

Health & Human Services Committee

Monday, April 24, 2017 2:00 PM - 5:00 PM Morris Hall (17 HOB)

Action Packet REVISED

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

Summary:

Health & Human Services Committee

Monday April 24, 2017 02:00 pm

HB 1077 Favorable With Committee Substitute	Yeas:	14	Nays: 4
Amendment 625385 Adopted Without Objection			
CS/CS/HB 1191 Favorable With Committee Substitute Amendment 175309 Adopted Without Objection	Yeas:	16	Nays: 0
PCS for CS/HB 1397 Favorable	Yeas:	14	Nays: 4
HB 7095 Favorable With Committee Substitute Amendment 454473 Adopted Without Objection	Yeas:	17	Nays: 0

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

Attendance:

	Present	Absent	Excused
W. Travis Cummings (Chair)	X		
Thad Altman	X		
Daisy Baez	X		
Lori Berman	×		
Jason Brodeur	×		
Bobby DuBose	×		
Michael Grant	X		
Roy Hardemon	X		
Gayle Harrell	×		
MaryLynn Magar	×		
Ralph Massullo, MD	X		
Alexandra Miller	X		
Cary Pigman	×		
Paul Renner	X		
David Santiago	×		
David Silvers	×		
Frank White	X		
Patricia Williams	X		
Totals:	18	0	0

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB) **HB 1077 : Trauma Services**

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez		X			
Lori Berman		X			
Jason Brodeur	X				
Bobby DuBose	,	X			•
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	. X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X			<u> </u>	
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams		Х			
W. Travis Cummings (Chair)	X				
	Total Yeas: 14	Total Nays: 4	ŀ		

HB 1077 Amendments

Amendment 625385

X Adopted Without Objection

Appearances:

Bill & Amendment #625385 Ecenia, Steve (Lobbyist) - Proponent HCA P.O. Box 551 Tallahassee FL 32302 Phone: (850) 681-6788

Bill & Amendment #625385 Oeters, Phillis (Lobbyist) - Waive In Opposition Baptist Health South Florida

Vice President 685 S Red Road Coral Gables FL 33146 Phone: (305) 205-2457

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

HB 1077 : Trauma Services (continued)

Appearances: (continued)

Runk, Paul (Lobbyist) (State Employee) - Waive In Support Department of Health Director of Legislative Planning 2585 Merchants Row Blvd Tallahassee FL 32399 Phone: (850) 245-4006

Ashburn, David (Lobbyist) - Opponent Florida Hospital Association Managing Shareholder 101 E College Ave Tallahassee FL 32301 Phone: (850) 222-6891

Delegal, Mark (Lobbyist) - Opponent Safety Net Hospital Alliance of Florida General Counsel 315 S Calhoun St Tallahassee FL 32301 Phone: (850) 425-5685

Amendment #625385
Shouppe, Clint (Lobbyist) - Waive In Opposition
St Joseph's Hospital
State Gov't Relations Mgr
2985 Drew St
Clearwater FL 33759
Phone: (813) 767-0550

Bax, Christian (State Employee) - Information Only Department of Health Director, OCU 4052 Bald Cypress Tallahassee FL Phone: (850) 245-4444

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee: Health & H Services	luman Bill Number:
Meeting Date: Place: Monar Time:	Date Received: Holf Date Reported: Subject: Trains Demces
Committee/Subcommittee Action: Favorable Favorable w/ amendment amend	
Final Vote	tukiall

1	Vote		Dtuk 625	all a						
	Bill	MEMBERS	625	<u> 385</u>				I		
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
		Altman	1							
	1	Baez	W	1						
	- 1	Berman	(0)	<u>]. </u>						
i		Brodeur	20	<u> </u>						
		DuBose		D.						
i		Grant								
1		Hardemon								
1		Harrell								
<u>i</u>		Magar								
i		Massullo								
i		Miller								
1		Pigman								
i		Renner								
i		Santiago								
i		Silvers								
1		White								
	1	Williams								
		Cummings, Chair								
Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
14	4									

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

CS/CS/HB 1191: Medication Synchronization

Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman			X		
Daisy Baez	X				
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell			X		
MaryLynn Magar	X		•		
Raiph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	X				
	Total Yeas: 16	Total Nays: 0)		

CS/CS/HB 1191 Amendments

Amendment 175309

X Adopted Without Objection

Appearances:

Jordan, Matt (Lobbyist) - Waive In Support American Cancer Society GRD 1922 Dellwood Dr Tallahassee FL 32303 Phone: (850) 519-2801

Diaz Lyon, Aimee (Lobbyist) - Waive In Support Florida Academy of Family Physicians 119 South Monroe St Ste. 200 Tallahassee FL 32301

Phone: (850) 205-9000

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

CS/CS/HB 1191: Medication Synchronization (continued)

Appearances: (continued)

West, Sally (Lobbyist) (State Employee) - Waive In Support

Walgreens

Regional Director Government Relations

2966 Bayshore Dr Tallahassee FL 32309 Phone: (850) 210-2461

Thomas, Mary (Lobbyist) - Waive In Support

Florida Medical Association 1430 Piedmont Dr E Tallahassee FL 32308 Phone: (850) 224-6496

Winn, Stephen (Lobbyist) - Waive In Support

Florida Osteopathic Medical Association

Executive Director 2544 Blairstone Pines Dr Tallahassee FL 32301 Phone: (850) 878-7364

