

NO. 68979-7-I

COURT OF APPEALS
FOR THE STATE OF WASHINGTON
DIVISION I

JOHN WORTHINGTON,

Appellant

v.

WASHINGTON STATE ATTORNEY GENERAL ET AL,

Respondents

**AMICUS CURIAE BRIEF FOR THE
CANNABIS ACTION COALITION**

Yohannes Sium, Esq.
Law Offices of Yohannes K. Sium
119 1st Avenue South Suite 260
Seattle, Washington 98104

Attorney for:

THE CANNABIS ACTION COALITION

ORIGINAL

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I. IDENTITY AND INTEREST OF AMICUS CURIAE

The Cannabis Action Coalition (CAC) is a statewide organization with members that are dedicated to the preservation and defense of Washington State cannabis laws. The CAC has particular interest and expertise in the areas of cannabis law and has had extensive involvement in the development of those laws via activism and testimony to the Washington State legislature.

The CAC's interest in this matter is further detailed in the statement of interest contained in its Motion for Leave to File Amicus Curiae brief filed herewith, which is hereby incorporated by reference.

II. INTRODUCTION

The CAC members have collected proof through public disclosure that local law enforcement are engaged in a strategy to violate the rights of medical cannabis patients by raiding their homes at gun point, seizing their cannabis and property and destroying the cannabis in order to get federal grant money. Even more troubling is that state and local law enforcement, who claims to act completely under state law, rely on the fact that state prosecutors do not charge patients with a crime, and argue that state law does not require they serve patients with property seizure receipts. Such notice is required by seizure and forfeiture laws of this state. Notice is likely not served because state and local law enforcement must destroy the cannabis to continue receiving federal grant money.

Even on appeal, the defendants refuse to reveal where Mr. Worthington's six medical marijuana plants and grow light were taken, which officer took the property, which agency took the property, or whether the property will be returned or whether it has been destroyed. This violates the a patient's right to be free of all criminal and civil penalties for using medical cannabis enshrined in Washington State's medical cannabis statutes.

III. STATEMENT OF THE CASE

On November 14, 1996, as California passed and Washington considered medical cannabis initiatives, federal and state drug control agencies devised a strategy to undermine the will of the people. The meeting produced the following strategy:

DEA will adopt seizures of Schedule I controlled substances made by state and local law enforcement officials following an arrest where state and local prosecutors must decline prosecution because of the Propositions. **Once in DEA's possession the drugs can be summarily forfeited and destroyed by DEA.** State and local law enforcement officials will be encouraged to continue to execute state law to the fullest extent by having officers continue to make arrests and seizures under state law, leaving defendants to raise the medical use provisions of the Propositions only as a defense to state prosecution.

(CP 628-640)(emphasis added)

On February 11, 1997, based on this policy, the federal government created a Northwest HIDTA grant to fund local law enforcement to seize and destroy

medical cannabis protected by state law. This policy was placed in the federal registry. (CP 641-643) APPENDIX A.

In 1998, as Washington's medical cannabis laws came into force, state and local agencies in this state, who are party to this lawsuit, applied for Northwest HIDTA grants. State and local law enforcement then deprived legitimate medical marijuana patients of their rights to get federal funding. (CP 589-591)

On February 14, 2007, after nearly a decade of receiving federal drug funding, TNET executive board members openly stated that its state and local law enforcement agents would engage in raids, which usually involve heavily armed and aggressive police action, to seize the medical marijuana from patients operating completely legally under Washington State law.

Federal law does not recognize medical marijuana; consequently if our office does a raid and finds marijuana there, the plants will be seized even though they may be below medical marijuana thresholds.

(CP 626) APPENDIX B.

In order to meet the requirements of the HIDTA grant to destroy medical cannabis, *see supra*, state and local law enforcement had to undermine Washington State forfeiture statute which gave patients a right to notice and to recover their property. State and local police accomplished this goal by engaging in "investigations" which allow them to raid the homes of medical cannabis patients,

seize and destroy the cannabis, abandon the investigation and intimidate and stonewall patients that have the nerve to ask for the return of their property. Per the strategy, State and local law enforcement asserts they can skirt seizure and forfeiture laws because they will not seek forfeiture and they know prosecutors will not charge the patient with a crime.

