priority, we have a unique opportunity to foster social equity and create the change in the industry that we envision as a standard for our country. As of 2018, the first medical cannabis social equity program was enacted and as of 2023, zero of them have proven effective.

Patient access to safe and sustainable cannabis products is of utmost importance. By prioritizing the establishment of local based cultivation facilities before issuing retail licenses, we can guarantee a steady and reliable supply of high quality cannabis products that allows retail licenses -- I'm sorry, that will allow access to patients in need.

Temporarily delaying retail licenses allows us to focus on building a robust cultivation infrastructure that prioritizes patient and consumer wellbeing and ensures their access to therapeutic benefits of cannabis.

We should also not be limiting the patient's purchasing limits. That's important.

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If we are to create a thriving market with long term local business success, regulators should not put hindrance on patient access.

Moreover, our District has a chance to become a shining example of the social equity in the cannabis industry. As we move forward, it is vital that we address the historical disparities and injustices that marginalized communities have face due to the war on drugs.

By pausing the issuance of retail licenses, we can dedicate our efforts to create a framework that promotes and supports social equity and local businesses in the industry. This includes providing opportunities for minority-owned businesses, reinvesting in communities, and disproportionately impacted -- who have been disproportionately impacted by cannabis prohibition and ensuring fair access to licenses and resources for all interested parties.

We have the opportunity today to set a precedent for an evolving industry. By detailing the retail licensing processes, we can take the time to establish comprehensive regulatory frameworks that not only ensure

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patient access, but also incorporate social equity measures into the fabric of our industry. By doing so, we can create a model that other states and jurisdictions can follow, paving the way for a more equitable and inclusive cannabis industry across the nation.

Furthermore, by prioritizing the successful establishment of cultivation facilities, we can appropriately address potential supply chain challenges that may arise from an influx of retail businesses. Ensuring an adequate supply of cannabis products for both patients and future consumers is crucial for the stability and sustainability of our industry. By taking a measured approach and focusing on cultivation first, we can avoid potential shortages, price compression, and compromised quality that may arise from an unbalanced market.

In conclusion, I urge the Board,
Council, and associates to consider postponing or
halting cannabis retail licenses to ensure the
successful establishment of cultivation
facilities in our District. By prioritizing
patient access, focusing on social equity, and
setting a positive example for the nation, we can

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create a thriving and inclusive cannabis industry that benefits all stakeholders.

Let us take this time to seize the opportunity to create the change that we wish to build -- that we wish to see in order to build the cannabis market that is fair, equitable, and accessible to all.

Thank you for your attention and your consideration. It's wonderful to see all of you, like I just stated, it's wonderful to see all of you actually take this time, take this issue seriously, and give your ears to it. We appreciate it.

CHAIRPERSON ANDERSON: Thank you, Mr. Dawson. And this is my first opportunity in meeting the i-71 and so I'm glad that the i-71 Committee, that they want to join the legal market. And so this is something that I'm very proud that you guys have and ladies have showed up and want to join the licensed market.

But the question, I'm going to start with, Mr. White, and anyone else can respond to the question. You're asking for a delay. As you're aware, cannabis is not federally legal.

In order for you to sell cannabis in D.C., it has

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to be grown in D.C. And it would appear that we're trying to be very aggressive with the cultivators. But THE cultivators are saying well, we're not growing because we only have a limited amount of dispensaries.

So how are you asking us to delay the process -- it's the chicken or the egg process.

Where the cultivators are saying there are sufficient, I believe, sufficient cultivator licenses out there. And there are cultivators who are not utilizing their licenses currently.

So how is it that you believe that this Board can grow more product because if you come on board, then we can say the cultivators have known there's no plant count, so therefore they can grow as much as they can. So we have limited the plant count way back, but now you're asking us to delay the retailer process, but if I was a cultivator, why would I want to come to the market because if I don't know who the consumers are. They're currently only seven dispensers, so explain that to me. I'll start with Mr. White and whoever else can join in after.

MR. DAWSON: So thanks for your question, Chairman.

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What I would say, first and foremost, is there are seven dispensaries, medical dispensaries currently. As I testified, there's only about 2,000 pounds of cannabis being sold on the medical side. You've got five out of those eight cultivators actually are growing. Three of them are not evening growing anymore because they've abandoned D.C. altogether.

You've got 13,000 to 15,000 medical cards. The problem is is that even onboarding the 20 or 30 licenses or more that you're talking about, you still wouldn't have enough cultivators. If 30 licenses came on board tomorrow, you will be right back at square one. So they can tell you anything that they want to tell you.