Labasky, Beth (Lobbyist) - Waive In Support

Alpha One Foundation
Director Gov't Relations
1400 Village Square Blvd Ste. 3-116
Tallahassee FL 32312

Phone: (850) 322-7335

Bill & Amendment

Hansen, Christopher (Lobbyist) - Waive In Support

AstraZeneca PLC Ballard Partners 403 E Park Ave Tallahassee FL 32301

Phone: (850) 577-0444

Nuland, Chris (Lobbyist) - Waive In Support

Florida Chapter, American College of Physicians

1000 Riverside Ave. #240 Jacksonville Fl 32204 Phone: (904) 233-3051

Barker, Dorene (Lobbyist) - Waive In Support

AARP

Associate State Director 200 W College Ave Tallahassee FL 32301 Phone: (850) 228-6387

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Committee/Subcommittee:	Health & Human	Bill Numbers
	Services,	C9C3/HB1191
Meeting Date:	412411	Date Received:/
Place:	Money Holl	Date Reported:
Time:	TOOK M	Subject: Medicalor
	V.	Dinchronization
Committee/Subcommittee	Action:	
Favorable		Retained for Reconsideration
☐ / Favorable w/	amendments	Reconsidered
Favorable w/Commi	ttee/Subcommittee Subs	titute Temporarily Postponed
Other Action:		Unfavorable
	4	

	Vote Bill	MEMBERS	I ama	369				·		
Yea	Nay	MEMBERS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
	ļ <u>.</u>	Altman	1 11							
i/		Baez	W/	,						
1,	-	Berman	1	1						
1,		Brodeur	6	1						
		DuBose	J							
ĺ		Grant								
i		Hardemon								
		Harrell								
i		Magar								
i /		Massullo							-	
	<u> </u>	Miller								
سيا		Pigman								
1/		Renner								
i		Santiago								
		Silvers								
أسسا		White							-	
i		Williams								
		Cummings, Chair								
Vasa	NI	TOTALC	V	NI	Vass	Name	Vasa	Nave	Vacc	Nor-
Yeas / b	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
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Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

PCS for CS/HB 1397: Medical Use of Marijuana

X Favorable

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez		X			
Lori Berman		X			
Jason Brodeur	X				
Bobby DuBose		X			
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams		Х			
W. Travis Cummings (Chair)	X				
	Total Yeas: 14	Total Nays: 4	4		

Appearances:

Bishop, Barney (Lobbyist) - Proponent Florida Smart Justice Alliance President & CEO 204 S Monroe St Tallahassee FL 32301

Phone: (850) 510-9922

Medical Use of Marijuana
Camacho, Carmella (General Public) - Information Only
Cannangels on behalf of #TeamLandon
Biz Owner

265 Bayshore Dr Freeport FL 32439 Phone: (503) 505-1715

Hightower, John - not present (General Public) - Opponent

Patients/Self 2807 Sweetbriar Drive Tallahassee FL 32312 Phone: (850) 519-0363 Amendment No.

COMMITTEE/SUBCOMMI	TTEE ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	<u>\(\frac{1}{2}\)(\(\frac{1}{2}\)(\(\frac{1}{2}\)(\(\frac{1}{2}\))</u>
WITHDRAWN	(Y/N)
OTHER	<u>-:</u>
POWN REPT A FEW YORK CHARLES AND ADMINISTRATION OF THE PARTY ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE PARTY ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF THE PARTY ADMINISTRATION OF THE PARTY AND ADMINISTR	
Committee/Subcommittee	hearing bill: Health & Human Services
Committee	

Amendment

Representative DuBose offered the following:

Remove lines 595-611 and insert:

- 3. The department shall also license as a medical marijuana treatment center one applicant that is a recognized class member of Pigford v. Glickman, 185 F.R.D. 82 (D.D.C. 1999), or In Re Black Farmers Litig., 856 F. Supp. 2d 1 (D.D.C. 2011); is a member of the Black Farmers and Agriculturalists Association Florida Chapter; and meets the requirements of subparagraphs (b) 2.-7. and demonstrates the ability to cultivate and process marijuana and low-THC cannabis.
- 4. Upon the registration of 150,000 active qualified patients in the medical marijuana use registry, the department

COMMITTEE/SUBCOMMITTEE AMENDMENT Bill No. PCS for CS/HB 1397 (2017)

Amendment No.

shall also license as a medical marijuana treatment center one
applicant per region which was a dispensing organization
applicant under former s. 381.986, Florida Statutes 2014; was
the next-highest scoring applicant after the applicant or
applicants that were awarded a license for that region; is not
licensed in another region and meets the requirements of this
section.

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

PCS for CS/HB 1397: Medical Use of Marijuana (continued)

Appearances: (continued)

Rotundo, Louis (Lobbyist) - Proponent CBSY Inc 302 Pinestraw Circle Altamonte Springs FL 32714

Phone: (407) 699-9361

Deckerhoff, Dennis (General Public) - Opponent

Patients of Florida; Barrett Deckerhoff

Caregiver/Father 5704 Victor Brown Trail Tallahassee FL 32303

Phone: (850) 567-0405

Pollara, Benjamin (Lobbyist) - Opponent

Florida for Care Executive Director 801 Arthur Godfrey Road Ste. 204-A Miami Beach FL 33140

Phone: (305) 673-2585

Rutherford, Charlie (General Public) - Opponent

13111 Brenwood Trail Minnetonka MN 55343 Phone: (612) 655-5494

Watson, Ronald (Lobbyist) - Opponent

ALTMed; Cannavision; SLGT Inc.