On January 12, 2007, within weeks of raiding Mr. Worthington's home, TNET's executive board boasted of its strategy. Per an "investigation" state and local police raided at gun point Mr. Worthington's home. They seized six plants and a growing light. (CP 626) They did not produce receipts for the seized property or provide any type of notice. No charges were brought against Mr. Worthington or anyone that was purportedly being "investigated." The agencies involved didn't serve Mr. Worthington with a notice nor did they seek forfeiture.

The defendants have not returned Mr. Worthington's six plants or his grow light. The defendants refuse to identify where Mr. Worthington's plants and grow lights were taken; where they are presently; the seizing officer; the seizing agency; whether it will be returned; or whether it has been destroyed.

Mr. Worthington fell out of a tree and broke his back in three places, which gradually restricted blood flow in his body. He suffers from severe arthritis and lumbar disc disease. His regular family doctor authorizes him to use cannabis to

treat pain because all other pain medication has proven ineffective.¹ The HIDTA policy to seize medical marijuana for the DEA interrupted his medical treatment.

CAC members are made up of medical cannabis patients who want to protect their right to treat their debilitating pain with cannabis which is often the only drug that treats their pain effectively. Recent polling by the New England Journal of Medicine found the 76% of doctors believe “medicinal benefits of marijuana outweigh the risks and potential harms.” National polls show that public support for medical marijuana is above 80% in this country.

ProCon.org. (2013, June 11). Votes and Polls, National. Retrieved from <http://medicalmarijuana.procon.org/view.additional-resource.php?resourceID=000151>

Washington State had the highest voter turnout in the country at 80% when voters passed I-502 to legalize even recreational use. State and Local law enforcement cannot continue to undermine the will of the people by raiding, seizing and destroying medical marijuana in order to receive federal drug grants as they have done to Mr. Worthington. CAC members who wish to remain unnamed have had the same things happened to them or fear that it will.

¹ Despite admissible evidence in summary judgment that the defendants agreed at the time of the raid Mr. Worthington is a legitimate medical cannabis user, (CP 501) the defendants still claim “Mr. Worthington produced no evidence to establish that he was a ‘qualifying patient.”

IV. ARGUMENT

A. THE DEFENDANTS ARE UNDERMINING THE PURPOSE AND INTENT OF MUMA

The meaning of a statute is a question of law reviewed de novo. *State v. Breazeale*, 144 Wn.2d 829, 837, 31 P.3d 1155 (2001); *State v. J.M.*, 144 Wn.2d 472, 480, 28 P.3d 720 (2001). The court's fundamental objective is to ascertain and carry out the Legislature's purpose and intent, and if the statute's intent is plain on its face, then the court must give effect to that plain meaning as an expression of legislative intent. *J.M.*, 144 Wn.2d at 480. “Constructions that yield unlikely, absurd, or strained consequences must be avoided.” *City of Seattle v. Fuller*, 177 Wn.2d 263 (2013); *Kilian v. Atkinson*, 147 Wn.2d 16, 21, 50 P.3d 638 (2002).

Under the “purpose and intent section” of MUMA, RCW 69.51A.005, it reads in relevant part:

(2) Therefore, the legislature intends that:

(a) Qualifying patients with terminal or debilitating medical conditions who, in the judgment of their health care professionals, may benefit from the medical use of cannabis, *shall not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law based solely on their medical use of cannabis, notwithstanding any other provision of law*;

(b) Persons who act as designated providers to such patients shall also not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law, notwithstanding any other provision of law, based solely on their assisting with the medical use of cannabis; and

(c) Health care professionals shall also not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law for the proper authorization of medical use of cannabis by qualifying patients for whom, in the health care professional's professional judgment, the medical use of cannabis may prove beneficial.

(emphasis added)

A plain reading of the legislative purpose of MUMA shows it was meant to protect patients and their providers from all criminal or civil consequences for merely treating pain with cannabis.

But the defendants assert that MUMA “merely provides medical marijuana users who are charged with a crime with an affirmative defense. As such, there was no clear intent on behalf of the legislature to impose an affirmative duty on any governmental entity to protect any particular class of people.” (Pg. 40 of Respondent’s brief).

The defendants’ construction of the statute is “unlikely, absurd, or strained” *Fuller*, 177 Wn.2d 263. Voters and the legislatures didn’t construct a statute to provide patients with an affirmative defense in a criminal trial after the police raid patients and seize and destroy their property. From the outset, MUMA was meant to grant medical cannabis users the right to use medicinal cannabis without criminal or civil consequences.