I've talked to two of the medical, actually, operators. They don't have enough cannabis for these particular operators as -- and then they're price gouging them. You got one particular operator buys a majority of the cannabis because they own a bigger pie of the medical operators. They're the biggest operator. So they own a bigger piece of the pie.

So you're asking us to say okay, why

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are we asking for you guys to halt the process?

Number one, I think it needs to be looked at -
the cultivator process needs to be looked at in a

different way, making sure, ensuring that plant

the seeds, our number one, you know, through

matrix, are actually correct.

Number two, let's start about how you plan on adding these other licenses and who's actually -- how much cannabis is actually being grown. Eight thousand square feet of cannabis is not enough. So if that's the case, yes, you're going to be right back to square one. So they're telling you all this stuff, but they're not giving you the facts.

CHAIRPERSON ANDERSON: How can I convince you to grow? What can I do -- because I hear you. That's what I'm trying to say to you. How can I convince you to grow because there's sufficient -- the market can support your growing more.

MR. DAWSON: Number one is you've got to take the handcuffs off these medical dispensaries, as I've talked about, in terms of them doing the marketing, advertising that they need to increase the client base. If you don't

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have participants in order to foot -- as we call them footsteps or people through the door, the supply will always be that way.

But you have to allow operators to operate like operators, allow them to be normal businesses. And if you do that, then you can expand on cultivation. If you don't have enough product which it seems like that's been the overall testimony, not only from us, but also other people outside of the i-71 Committee, telling you that hey, there's not enough cannabis being grown. Well, enough cannabis being grown is because not enough people are on the medical side. They don't have the numbers.

We know the obstacle is federal, that people work with the feds, even locally. You can't have a medical card if you are even state government. There's different things that happen so therefore that limits the opportunities.

The reason that the i-71 Committee or community is so successful is because people want to be free willed. You can't have that and I speak to everybody in the industry as the chairman, you know, we are i-71 compliant. I speak to those who are not i-71 compliant. I

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speak to medical. And it's all the same consensus. When you have the lack of cannabis and also and too with bad product, even with the product that's actually being grown, not quality product, you're going to have this problem.

So I think I urge you to take a look at the cultivation. Look at the product. Look at how much is actually being grown. See the sales. This matrix is real simple. And if the numbers don't add up, if the quality doesn't add up, then there lies the problem.

If you're asking us, who me, I want to be legal. I want a license. To come aboard, we have to get this problem resolved first and foremost because if we don't get this problem resolved, you're still going to have a huge, black and illicit market and it's also -- it's going to be the same conversation year in and year out. I promise you that.

CHAIRPERSON ANDERSON: Anyone else want to respond? I see that Mr. Clark has put up -- you can put your answer in the chat room and we'll try and see if we can elevate it. That's to you Ms. Crockett, can synthesize and answer it in the chat.

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1 Does anyone else want to comment on 2 that question? Well, I'm just saying the floor is 3 open because it is, as you will see, we will be 4 5 as aggressive as possible to have the cultivators cultivate, but --6 7 Let me ask you a question. MR. WHITE: 8 If you have eight cultivators, five have all 9 pretty much gone to other states, you got three of the five basically most of their cannabis is 10 11 going to one dispensary. You guys don't see 12 there lies a problem there? 13 CHAIRPERSON ANDERSON: No. I'm not. 14 saying -- what I'm saying is that on the one hand 15 cultivators are saying that they don't have a 16 large enough market. 17 As you are aware, we don't have a 18 recreational, a legal recreational market in D.C. 19 because of Congress. So therefore, we do not 20 have a recreational -- a legal recreational 21 market in D.C. So therefore, we only have a 2.2 medicinal market. So we can't control that. 23 MR. WHITE: That's true. Because of 2.4 Congress, right. 25 CHAIRPERSON ANDERSON: But I'm saying

what we can control, as you can see, the Agency, the Board and the Agency, we have been very expansive in expanding the medical market, the dispensing market. But I am not quite sure how is it that we can convince -- because even if you're saying we can advertise. Okay, so, all right, fine.

Say all the dispensaries can advertise, okay? The dispensaries can advertise. But how can we support -- because you have stated that some of the cultivators have left D.C. to go somewhere else. They might go to Maryland. They focus in Maryland. So the larger issue is that if you don't come in the market for the cultivators to say okay, there are now 30 licensed establishments there. So therefore, there's a larger pool of retailers purchasing my product, so therefore I can grow more.