Lobbyist

3738 Mundon Way Tallahassee FL 32309 Phone: (850) 567-1202

Villar, Melissa (General Public) - Opponent

NORML Tallahassee Executive Director 169 Sinclair Rd Tallahassee FL 32312 Phone: (850) 284-2090

Mullis, Stephany (General Public) - Opponent

Myself 331 SE Webley Ct Lake City FL 32035 Phone: (386) 288-2893

Cannella-Krehl, Josephine (General Public) - Opponent

Suffering Patients
Licensed Clinical Social Worker
3784 Wentworth
Tallahassee FL 32311
Phone: (850) 653-6928

Committee meeting was reported out: Monday, April 24, 2017 5:48PM

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

PCS for CS/HB 1397 : Medical Use of Marijuana (continued)

Appearances: (continued)

Chudnow, Chief Jeffrey (General Public) - Waive In Support

The Florida Police Chiefs Association

Chief of Police 2636 Mitcham Drive Tallahassee FL 32308 Phone: (850) 219-3631

Rowland, Ethel (General Public) - Waive In Opposition

Florida Cannabis Action Network

President

1375 Cypress Ave

Melbourne FL 32935

Phone: (321) 253-3673

Custin, David (Lobbyist) - Opponent

Eureka Vapor, Inc.; Kaycha Holdings, LLC

Lobbyist

6401 SW 113Th PL

Miami FL 33173

Phone: (305) 607-8576

Stein, Gary (General Public) - Opponent

Self

7035 Belt Linn Loop

Wesley Chapel FL 33545

Phone: (513) 305-8280

Visher, Micheal (General Public) - Opponent

Self; US Cannabis Pharm, Research & Devel.

President

1222 Hillandale Reserve

Tampa FL

Phone: (813) 992-8474

Bambis, Jared - Opponent

Myself

9981 N. Abiaca Circle

Davie FL 33328

Phone: (954) 531-9782

Wilson, Dr. Latresa (General Public) - Proponent

Black Farmers & Agriculture Association

Vice Pressident

3330 NW 2nd Ave

Ocala FL 34478

Phone: (352) 425-5676

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

PCS for CS/HB 1397 : Medical Use of Marijuana (continued)

Appearances: (continued)

Lowrey, Thad (Lobbyist) - Waive In Support Operation PAR VP Governmental Relations 7720 Washington St Port Richey FL 34668 Phone: (727) 992-8508

Bowen, Stephani Scruggs (General Public) - Opponent Epilepsy Foundation of Florida 608 Paulding Ave Pensacola FL 32507 Phone: (850) 530-1874

Pitts, Brian - Opponent Justice-2-Jesus Trustee 1119 Newton Ave. S. St. Petersburg FL 33705 Phone: 727-897-9291

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Comm	ittee/Su	bcommittee: Healt	th & Human		Bill Nu	mber:	, ,	أدحأ	10 120	כור)
		Servi	ces	<u></u>		<u> </u>	105 K	05//	<u> 1</u> 13/3	77
	M	leeting Date: 412	4/10	_	ate Rec	eived:	<i>U</i>	J		
		Place: Mo	Min Hok	<u>(</u>	ate Repo			0 1		
		Time: 2:0	50h		Su	bject: 📉	10d/4(0	1 lle	_1	
			7			\mathcal{M}	ory.	001-2	4	
<u> </u>		bcommittee Action:					J		-	
	Favorab							Reconsid	leration	
	Favorab		endments				nsidered			
		le w/Committee/Sub	ocommittee S	ubstitute	·			Postpon	ed	
	Other A	ction:		7 0		Unfa	vorable			
			1 00000	1/2	r					
	Vote		d'or	1						
	Bill	MEMBERS	71	Wee_		T-22		T		·
Yea	Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
		Altman	17	h						
	1	Baez	1 - Fr. 1	1						
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V	<u> </u>	Brodeur		9						
	- 1/	DuBose								
	-	Grant								
i/		Hardemon								
<u>i</u>	ļ	Harrell								
<u></u>		Magar								
<u> </u>		Massullo								
		Miller								
		Pigman								
		Renner					<u></u>			
		Santiago								
		Silvers								
		White Williams								
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<i>ν</i>		Cummings, Chair								
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Yeas	Nays	TOTALS	Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays

Health & Human Services Committee

4/24/2017 2:00PM

Location: Morris Hall (17 HOB)

HB 7095: Pub. Rec./Medical Marijuana Use Registry

X Favorable With Committee Substitute

	Yea	Nay	No Vote	Absentee Yea	Absentee Nay
Thad Altman	X				
Daisy Baez			X		
Lori Berman	X				
Jason Brodeur	X				
Bobby DuBose	X				
Michael Grant	X				
Roy Hardemon	X				
Gayle Harrell	X				
MaryLynn Magar	X				
Ralph Massullo, MD	X				
Alexandra Miller	X				
Cary Pigman	X				
Paul Renner	X				
David Santiago	X				
David Silvers	X				
Frank White	X				
Patricia Williams	X				
W. Travis Cummings (Chair)	. X				
	Total Yeas: 17	Total Nays: 0)		

HB 7095 Amendments

Amendment 454473

X Adopted Without Objection

Appearances:

Bishop, Barney - not present (Lobbyist) - Waive In Support Florida Smart Justice Alliance President & CEO 204 S Monroe St Tallahassee FL 32301