The defendants’ reading of the statute is line with the HIDTA grant strategy

to “seize and destroy” legal medical marijuana per “investigations” knowing no charges will be brought. State and local law enforcement signed onto this policy in order to get federal grants and continue to receive funding to this day. But the defendants’ actions violate this state’s medical cannabis laws which state and local law enforcement purport to operate under.

B. THE DEFENDANTS SEEK TO UNDERMINE THE PURPOSE AND INTENT OF THE SEIZURE AND FORFEITURE LAWS

The fundamental objective of the seizure and forfeiture statute, RCW 69.50.505, is to ascertain and carry out the intent of the Legislature. See *Key Bank of Puget Sound v. City of Everett*, 67 Wash.App. 914, 917, 841 P.2d 800 (1992) (construing former RCW 69.50.505), review denied. 121 Wash.2d 1025, 854 P.2d 1085 (1993) (internal citations omitted). According to the statute, a seizing agency must strictly comply with the service of process requirements of the forfeiture statute. *Bruett v. Real Property*, 93 Wash.App. 290 (1998)

RCW 69.50.505(3) states in relevant part:

(3) In the event of seizure pursuant to subsection (2)² of this section, proceedings for forfeiture shall be deemed commenced by the seizure. The law enforcement agency under whose authority the seizure was made shall cause notice to be served within fifteen days following the seizure on the owner of the property seized and the person in charge thereof and any person having any known right or interest therein, including any community property interest, of the seizure and intended forfeiture of the seized property. ..

² The defendants’ claim Mr. Worthington’s marijuana was seized under a valid search warrant which is subsection (2)(a) which states “(a)The seizure is incident to an arrest or a search under a search warrant or an inspection under an administrative inspection warrant”

In this case, the defendants have acknowledged that a 15 day written notice to seize property was not served on Mr. Worthington. The defendants claim “[t]he seizing agency did not violate RCW 69.50.505 because the marijuana plants [and grow lamp] were not seized with the intent to seek their forfeiture.” (Page 44 Respondents response brief) But the provision above shows that merely seizing the property per a search warrant activates the statute not the “intent to seek forfeiture.” It is disingenuous to assert the “seizure and forfeiture” statute only applies to forfeitures but not seizures.

As noted above, the defendants refuse to even disclose the seizing agency. That is why notice is required per the statute. The defendants’ will not even identify the officer(s)’ name instead simply stating “one or more law enforcement officers seized Mr. Worthington’s property.” A simple notice would also record what law enforcement agency and officer took Mr. Worthington’s property. But it was never served so the defendants could destroy the plants without due process.

Furthermore, the fact TNET and WESTNET officers receive federal funding does not mean they are federal agents. In *United States v. Spires*, 79 F.3d 464, 466 (5th Cir. 1996), the court held:

The task force is a federally funded but state operated investigative unit ultimately run by the Texas Governor's office. The task force and its agents are state actors. Federal funding alone does not make agents of the task force federal government officials or agents.

TNET and WESTNET are also not federal agencies despite the many contracts and agreements signed by the recipient members. For example, the interlocal agreement has an indemnity clause that states:

Those personnel contributed by any participating jurisdiction shall be deemed to be continuing under the employment of that jurisdiction and its police department.

(CP 589-591)

The Interlocal Agreement indemnity clause and the requirement to conduct all seizure forfeiture's under RCW 69.50.505, shows that participating law enforcement agencies are state agencies bound by Washington State laws. Again, according to their own agreements, all seizures and forfeitures for both task forces were required to be done under RCW 69.50.505.

The defendants have destroyed medical cannabis through self-serving misinterpretation of Washington's seizure and forfeiture laws. The defendants inadvertently reveal their plan by stating "state law enforcement officers can themselves lawfully seize the plants of a 'medical marijuana patient,' as that status only presents an affirmative defense to prosecution." (CP 641-643) This is a pretext. While it is true that patients have an affirmative defense, the federal policy establishing the federal funding to local law enforcement acknowledge and assumes that state prosecutors will not bring prosecution due to the initiative. The policy is simply to abuse police powers by seizing and destroying the medical

cannabis to honor the HIDTA federal funding and enforce a federal drug control policy and undermine the medical marijuana and now the new legalization initiative I-502.

The Court should not allow the defendants to game the system by hiding behind procedural arguments. It goes against all notions of equity to allow the defendants to hide the ball. The defendants acknowledged this when they filed an errata to rescind the officer they identified as the one who took Mr. Worthington's property. Yet they still claim they do not make a representation now of which officer and agency seized the property. The defendants prevented all discovery and made procedural arguments to dismiss the case, but CAC members know that once light is shun on the wrongdoing, justice will be served.