MR. WHITE: Here's the thing -- right. Here's the thing. Even if those three came back, we could look at their footprint. All of them are less than 10,000 square feet. It would take 18 months. Some of them have let -- pretty much, we don't know, outdated equipment, so let's say in a perfect world, a year, to get back up and

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1 That's still not going to resolve the running. 2 problem. You're just basically putting a band-3 aid over a wound. CHAIRPERSON ANDERSON: One solution 4 5 and as I said before --MR. WHITE: What we do as the i-716 7 Committee, we sit down and we bring solutions. 8 We look at things internal, external. We find 9 solutions. We don't want problems. We ask for solutions. That's all I ask the Committee to do, 10 11 day in and day out. Let's find a solution to 12 these problems. 13 But overall, overarching, everyone 14 agrees with us. It's not just the i-71 15 Committee. It's medical. They feel the same 16 way. It's not just us that feels this way. 17 We're operators. We understand. And 18 I guarantee you if you take a consensus, your 19 poll will come up to say let's halt this, let's 20 get the cultivating side right. Let's not be New 21 Jersey. Let's not be Illinois. Let's get this 2.2 thing right. 23 MR. WHITE: I'm coming to you, Mr. Grandis. 2.4 25 I hear you, but what incentive can be

granted to the cultivators for them to grow
because -- put in a pause and I'm speaking for
myself and not speaking while we're here, is that
your saying for a pause, but we put a pause on
it, the cultivators are going to say there's not
sufficient market, so there's not a sufficient
market --

MR. WHITE: There is a sufficient market.

MS. BIDDLE: Can I interject?

CHAIRPERSON ANDERSON: Go ahead, Ms.

Biddle.

MS. BIDDLE: Chairman, I completely understand your hesitation, especially given the current market, but as we start enforcement and as competition disappears from the i-71 Committee, the market dynamics are going to be completely different once these retail stores start shutting down.

These operators are generating millions of dollars a year. They're pumping out pounds, hundreds of pounds of marijuana coming from out of state. In order to not create a vacuum effect and send this all straight back to the black market, there needs to be cultivation

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1 in place. We have to think about -- we have to 2 measure what's going on in the i-71 Committee now 3 and kind of use as a gauge to predict what the market is going to look like. And I think that's 4 5 enough incentive to potentially bring on growers when they understand what is about to happen once 6 7 this i-71 dynamic is no longer in the picture. MR. SLAUGHTER: 8 I agree with that. 9 CHAIRPERSON ANDERSON: Identify 10 yourself before you speak. 11 MR. SLAUGHTER: Sorry, this is Steven 12 Slaughter. 13 CHAIRPERSON ANDERSON: Steven 14 Slaughter, go ahead. 15 MR. SLAUGHTER: To go on to what 16 Barbara is saying, even for the new cultivators 17 that will be applying for licensing and coming 18 onboard, they also need time to set up their 19 shops, to set up the warehouses. The space also 20 has to be set up along with the time frame for 21 grow, just in general. 2.2 So even the incentive for the existing 23 cultivators as they exist right now, their 2.4 incentive is is that these new shops that are 25 coming onboard currently, they're still going to

need to purchase, as they get their licensing, especially the first round of the sociable, equitable applicants as they come through and their shops start to open up, the new cultivators still won't be ready to even set of those shops.

So the current cultivators, the initiative for them would be that you're going to have these shops coming on board, they know the illicit market right now is very big. And by transitioning, just like Barbara said, there's going to be a lot of i-71 shops that start to close out and therefore, they should anticipate that their market is going to grow rapidly really quickly when this all happens.

MS. BIDDLE: Yes, and dovetailing on to that, you know, we're just talking about flower here. We're not talking about the biomass that it takes to create products like tinctures and edible.

MR. SLAUGHTER: Yes.

MS. BIDDLE: So that has to be taken into consideration, too, with the cultivation because that's the first step in the manufacturing process. It takes far more biomass to create products like that then it does to just

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smoke it. So I'm not sure that that was taken into consideration when formatting the structure and that's something that needs to be considered moving forward.

CHAIRPERSON ANDERSON: Mr. Smoot, did you have something you wanted to say and then, Mr. Grandis, you can ask your question.

MR. SMOOT: Yes, this is Christopher Smoot. I just wanted to say that I agree with what Barbara is saying. Not only do you have to think about do you have to cultivate for just the demand for flower, but they do also have to increase the amount that they cultivate to support the demand for extracted products and products that are created with the extractions. So it takes a lot more biomass to make something into an extraction. And then it takes time and research and development on top of that to develop that extraction into an edible or an inhalable or a vapable product.