Phone: (850) 510-9922

House of Representatives COMMITTEE/SUBCOMMITTEE BILL ACTION WORKSHEET

Comm	M ittee/Sul Fayorab Favorab	le w/ amen le w/Committee/Subco	dments		m	eived: orted: bject: \(\frac{1}{\llower} \) Reta Reco	ined for onsidered porarily avorable	ec / fi		(
Final	Vote		Stuk	all						<u></u>
On	Bill	MEMBERS	454	173				,		
Yea	_Nay		Yeas	Nays	Yeas	Nays	Yeas	Nays	Yeas	Nays
1		Altman	1	1		<u> </u>				
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		DuBose	<i>-</i>							
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سا		Harrell		ļ						
<u> </u>	_	Magar		ļ						
		Massullo								
		Miller		ļ <u>.</u>						
		Pigman								
1		Renner								
-		Santiago								
1/		Silvers								
		White								
/		Williams								
		Cummings, Chair								
								ļ		

Nays

Yeas

Yeas

Nays

Yeas

Nays

Nays

Yeas

Yeas

111

Nays

TOTALS



20

LOR	IDA ASSIST	tant at the meeting.		1	111	
				BIII/PC	Bill Amendment S/PCB Number: H 13 10 77	
		_		Amend	ment Number:	
Name:	PI	hillis C)etors			
Represen	nting:	cotist	Hen 14	<u> </u>		
Title: _	Ev	ahme	Vice	Pres	sident	
		55 Roc	. —			
City:	Coral	hobles,		_	State/Zip: F1_ 33146	
		05-205-	2457	_	Meeting Date: 4/24/17	
Comm	ittee/Subcomn	nittee: #	45			
Presen	ntation/Worksh	op Topic:	Trour	nc	Regulation	
		Registered Lo	obbyist: YES] и	$\circ \Box$	
		State Employ	ee: YES] N	o 🔀	
<u> </u>						
=	vish to speak	anca ta an inguiny fa	s information ma	ada bu ma	ambar committee ar staff	
			illioillation ma	ide by III	ember, committee, or staff	
	Appearing in response to subpoena Appearing at the written request of the chair					
Judge or elected officer appearing in official capacity						
	_	nce form submitted c				
If you are t	testifying on an an	nendment, please also	indicate your pos	ition as a	proponent or opponent on the bill as a whole.)	
Bil		Proponent	Opponent \(\sum_{\text{\tinit}\\ \text{\texi}\text{\text{\text{\text{\text{\text{\texi{\text{\texi}\text{\texi\texi{\texitt{\text{\ti}\text{\texit{\text{\texi{\texi{\texi{\texi}\text{\texi{\	7 1	Info only	
An	mendment:	Proponent	Opponent 🔀	3	Info only	





Clinf Shouppe	Bill Amendment Bill/PCS/PCB Number: HB 1007 Amendment Number: 625385				
Name: Clim Showns					
Representing: 54. Joseph Wight					
Title: Stak Covern Predu My	· · · · · · · · · · · · · · · · · · ·				
Address: 2985 Drew 5+					
City: Chermle	State/Zip: F2 33759				
Phone Number: \$13 - 767 - 0530	Meeting Date: 42417				
Committee/Subcommittee: \frac{1}{100}	· ·				
Committee/Subcommittee:	1 2 Million				
Presentation/Workshop Topic:					
Registered Lobbyist: YES	⊠ NO □				
State Employee: YES	□ NO 🛛				
I wish to speak	made hu month or committee or staff				
Appearing in response to an inquiry for information Appearing in response to subpoena	made by member, committee, or staff				
Appearing at the written request of the chair					
Judge or elected officer appearing in official capacity					
Lobbyist Appearance form submitted online					
If you are testifying on an amendment, please also indicate your					
Bill: Proponent Opponent	Info only				
Amendment: Proponent Opponent	Info only				



			-				
				Bill Amendment Bill/PCS/PCB Number: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
				Amendment Number:			
Name	Jame: Clint Showppe						
Repre	Representing: St. Josephi Hospital						
Titl	Title: State Governer Roberts Mar						
Ad	dress: 2	985 Drw 3	24				
Cit	y:	NA		State/Zip: Fl 3575			
Pho	one Number:	813-767-	9772	Meeting Date: 4 2417			
		mittee: \hat\ca	•	,			
Pre	esentation/Works	shop Topic:					
		Registered L	obbyist: YES	⊠ NO □			
		State Emplo	yee: YES	□ NO [∑]			
\square	I wish to speak						
	·	nonse to an inquiry f	or information	made by member, committee, or staff			
		oonse to subpoena	or imormation	made by member, committee, or stan			
		•	he chair				
	Appearing at the written request of the chair Judge or elected officer appearing in official capacity						
Lobbyist Appearance form submitted online							
If you	are testifying on an a	amendment, please als	o indicate your p	osition as a proponent or opponent on the bill as a whole.)			
	Bill:	Proponent	Opponent	Info only			
	Amendment:	Proponent	Opponent	Info only			



Assistant at the meeting.	/
Bill Amendment Bill/PCS/PCB Number: 1077 Amendment Number: 6153851	
Name: MARK Deleas,	
Representing: Safety Not Hogo ta allance of FL	
Title: Tenera Ombe	
Address: 315 5. Cathoun St., Suite 600	
City: Tollahassee State/Zip: FL 37301	
15 11-1 51 81 81 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
11 1/0 11/	
Committee/Subcommittee: Hasth & Human Lluice - House	
Presentation/Workshop Topic:	
Registered Lobbyist: YES NO NO	
State Employee: YES NO	
I wish to speak	
Appearing in response to an inquiry for information made by member, committee, or staff	
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	
Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)	
Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	



80615874



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee administrative assistant at the meeting.