The manner in which the defendants violently raided Mr. Worthington's home and seized his property has terrified CAC members although it has not surprised them. Mr. Worthington is one of very few patients that have been willing to stand up and take on the government where all too many are too fearful of the repercussions. His trial should go forward to get to the actual substance of his claims.

V. CONCLUSION

For the reasons set forth herein, the CAC respectfully request the case be remanded to the trial court to address the merits of the case. This matter is not

set for oral argument. In the interest of justice, CAC strongly believes oral argument is necessary to assist the court in understanding the substantive and procedural issues in this case and is willing to assist if oral argument is granted.

DATED this 19th day of August, 2013.

Respectfully Submitted,



Yohannes Sium, Esq. WSBA# 42420
Attorney for Cannabis Action Coalition
Law Offices of Yohannes K. Sium
119 1st Avenue South Suite 260
Seattle, Washington 98104

Certificate of Service

I certify that on the date and time indicated below, I caused to be served via personal service, a true and complete copy of the AMICUS CURIAE, to the attorneys of record in this case.

ROBERT CHRISTIE
2100 WESTLAKE AVENUE N., SUITE 206
SEATTLE, WA. 98109
206-957-9669
bob@christielawgroup.com

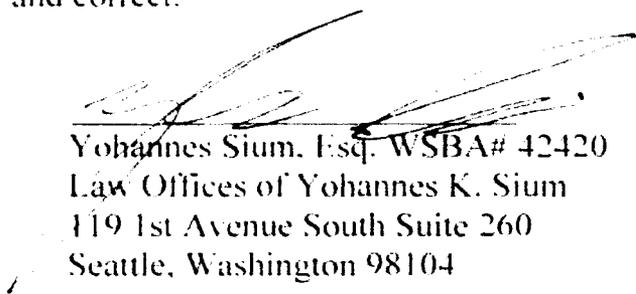
JOHN WORTHINGTON
4500 SE 2ND PL.
RENTON WA. 98059
425-917-2235
worthingtonjw2u@hotmail.com

MARK KOONTZ
345 6TH STREET, SUITE 600
BREMERTON, WA. 98337
360-473-5161
mark.koontz@ci.bremerton.wa.us

ALLISON CROFT
800 FIFTH AVENUE, SUITE 2000
SEATTLE, WA. 98104-3188
206-464-7352
allisonc@atg.wa.gov

STEWART ESTES
800 FIFTH AVENUE, SUITE 4141
SEATTLE, WA. 98104-3175
206-623-8861
sestes@kbmlawyers.com

I declare under penalty of perjury under the laws of the United States that the foregoing is True and correct.



Yohannes Sium, Esq. WSBA# 42420
Law Offices of Yohannes K. Sium
119 1st Avenue South Suite 260
Seattle, Washington 98104

APPENDIX A

Notices

Federal Register

Vol. 62, No. 28

Tuesday, February 11, 1997

This section of the FEDERAL REGISTER contains documents other than rules or proposed rules that are applicable to the public. Notices of hearings and investigations, committee meetings, agency decisions and rulings, delegations of authority, filing of petitions and applications and agency statements of organization and functions are examples of documents appearing in this section.

EXECUTIVE OFFICE OF THE PRESIDENT

Office of National Drug Control Policy

Administration Response to Arizona Proposition 200 and California Proposition 215

AGENCY: Office of National Drug Control Policy, Executive Office of the President.

ACTION: Notice.

SUMMARY: This notice lists the Federal government response to the recent passage of propositions which make dangerous drugs more available in California and Arizona. These measures pose a threat to the National Drug Control Strategy goal of reducing drug abuse in the United States. At the direction of the President, the Office of National Drug Control Policy (ONDCP) developed a coordinated administration strategy to respond to the actions in Arizona and California with the other agencies of the Federal Government to minimize the tragedy of drug abuse in America.

FOR FURTHER INFORMATION CONTACT: Comments and questions regarding this notice should be directed to Mr. Dan Schecter, Office of Demand Reduction, ONDCP, Executive Office of the President, 750 17th Street N.W., Washington, D.C. 20503, (202) 395-6733.