And so for all the new manufacturers, they'll have to go through that process and that time and that development and that will just add a whole other essentially padding on to when any newly-licensed business could actually release

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their products to the public and to new retail operations.

CHAIRPERSON ANDERSON: Thank you. Mr. Grandis, did you have a question you wanted to ask, sir?

MR. GRANDIS: I -- I as a board member am finding all of this very enlightening and we very much appreciate you all taking the time to come and talk about your struggles. I think it's -- you all have highlighted things and all the other panelists have highlighted things that we will go back and talk to the Agency about.

Can we get away from the products for a moment? We all know that's very legitimate that you're bringing up, but you all have this sophisticated group or committee called i-71. Are you all doing anything to get people who participate in that committee to know what is happening in the future, in the short term?

Are you all doing anything to say -do you all have security at the door so people
under 21 do not come in to our gift shop? Do you
all have anyone that is really knowledgeable -I'm just saying I appreciate the concerns you're
raising, but you're raising them to me as

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1	legitimate businesses, okay?
2	MR. WHITE: Well, let me stop you
3	right there, Mr. Grandis.
4	MR. GRANDIS: Wait a second, no, Mr.
5	White, you're not going to stop me right there.
6	(Simultaneous speaking.)
7	MR. WHITE: Mr. Grandis, hold on. Mr.
8	Grandis, you asked a question, he is trying to
9	answer. But finish your question.
10	MR. GRANDIS: My question, let me get
11	to my question. Are you all doing any
12	educational opportunities for people like
13	yourselves who we want to help bring into the
14	legal market? We do support getting you all into
15	the legal market, but are you all doing
16	educational programming about all the other
17	characteristics that our dispensaries have to go
18	through right now? That's what I'm
19	MR. WHITE: And that's what I'm trying
20	to answer.
21	MR. GRANDIS: Thank you, Mr. White.
22	MR. WHITE: We do have a security plan
23	in place. That's first and foremost. I pay a
24	security company a healthy amount of money every
25	week to secure my store.

In terms of education, we educate not only clients, but we also educate the community. We have PR teams that actually, as we involve the community in a lot of aspects of what we do as being i-71 compliant. We pay taxes to D.C. Government.

We do a lot of things for the community that the medical community doesn't do. We fund raise, Coats for Kids. I think the notion is is that we make money and we don't give back.

So let me make this very clear, as the chairman of the i-71 Committee, each month we do something for someone or somebody in the community from a voluntary standpoint. From the terms of making sure that people are 21 and over, we check ID. The majority of us hire on-security to make sure that no one robs our store or brings violence or crimes.

In my particular case, I also give money to the Mount Vernon Bid to make sure that the security is proper not only for my business, for all businesses.

In terms of education, everybody that's hired by MONKO, which I own here at 444 K

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Street, we go through an educational about every product that we have inside our store. That product is not only -- not only do we talk to a customer, but if you go online, the first they talk about is how we educate in our customer service.

So most businesses, if not all businesses that's i-71 compliant -- let me make that clear, that you see that checkmark in the window that's saying that hey, we have a CFO. We have a business license. We pay taxes. Those are the businesses that we represent. We do external and internal education as well as community service. That would be my answer to your question, sir.

MR. GRANDIS: And thank you because I think that's really very helpful to me to hear that because we need to get people into compliance. So what you're doing sounds extraordinary and very much welcomed.

What about if I were to come in and get a product, how do I know it's safe? Who does your testing? I'm not saying you, a particular company, but is part of the i-71 Committee is testing the product something you all are helping

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other i-71 people to learn how to do.

MR. WHITE: Currently, we self-test, just like every dispensary in the city. There's no testing facility in the city. But we make it clear that the products that we get that's put on the shelves are safe. We have not one problem that's been reported to you guys, DOH, or the city, DCRA, from the i-71 side.

Again, as those people who are i-71 compliant, these are things we talk about week in and week out in our meetings, how to make it a safe environment, not only from a safety secure standpoint, but from a consumption standpoint.

We're very clear about that.

MR. GRANDIS: Thank you. And like I said, this has been a good education for me and that's why I think having these kind of hearings is very helpful for both sides of the equation, but thank you very much and just so you understand, I personally support the i-71 coming into compliance and having legal license, just so you understand that because I'm not trying to put anyone down or say that you all are not having a good legal operation, but we --

MR. WHITE: I appreciate that.