		✓	Bill Amendment			
		Bill Number: HB 1077: Trauma Services				
		PCB/PCS/Ar	mendment #: N/A			
Name:	Ashburn, David					
Representing:	Florida Hospital Associa	tion				
Title:	Managing Shareholder					
Address:	101 E College Ave					
City:	Tallahassee	State/Zip:	FL 32301			
Phone Number:	(850) 222-6891	Meeting Date:	Apr 24 2017 2:00PM			
Committee/Subo	committee: Health &	k Human Services Commit	tee			
Presentation/Wo	orkshop Topic: N/A					
☑ Registered Lo	obbyist		Bill			
☐ State Employ	ee		Opponent			
🗹 I Wish To Sp	eak		Amendment			
Appearing in response to subpoena N/A						
Appearing in	response to an inquiry	for information made by	member, committee or staff			
☐ Appearing at	the written request of the	he chair				
	ted officer appearing in					
🗆 Lobbyist App	earance Form Submitte	ed				





				Bill/PC	Bill S/PCB Numb	Amendment
					dment Numb	
Name	: Parf	Rink				
Repre	senting: \mathcal{D}_{ℓ}	pt. ox He	alpha			
Title	e: <i>Directe</i>	or ox Legis	slative	- Plan	nning	<u>) </u>
		mucha	1 1		/ /	
City	. Talla	hasse			State/Zip:_	FC 32399
		50-245-100	06		Meeting D	ate: 4-24-17
Cor	nmittee/Subcom	mittee: Heal	lh & HUN	nan Sa	rvices	
Pre	sentation/Works	hop Topic: <u>Trac</u>	ima C	enfer	3_	
			obbyist: YES	/	10 🗍	
		State Emplo			10 🗍	
	/		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	I wish to speak					
	Appearing in resp	oonse to an inquiry fo	or information	made by m	nember, comr	nittee, or staff
	Appearing in resp	oonse to subpoena				
	Appearing at the	written request of th	ne chair			
	Judge or elected officer appearing in official capacity					
Lobbyist Appearance form submitted online						
If vou a	are testifving on an a	ımendment, please alsı	o indicate vour i	oosition as a	proponent or	opponent on the bill as a whole.)
, ,	Bill:	Proponent 🔽	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



	- Zamie / / II	use fill out the <u>entire</u> fo stant at the meeting.	orm and submit <u>k</u>	ooth copies	s to the Committee Admin	istrative
					B/II Amen PCB Number: 107 ent Number: 625	
Name: _	Ster	e Eceni	۵			
Represe	enting:	2 A				
Title:						
Addr	ess: PO.	Box 551	·			
City:	Tallah	,asseq	· · · · · · · · · · · · · · · · · · ·	_ s	tate/Zip: Fl 32	130]
Phon	e Number: $\underline{\mathcal{S}}$	50-681-6	788	N	Meeting Date: 4/24	(17
Comr	mittee/Subcom	nmittee: Hea	1th aus			4 5
Prese	entation/Works	shop Topic:				
		Registered Lo	bbyist: YES	NO		
		State Employ	ee: YES] NO		
ſ					_	
<u>J</u> 1	wish to speak					
	Appearing in res	ponse to an inquiry for	information ma	de by men	nber, committee, or staff	
	Appearing in res	ponse to subpoena				
	Appearing at the written request of the chair					
	Judge or elected officer appearing in official capacity					
	obbyist Appeara	ance form submitted o	nline			
(If you are	e testifying on an a	amendment, please also	indicate your posi	tion as a pro	oponent or opponent on the	bill as a whole.)
E	Bill:	Proponent Proponent	Opponent] Ir	nfo only	
,	Amendment:	Proponent 🔽	Opponent] Ir	nfo only	





				Bill/F	Bill PCS/PCB Number:	Amendment HB 1191
				Ame	ndment Number: ₋	
Name	Doren	Barker				
Repre	esenting: AA	RP				
	Δ	inte State 2	Director			
Add	dress:	W Colley	je De,	Stc :	304	· ·
City	1)				State/Zip:_ <i>FC</i>	<u> 3030/</u>
Pho	one Number: 🙎	50-228-0	6387		Meeting Date:	Jone 24, 2017
Cor	mmittee/Subcom	mittee: <u>Ho</u>	with &	Huno	w Serves	
Pre	sentation/Works	shop Topic:	edicata	~ Si	pretroniza	tin
			Lobbyist: YES		NO	
		State Emplo	oyee: YES		NO []	
	I wish to speak					
	,	ponse to an inquiry f	or information	made by	member, committe	e, or staff
		oonse to subpoena		,		
	Appearing at the	written request of t	he chair			
	Judge or elected officer appearing in official capacity					
	Lobbyist Appeara	ance form submitted	online			
If you a	are testifying on an a	amendment, please als	so indicate your p	oosition as	a proponent or oppo	onent on the bill as a whole.)
	Bill:	Proponent 🔽	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	