SUPPLEMENTARY INFORMATION: A Federal interagency working group chaired by ONDCP met four times in November and December. In developing this strategy, the inter-agency group gave due consideration to two key principles: federal authority vis a vis that of the states, and the requirement to ensure American citizens are provided safe and effective medicine. The President has approved this strategy, and Federal drug control agencies will undertake the following coordinated courses of action:

A. Objective 1—Maintain Effective Enforcement Efforts Within the Framework Created by the Federal Controlled Substances Act and the Food, Drug, and Cosmetic Act

Department of Justice's (DOJ) position is that a practitioner's action of recommending or prescribing Schedule I controlled substances is not consistent with the "public interest" (as that phrase is used in the federal Controlled Substances Act) and will lead to administrative action by the Drug Enforcement Administration (DEA) to revoke the practitioner's registration.

DOJ and Department of Health and Human Services (HHS) will send a letter to national, state, and local practitioner associations and licensing boards which states unequivocally that DEA will seek to revoke the DEA registrations of physicians who recommend or prescribe Schedule I controlled substances. This letter will outline the authority of the Inspector General for HHS to exclude specified individuals or entities from participation in the Medicare and Medicaid programs.

DOJ will continue existing enforcement programs using the following criteria: (a) the absence of a bona fide doctor-patient relationship; (b) a high volume of prescriptions or recommendations of Schedule I controlled substances; (c) the accumulation of significant profits or assets from the prescription or recommendation of Schedule I controlled substances; (d) Schedule I controlled substances being provided to minors; and/or (e) special circumstances, such as when death or serious bodily injury results from drugged driving. The five U.S. Attorneys in California and Arizona will continue to review cases for prosecution using these criteria.

DEA will adopt seizures of Schedule I controlled substances made by state and local law enforcement officials following an arrest where state and local prosecutors must decline prosecution because of the Propositions. Once in DEA's possession the drugs can be summarily forfeited and destroyed by DEA. State and local law enforcement officials will be encouraged to continue to execute state law to the fullest extent by having officers continue to make arrests and seizures under state law, leaving defendants to raise the medical

use provisions of the Propositions only as a defense to state prosecution. ★

Department of the Treasury (Treasury) and the Customs Service will continue to protect the nation's borders and take strong and appropriate enforcement action against imported or exported marijuana and other illegal drugs. The Customs Service will continue to: (a) seize unlawfully imported or exported marijuana and other illegal drugs; (b) assess civil penalties against persons violating federal drug laws; (c) seize conveyances facilitating the illegal import or export of marijuana and other illegal drugs; and (d) arrest persons committing Federal drug offenses and refer cases for prosecution to the appropriate Federal or state prosecutor.

Treasury and the Internal Revenue Service (IRS) will continue the enforcement of existing Federal tax laws which discourage illegal drug activities.

IRS will enforce existing Federal tax law as it relates to the requirement to report gross income from whatever source derived, including income from activities prohibited under Federal or state law.

Treasury will recommend that the IRS issue a revenue ruling, to the extent permissible under existing law, that would deny a medical expense deduction for amounts expended for illegal operations or treatments and for drugs, including Schedule I controlled substances, that are illegally procured under Federal or state law.

IRS will enforce existing Federal tax law as it relates to the disallowance of expenditures in connection with the illegal sale of drugs. To the extent that state laws result in efforts to conduct sales of controlled substances prohibited by Federal law, the IRS will disallow expenditures in connection with such sales to the fullest extent permissible under existing Federal tax law.

U.S. Postal Service will continue to pursue aggressively the detection and seizure of Schedule I controlled substances mailed through the US mails, particularly in California and Arizona, and the arrest of those using the mail to distribute Schedule I controlled substances.

DEA together with other Federal, state and local law enforcement agencies will work with private mail, parcel and freight services to ensure continuing compliance with internal company

policies dictating that these companies refuse to accept for shipment Schedule I controlled substances and that they notify law enforcement officials of such activities. Federal investigations and prosecutions will be instituted consistent with appropriate criteria.

B. Objective 2—Ensure the Integrity of the Medical-Scientific Process by Which Substances are Approved as Safe and Effective Medicines in Order to Protect Public Health

The Controlled Substances Act embodies the conclusion of the Congress, affirmed by DEA and HHS, that marijuana, as a Schedule I drug, has "high potential for abuse" and "no currently accepted medical use in treatment in the United States." To protect the public health, all evaluations of the medical usefulness of any controlled substance should be conducted through the Congressionally established research and approval process managed by the National Institutes of Health (NIH) and the Food and Drug Administration (FDA). Currently there are a few patients who receive marijuana through FDA approved investigations.