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1 MR. GRANDIS: -- do need to help each 2 other get into compliance. Thank you, Mr. Chairman. 3 4 MR. WHITE: You're welcome, Mr. 5 Grandis. 6 CHAIRPERSON ANDERSON: Yes, Mr. 7 Slaughter. 8 MR. SLAUGHTER: Yes, I just wanted to 9 also -- back off of what Terrence is basically 10 saying, we also have -- a part of being a part of 11 the Initial-71 Committee, is we've had people 12 come on board on our weekly calls from different 13 states who have already gone through regulation from states like on the West Coast. 14 15 And we've had different 16 representatives that work in compliance areas, 17 law firms, just educating the committee owners of 18 the businesses that we currently have on how the 19 processes have come into place in other states 20 that are now legal. 21 So for example, I've been with the 2.2 Committee for just about two years now, and I can 23 tell you that for the stores that are with the 2.4 Initial-71 Committee, if you were to look at

something like gummies, for example, and I've

just seen a comment that was mentioned above about things being found in gummies in some of the illicit stores. We've made changes to whoever is a part of the Committee to make sure that the gummies that they're carrying on their shelves, that they get labeled correctly, that the products are labeled correctly, and that we're moving towards a regulation because there's not a regulation set in stone for us, but to be more in line with states who have already legalized.

We've taken those steps in our own

Committee so that the consumers that are getting

products from us, they are also, you know,

they're feeling safe based on the regulations

that other states have passed that we've also

been bringing into our Committee to fall in line

with what medical is already doing in D.C. as

well.

CHAIRPERSON ANDERSON: All right, this is, as I said before, this is important. This panel was not planned this way. The way the panels were created, I called the witnesses based on how when they registered for the Agency, and so that's how we started.

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And it appears that the i-71 Committee was the last group of folks who signed up to testify and so this actually a great way to end our public hearing because this is actually the first public involvement that this Board has had with the i-71 Committee for us to hear where you are, what are your wants, and try to see what can be done through these regulations and through the law if changes have to be made by the Council to ensure that you are able to transition into the licensed market.

And so I do applaud the fact that you're here today and it shows me that -- especially the i-71 Committee that who is operating in the District that you want to access the legal market and we will do what can be done to ensure that you're able to access the legal market. I would ask that you -- we'll -- we'll be having some fact-finding hearings in the coming week with some cultivation vendors and so I'll ask that you look at our schedule to see what hearings that we're hearing because we'll be having some hearings regarding cultivation centers and the fact that some of them are not using the license and maybe you can -- it's not

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open for you to participate, but at least you can hear what they are saying, why it is that the license is not being utilized.

And so as I stated before, we're here in a position, we want you to join the legal, licensed market and the cultivators are saying that we're not growing because the market is not large enough. And so if we were to -- I don't know what to do because you're saying we should postpone. They're saying the market is not large enough, that's why I'm not growing and so we have to come and so I will -- I support whatever conversations that you have with our Agency and the Director. You can share with them what you're plans are and because unfortunately, this is your only opportunity with us. If you meet with us, it would have to be in a public hearing. So we can't meet with you unless it's a quorum like this. But I do appreciate the views that were expressed today.

And I just want to thank all those who took the time today to testify to this hearing.

Please know that this is not your last opportunity to share your thoughts with the Board. Written comments can be submitted to the

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Board following this hearing until June 21st, 2023 and during the 30-day comment period when the rules are published in the DCR Register. Please send your comments by email to abca.legal@dc.gov.

Thank you very much for your presentation today. It was very helpful and I think that this is the largest public hearing -- I've been chair for seven and a half years and we've been regulating cannabis for about four years now and this is the largest public hearing we've ever had. And it's been a virtual hearing and basically say it was without any hiccups. I mean we have been online since 10:45 this morning and I believe we only had one or two persons with technical issues. I think that is a success that we have been able to have a virtual hearing and almost 100 percent of the folks have been able to participate.

So thank you very much for your participation today and have a great day and we will take all the comments that we have received and make any changes to the regulation. I know a lot a lot of comments will steps or changes, so if you able to go to the Council and ask for

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changes, yes, you can do that.

As far as within the confines of the law, we will try to see what we can do. But a lot of the changes that are being requested today are -- can only be addressed by the Council and so if you are able to have the Council make those changes, the Board will do whatever we can do in our position to make changes.

Okay, so have a great day and thank you very much. This hearing is closed.

(Whereupon, the above-entitled matter went off the record at 2:52 p.m.)

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## <u>C E R T I F I C A T E</u>

This is to certify that the foregoing transcript

In the matter of: Medical Cannabis Rulemaking

Before: DC ABCA

Date: 06-07-23

Place: teleconference

was duly recorded and accurately transcribed under my direction; further, that said transcript is a true and accurate complete record of the proceedings.

Court Reporter

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