	Bill Amendment Bill/PCS/PCB Number:				
	Amendment Number:				
Name: Chris Aland					
Representing: Morida Chapter, Amer	rean College of Phyricians				
Title:					
Address: 1000 Riverside Ave 7	#240				
city: Tackron wille	State/Zip: (1 32204 Meeting Date: 4/14/17				
Phone Number: 904-233-3051	Meeting Date: 4/14/17				
Committee/Subcommittee:HHSC					
Presentation/Workshop Topic:					
Registered Lobbyist: YE	S NO				
State Employee: YES	s No				
I wish to speak					
Appearing in response to an inquiry for informatio	n made by member, committee, or staff				
Appearing in response to subpoena					
Appearing at the written request of the chair					
Judge or elected officer appearing in official capaci	Judge or elected officer appearing in official capacity				
Lobbyist Appearance form submitted online					
If you are testifying on an amendment, please also indicate you	r position as a proponent or opponent on the bill as a whole.)				
Bill: Proponent Opponent	Info only				
Amendment: Proponent Opponent	info only				





	Bill Amendment			
	Bill/PCS/PCB Number: 191			
	Amendment Number:			
Name: Chris Hanson				
2				
Representing: AstraZaneca PLC				
Title: Balland Partners				
Address: 403 E. Parll Aue				
City: Tallahassu, FC.	<u> 32</u> 30/ State/Zip:			
Phone Number: \$50 577 -0444	Meeting Date: 4/24			
Committee/Subcommittee: Health 4)	Luman Services			
Presentation/Workshop Topic:	·			
Registered Lobbyist: YES	NO 🗌			
State Employee: YES	NO D			
I wish to speak				
Appearing in response to an inquiry for information	made by member committee or staff			
Appearing in response to subpoena	made by member, committee, or starr			
Appearing at the written request of the chair				
Judge or elected officer appearing in official capacit	y			
Lobbyist Appearance form submitted online				
(If you are testifying on an amendment, please also indicate your	position as a proponent or opponent on the bill as a whole.)			
Bill: Proponent Opponent				
Amendment: Proponent Opponent	Info only			





	Bill Amendment Bill/PCS/PCB Number:
Name: BETH LABASKY Representing: Alpha 1 Foundate Title: Div. Gout Relation Address: 1400 Ullage Squa City: Tallahasee Phone Number: 850 322 7335 Committee/Subcommittee: HEALTH & Hu	5 Le Blud: Ste 3-116 State/Zip: 4-34-17 Meeting Date: 4-24-17
Registered Lobbyist: YES State Employee: YES WAUE IN SUPPORT I wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online	NO N
(If you are testifying on an amendment, please also indicate your Bill: Proponent Opponent Amendment: Proponent Opponent	





Bill Amendment Bill/PCS/PCB Number: 191 Amendment Number:				
Name: Stephen Winn				
Representing: Florido Osteopathic Medical Association				
Title: Executive Director				
Address: 2544 Blairstone Pines Dr.				
City: Tallahassee State/Zip: FL 32301				
Phone Number: 878-7364 Meeting Date:				
Committee/Subcommittee: HHS				
Presentation/Workshop Topic: Medication Synchronization				
Registered Lobbyist: YES X NO				
State Employee: YES NO X				
I wish to speak Waive in Support Appearing in response to an inquiry for information made by member, committee, or staff Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online				
f you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)				
Bill: Proponent Opponent Info only				
Amendment: Proponent Opponent Info only				





						Amendment er:er:	
Repre		Thomas Florida	Medica	Q A	ssucia	tion	
City Pho) Predmo 50224104 mittee: <u>H</u>	96		State/Zip:_ Meeting Da	FC 3230 ate: 4/24/17	<u>(</u>
		hop Topic: Registered L			NO 🔲		
If you a	Appearing in resp Appearing at the Judge or elected Lobbyist Appeara	ponse to an inquiry for ponse to subpoena written request of the officer appearing in co ince form submitted	ne chair official capacity online	,		nittee, or staff opponent on the bill as a	whole.)
ii you a	Bill: Amendment:	Proponent Proponent	Opponent Opponent		Info only	эрропент он тне ын as a	whole.)





Name	: <u>Sall</u>	y West			Bill S/PCB Number: dment Number:	
Repre	esenting:	Jalgreens			, ,	·
Titl				or Ke	lations	
Add	dress:	2966 Bay	shore.	Dr.	7	
City	: Tallal	1955te			State/Zip: <u></u> ろ	3809
Pho	one Number:	350 210 8	2461	<u> </u>	Meeting Date:	4/24/17
Cor	nmittee/Subcom	mittee: Ha	Illa Ca	ĈU		
Pre	sentation/Works	shop Topic:	redicati	on S	ynchroniz	ation
		Registered L	obbyist: YES		10 🔲	
		State Employ	yee: YES	M I	10 🗌	
1 71	I wish to speak		ŕ			
	·	oonse to an inquiry fo	or information	made by n	nember, committee	, or staff
	Appearing in resp	oonse to subpoena				
	Appearing at the	written request of th	ne chair			
	Judge or elected	officer appearing in o	official capacity	/		
	Lobbyist Appeara	ance form submitted	online			
If you a	are testifying on an a	amendment, please also	o indicate your p	oosition as a	proponent or oppon	ent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	