HHS to ensure the continued protection of the public health will: (a) examine all medical and scientific evidence relevant to the perceived medical usefulness of marijuana; (b) identify gaps in knowledge and research regarding the health effects of marijuana; (c) determine whether further research or scientific evaluation could answer these questions; and (d) determine how that research could be designed and conducted to yield scientifically useful results.

HHS will undertake discussions with medical organizations throughout the nation: (a) to address the "compassionate use" message; and (b) to educate medical and public health professionals by underscoring the dangers of smoked marijuana and explaining the views of NIH that a variety of approved medications are clinically proven to be safe and effective in treating the illnesses for which marijuana is purported to provide relief, such as pain, nausea, wasting syndrome, multiple sclerosis, and glaucoma.

C. Objective 3—Preserve Federal Drug-Free Workplace and Safety Programs

Transportation Workers: Department of Transportation (DOT) has issued a formal advisory to the transportation industry that safety-sensitive transportation workers who test positive under the Federally-required drug testing program may not under any circumstance use state law as a

legitimate medical explanation for the presence of prohibited drugs. DOT is encouraging private employers to follow its example.

General Contractors and Grantees: Under the Drug-Free Workplace Act, the recipients of Federal grants or contracts must have policies that prohibit the use of illegal drugs. Each Federal agency will issue a notice to its grantees and contractors to remind them: (a) of their responsibilities; (b) that any use of marijuana or other Schedule I controlled substances remains a prohibited activity; and (c) that the failure to comply with this prohibition will make the grantee or contractor subject to the loss of eligibility to receive Federal grants and contracts. Further, Federal agencies will increase their efforts to monitor compliance with the provisions of the Act, and to institute suspension or debarment actions against violators—with special priority given to states enacting drug medicalization measures.

Federal Civilian Employees: HHS will issue policy guidance to all 130 Federal Agency Drug-Free Workplace program coordinators, the 72 laboratories certified by HHS to conduct drug tests, and trade publications that reach medical review officers. This policy guidance states that the Propositions do not change the requirements of the Federal Drug-Free Workplace Program, which will continue to be fully enforced for federal civilian employees nationwide. Medical Review Officers will not accept physician recommendations for Schedule I substances as a legitimate explanation for a positive drug test.

Department of Defense (DOD) and the Military Services: DOD will instruct civilian employees and military personnel in the active, reserve and National Guard components, that DOD is a drug-free organization, a fact that is not changed by the Propositions. The requirement that all DOD contractors maintain drug-free workplaces will continue to be enforced.

Nuclear Industry Workers: The Nuclear Regulatory Commission will continue to demand drug-free employees in the nuclear power industry, and will develop a formal advisory to emphasize that its drug free workplace regulations continue to apply.

Public Housing: The Propositions will not affect the Department of Housing and Urban Development's (HUD) continued aggressive execution of the "One Strike and You're Out" policy to improve the safety and security of our nation's public housing developments. HUD's principal tool for implementing "One Strike" will be the systematic

evaluation of public housing agencies screening and evictions efforts through the Public Housing Management Assessment Program. This program will give HUD a standard measurement of the progress of all public housing authorities in developing effective law enforcement, screening, and occupancy policies to reduce the level of drug use, crime, and drug distribution and sales in their communities.

Safe Work Places: Department of Labor (DOL) will continue to implement its Working Partners Initiative, providing information to small businesses about workplace substance abuse prevention programs, focusing specific attention on trade and business organizations located in California and Arizona. DOL will accelerate its effort to post its updated Substance Abuse Information Database (SAID) on the Internet. SAID will provide information to businesses about workplace substance abuse and how to establish workplace substance abuse prevention programs. DOL will give priority to its efforts in California and Arizona.

DOL's Occupational Safety and Health Administration (OSHA) will send letters to the California and Arizona Occupational Safety and Health Administrations reiterating the dangers of drugs in the workplace and providing information on programs to help employers address these problems.

DOL's Mine Safety and Health Administration will continue to strictly enforce the prohibition on the use of alcohol and illegal drugs notwithstanding these Propositions.

D. Objective 4—Protect Children from Increased Marijuana Availability and Use

HHS and the Department of Education will educate the public in both Arizona and California about the real and proven dangers of smoking marijuana. A message will be tailored for preteens, teens, parents, educators, and medical professionals. Research demonstrates that marijuana: (a) harms the brain, heart, lungs, and immune system; and (b) limits learning, memory, perception, judgment, and the ability to drive a motor vehicle. In addition, research shows that marijuana smoke typically contains over 400 carcinogenic compounds and may be addictive. The message will remind the public there is no medical use for smoked marijuana and will educate the public about strategies to prevent marijuana use. The message will also remind the public that the production, sale, and distribution of marijuana for medical uses not approved by DEA violates the

Controlled Substances Act and the Federal Food, Drug, and Cosmetic Act.

HHS will analyze all available data on marijuana use, expand ongoing surveys to determine current levels of marijuana use in California and Arizona, and track changes in marijuana use in those states.

HHS will develop the survey capacity to assess trends in drug use in all states on a state-by-state basis.

The Department of Education (Education) will use provisions of the Safe and Drug Free Schools Act to reinforce the message to all local education agencies receiving Federal Safe and Drug Free School funds that any drug possession or use will not be tolerated in schools. This affects approximately 95% of school districts. Notwithstanding the passage of the two Propositions, local education agencies must continue to: (a) develop programs which prevent the use, possession, and distribution of tobacco, alcohol, and illegal drugs by students; (b) develop programs which prevent the illegal use, possession, and distribution of such substances by school employees; and (c) ensure that programs supported by and with Federal Safe and Drug Free Schools funds convey the message that the illegal use of alcohol and other drugs, including marijuana, is wrong and harmful.

Education will review with educators in Arizona and California the effect Propositions 200 and 215 will have on drug use by students. They will also communicate nationally with school superintendents, administrators, principals, boards of education, and PTAs about the Arizona and California Propositions and the implications for their states.

Education will develop a model policy to confront "medical marijuana" use in schools and outline actions educators can take to prevent illicit drugs from coming into schools.

Education will develop model drug prevention programs to discourage marijuana use. These models will be disseminated to the states at a Spring 1997 conference.

ONDCP and DOT will provide recommendations pursuant to the October 19, 1996 Presidential directive to deter teen drug use and drugged driving through pre-license drug testing, strengthened law enforcement and other means. The recommendations will underscore the point that the use of marijuana for any reason endangers the health and safety of the public.

Legislative Enactments: ONDCP, HHS and DOJ will work with Congress to consider changes to the Federal Food, Drug, and Cosmetic Act and the Controlled Substances Act, as

appropriate, to limit the states' ability to rely on these and similar medical use provisions. The Administration believes that working with Congress is the course of action that will affirm the national policy to control substances that have a high potential for abuse and no accepted medical use. The objective is to provide a uniform policy which preserves the integrity of the medical-scientific process by which substances are approved as safe and effective medicines. We will also consider additional steps, including conditioning Federal funds on compliance with the Controlled Substances Act and the National Drug Control Strategy. ★

Signed at Washington, D.C. this 15th day of January, 1997.

Barry R. McCaffrey,
Director.

[FR Doc. 97-3334 Filed 2-10-97; 8:45 am]
BILLING CODE 3160-02-P

Designation of New High Intensity Drug Trafficking Areas ★

AGENCY: Office of National Drug Control Policy, Executive Office of the President.

ACTION: Notice.

SUMMARY: This notice lists the five new High Intensity Drug Trafficking Areas (HIDTAs) designated by the Director, Office of National Drug Control Policy. HIDTAs are regions identified as having the most critical drug trafficking problems that adversely affect the United States. These new HIDTAs are designated pursuant to 21 U.S.C. 1504(c), as amended, to promote more effective coordination of drug control efforts. The additional resources provided by Congress enable task forces of local, State, and Federal officials to assess regional drug threats, design strategies to combat the threats, develop initiatives to implement the strategies, and evaluate effectiveness of these coordinated efforts.

FOR FURTHER INFORMATION CONTACT: Comments and questions regarding this notice should be directed to Mr. Richard Y. Yamamoto, Director, HIDTA, Office of National Drug Control Policy, Executive Office of the President, 750 17th Street N.W., Washington, D.C. 20503, (202) 395-6755.

SUPPLEMENTARY INFORMATION: In 1990, the Director of ONDCP designated the first five HIDTAs. These original HIDTAs, areas through which most illegal drugs enter the United States, are Houston, Los Angeles, New York/New Jersey, South Florida, and the Southwest Border. In 1994, the Director

designated the Washington/Baltimore HIDTA to address the extensive drug distribution networks serving hardcore drug users. Also in 1994, the Director designated Puerto Rico/U.S. Virgin Islands as a HIDTA based on the significant amount of drugs entering the United States through this region.