	Bill Amendment CB Number: 119
Amendme	ent Number:
Name:Amee Diaz Lyon	
Representing: Florida Academy of Fani	ly Physicians
Title:	
Address: 119 South Monroe Street, Suite	200
city: <u>tallahassee</u> si	ate/Zip: FC 32301
Phone Number: 850 - 205 - 9000 N	leeting Date:
Committee/Subcommittee: Health + Human Serv	ires Committee
Presentation/Workshop Topic: Medication Sy	nchronization
Registered Lobbyist: YES NO	
State Employee: YES NO	
I wish to speak	
Appearing in response to an inquiry for information made by mem	ber, committee, or staff
Appearing in response to subpoena	,
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	
Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your position as a pro	ponent or opponent on the bill as a whole.)
Bill: Proponent Opponent In	fo only
Amendment: Proponent Opponent In	fo only





				l	PCS/PCB Number:	
Name		t Jord		<u> </u>		
Repres	senting: A	revican	Can	<u> L</u>	Society	
Title	e: <u>GRD</u>)	<u> </u>			
Add	Iress: <u>192</u>	2 Delling	od Dr			
City	:_ Tallar	hassee	****		State/Zip:	72303
Pho	ne Number:				Meeting Date:	
Con	nmittee/Subcom	mittee:				
Pres	sentation/Works	hop Topic:			·····	·
		Registered L		/	NO 🗌	
		State Employ	/ee: YES		NO 🗌	
	Appearing in resp Appearing in resp Appearing at the Judge or elected of	wave iversionse to an inquiry for sonse to subpoen a written request of the officer appearing in conce form submitted	or information ne chair official capacit	made b	y member, committee,	or staff
(If you a	re testifying on an a	mendment, please also	indicate your	position a	as a proponent or oppone	ent on the bill as a whole.)
	Bill:	Proponent Proponent	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



SORIDA	
	Bill/PCS/PCB Number: 1397
	Amendment Number:
Name: Christian Bex	
Representing: Department of Heal	<u>+</u> 4
Title: Nivector, OCU	
Address: 4052 Bald Cy	p1 e 5 5
City: Tallatasser.	
Phone Number:	Meeting Date: 1/24/17
Committee/Subcommittee: +++>	
Presentation/Workshop Topic:	·
Registered Lobbyist: YES	NO NO
State Employee: YES	NO [
I wish to speak	
Appearing in response to an inquiry for information	made by member, committee, or staff
Appearing in response to subpoena Appearing at the written request of the chair	
Judge or elected officer appearing in official capacit	V
Lobbyist Appearance form submitted online	,
(If you are testifying on an amendment, please also indicate your	position as a propoport or apponent on the hill as a whole \
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD Please fill out the entire form and submit both copies to the Committee Administrative Assistant at the meeting.	W. W.
Amendment Number:	Sent of the sent o
Representing: Djaw Farmer & Mgrahm Assain	
Address: 3335 Jul 22 aug City: City: State/Zip: F2 Jyyya	
Phone Number: 352-425-572 Meeting Date: 4/241+7 Committee/Subcommittee: 11-27-11-11-11-11-11-11-11-11-11-11-11-11-11	
Presentation/Workshop Topic:	
State Employee: YES NO	
Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.) Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	! !



				Bill Amendment Bill/PCS/PCB Number: 1397 Amendment Number:	
Name	:	Barney Bish	rop		
Repre	senting:	Fla. Snevt J	Ustice A	lliance	
Titl	e:	Pres & CEO			
Add	dress:	204 S. Monr	oc St.		
City	/:	Tall		State/Zip:_ FL 3230l	
Pho	one Number: _	850,510,992	-Z	Meeting Date: 24 Apr 17	
Cor	nmittee/Subco	ommittee: <u>Judia</u>	Iary		
		rkshop Topic:hed		eripava	
		Registered Lo	bbyist: YES [NO [
		State Employ	ee: YES] NO []	
	Appearing in r Appearing at t Judge or elected		e chair ficial capacity	nade by member, committee, or staff	
If you a	are testifying on a	in amendment, please also	indicate your pos	sition as a proponent or opponent on the bill as a whole.)	
	Bill:	Proponent V	Opponent [Info only	
	Amendment:	Proponent	Opponent _	Info only	



	Bill Amendment
	Bill/PCS/PCB Number: 1347
	Amendment Number:
Name: Melissa Villar	
Representing: NORM CTalla	nasse-C
Title: Executive Directo	
Address: 169 Snclaw Ra	
city: Tallonasse	State/Zip: FC /323/2
Phone Number: (850) 284-2090	Meeting Date:
Committee/Subcommittee: <u>HUS</u> (on	mittel
Presentation/Workshop Topic: Medico	1 mos vona 1397
Registered Lobbyist: YES	S NO L
State Employee: YES	NO L
wish to speak	
Appearing in response to an inquiry for information	n made by member, committee, or staff
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacit	ty
Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicate your	position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only





						Amendment Der: <u>/397</u> Der:
Name:	THA	O Low,	REY			
Repres	enting: <u>CPG</u>	RATION 1-	<u>AR</u>			
Title	: VP Go	UBRN1113x	MAL	Rela	tions	·>
Addr	ress: 772	Q WAST	+ INGT	TN	57.	
City:	PORT	- RicHI	<i>y</i>		State/Zip:	34668
Phor	ne Number: 🔀	27-992.	8508		Meeting D	ate: 4-24-17
Com	mittee/Subcomr	nittee:				
Presi	entation/Worksh	nop Topic:				
F1C3	entation, works	юр торіс.				
		Registered Lo	obbyist: YES	N	0 🗌	
		State Employ	ree: YES	N	0 🗌	
	I wish to speak					
	Appearing in resp	onse to an inquiry fo	r information	made by m	ember, com	mittee, or staff
	Appearing in resp	onse to subpoena				
	Appearing at the	written request of the	e chair			
	Judge or elected officer appearing in official capacity					
	Lobbyist Appeara	nce form submitted o	online			
lf you ar	e testifying on an a	mendment, please also	indicate your	position as a	proponent or	opponent on the bill as a whole.)
	Bill:	Proponent	Opponent		Info only	
	Amendment:	Proponent	Opponent		Info only	



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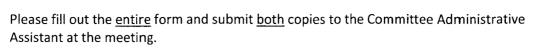


COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee administrative assistant at the meeting.