In 1995, the Director designated three more HIDTAs in Atlanta, Chicago, and Philadelphia/Camden to target drug abuse and drug trafficking in those areas, specifically augmenting Empowerment Zone programs.

The five new HIDTAs will build upon the effective efforts of previously established HIDTAs. In Fiscal Year 1997, the HIDTA program will receive \$140 million in Federal resources. The program will support more than 150 co-located officer/agent task forces; strengthen mutually supporting local, State, and Federal drug trafficking and money laundering task forces; bolster information analysis and sharing networks; and, improve integration of law enforcement, drug treatment, and drug abuse prevention programs. The states and counties included in the five new HIDTAs are:

(1) *Cascade HIDTA:* State of Washington; King, Pierce, Skagit, Snohomish, Thurston, Whatcom, and Yakima counties; ★

(2) *Gulf Coast HIDTA:* State of Alabama; Baldwin, Jefferson, Mobile, and Montgomery counties; State of Louisiana; Caddo, East Baton Rouge, Jefferson, and Orleans parishes; and State of Mississippi; Hancock, Harrison, Hinds, and Jackson counties.

(3) *Lake County HIDTA:* State of Indiana; Lake County.

(4) *Midwest HIDTA:* State of Iowa; Muscatine, Polk, Pottawattamie, Scott, and Woodbury counties; State of Kansas; Cherokee, Crawford, Johnson, Labette, Leavenworth, Saline, Seward, and Wyandotte counties; State of Missouri; Cape Girardeau, Christian, Clay, Jackson, Lafayette, Lawrence, Ray, Scott, and St. Charles counties, and the city of St. Louis; State of Nebraska; Dakota, Dawson, Douglas, Hall, Lancaster, Sarpy, and Scott's Bluff counties; State of South Dakota; Clay, Codington, Custer, Fall River, Lawrence, Lincoln, Meade, Minnehaha, Pennington, Union, and Yankton counties.

(4) *Rocky Mountain HIDTA:* State of Colorado; Adams, Arapahoe, Denver, Douglas, Eagle, El Paso, Garfield, Jefferson, La Plata, and Mesa counties; State of Utah; Davis, Salt Lake, Summit, Utah, and Weber counties; and State of Wyoming; Laramie, Natrona, and Sweetwater counties.

APPENDIX B

**TACOMA REGIONAL TASK FORCE
EXECUTIVE BOARD MEETING
MINUTES
February 14, 2007**

Present: RAC Scott Gordon, DEA
GS Fred Bjornberg, WSP
Chief Jim Collyer, PPD
Chief Mike Mitchell, BLPD
Lt. Rich Wiley, WSP
Capt. Paul Mielbrecht, TPD
Capt. Rick Adamson, PCSO
Craig Adams, PCPO
Julie Lane, PCPO
Doug Hill, PCPO
Asst Chief Dave Karnits, WSP
Lt. Larry Minturn, PCSO
Act.Lt. Dana Hubbard, BLPD
Capt. Tim Braniff, WSP

PROJECT MANAGER'S REPORT:

Rac Gordon informed the board that during the month of January there was a case wherein we buy/busted 5 defendants for distributing Meth. We seized 4 cars, 2 guns and arrested 5 [REDACTED]. They were stashing their dope in the rear speakers of a vehicle.

The group also assisted WESTNET with the search warrants on several medical marijuana operations. The net plant seizure was 1193 plants, arrest of 5 people who tended the grows two of who were [REDACTED] who gave good implicating statements. It is believed that the targets of the investigation [REDACTED] and [REDACTED] are working with [REDACTED]

[REDACTED] The Department of Defense is looking into [REDACTED] is the director of [REDACTED] a [REDACTED] facility who sells plants to patients so that they can have their own grow and supply. Federal Law does not recognize Medical Marijuana consequently if our office goes out and does a raid and finds marijuana there the plants will be seized even though they maybe under the medical marijuana threshold.

The office also has done several grows in the city of Tacoma. These seem to be run by members of [REDACTED] community.

The office is continuing working on a case of Meth Traffickers who are using a converted house in the [REDACTED] area to deal out of. This is suppose to be a ½ way house but not being used for that purpose. The main players are using the addicts to wire money to [REDACTED]. They are using [REDACTED] to do the wire transfers and it is estimated that since Thanksgiving of 2006 \$200,000 has been wired to [REDACTED]. One load of Meth that was taken off came back from the lab as being 98% pure Meth.