			Bill Amendment		
		Bill Number:	1397 : Medical Use of Marijuana		
		PCB/PCS/An	nendment #: N/A		
Name:	Carmella Camacho				
Representing:	Cannangels speaking o	n behalf of #TeamLandon			
Title:					
Address:	265 Bayshore Dr				
City:	Freeport	State/Zip:	FL 32439		
Phone Number:	503.505.1715	Meeting Date:	April 24, 2017 2:00 PM		
Committee/Sub	committee: Health	& Human Services Committ	ee		
Presentation/Wo	orkshop Topic: Medica	al Use of Marijuana			
☐ Registered L	obbyist		Bill		
State Employ	•		Info Only		
☑ I Wish To Sp			Amendment		
Appearing in response to subpoena N/A					
_			member, committee or staff		
☐ Appearing at	the written request of	the chair			
	ted officer appearing i				
☐ Lobbyist App	pearance Form Submit	tted			





	7	1 a 2			Bill Amendment PCB Number: 1397 ment Number:
Name:	Hep	hany r	MULLI	5	
Represent	ing: My	Self"		· · · · · · · · · · · · · · · · · · ·	
Title:	. *	\			
		SE WEBLI	≤ 0	,	
	LAKE	,			State/Zip: <i>FL</i> 37025
		(386) 288-	2893		Meeting Date:
Commit	tee/Subcomr	nittee:			
Present	ation/Worksh	nop Topic:			
. reseme	a, 				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		Registered Lo			
		State Employ	ee: YES	N	b X
Ž Iwi	sh to speak				
App	pearing in respo	onse to an inquiry for	rinformation	made by m	ember, committee, or staff
App	pearing in respo	onse to subpoena			
App	pearing at the v	written request of the	e chair		
Jud	ge or elected c	officer appearing in o	fficial capacity	,	
Lob	byist Appearar	nce form submitted c	online		
(If you are te	stifying on an ar	mendment, please also	indicate your p	osition as a	proponent or opponent on the bill as a whole.)
Bill	:	Proponent	Opponent		Info only
Am	endment:	Proponent	Opponent	Q	Info only



Bill Amendment Bill/PCS/PCB Number: Amendment Number:	
Name: Non Watson	
Representing: Althed, Cannavision + ShET Inc.	
Title: Loboyist	
Address: 3738 Mundon Way	
City: Tallahasser State/Zip: FL 32309	
Phone Number: 850 567 - 1202 Meeting Date: 4/24/15	
Committee/Subcommittee: House HHS	
Presentation/Workshop Topic: Amendment 2 implementation	
Registered Lobbyist: YES NO	
State Employee: YES NO	
I wish to speak	
Appearing in response to an inquiry for information made by member, committee, or staff	
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	
Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	





	Bill Amendment Bill/PCS/PCB Number: PC 5 1397 Amendment Number:
Name: Louis Rotundo Representing: CBSY inc	
Title:	1026 State/Zip: 32714
Phone Number: 407-699-9361 Committee/Subcommittee: Health & Presentation/Workshop Topic: Medical	Meeting Date: 4/24/17 HUMOW Services
Registered Lobbyist: YES State Employee: YES	
I wish to speak Appearing in response to an inquiry for information Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacit Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your Bill: Proponent Opponent	position as a proponent or opponent on the bill as a whole.) Info only
Amendment: Proponent Opponent	Info only



	Bill Amendment Bill/PCS/PCB Number: 1397				
	Amendment Number:				
Name: Ben Pollara					
Representing: Executive Dive	CHOK Florida For Care				
Title: Executive Direc	tor				
Address: 801 Arthur Godfr	ey Rd, Suite 704-A				
city: Miami Beach	State/Zip: FC 33190				
Phone Number: 305 - 673 - 2685	Meeting Date: 4/24/17				
Committee/Subcommittee: Health and Numan Services					
Presentation/Workshop Topic: Medical	Marijuana				
Registered Lobbyist: YES	NO 🗌				
State Employee: YES	□ NO □				
∇ I wish to speak					
Appearing in response to an inquiry for information	made by member, committee, or staff				
Appearing in response to subpoena					
Appearing at the written request of the chair					
Judge or elected officer appearing in official capacit	·y				
Lobbyist Appearance form submitted online					
If you are testifying on an amendment, please also indicate your	position as a proponent or opponent on the bill as a whole.)				
Bill: Proponent Opponent	Info only				
Amendment: Proponent Opponent	Info only				



			_			
	Cilani	15 Pinner	Caro		Bill SPCB Number:	
Name:	CHARL	LE RUTHER	POP1)			
Repres	enting:					
Title	:					
		1 Brenwood				
		TONFA			State/Zip:	V 55343
		612.655.549	1 4		Meeting Date:	4.24.17
Com	mittee/Subcom	mittee:				
Pres	entation/Worksl	hop Topic:				
		Registered Lo	obbyist: YES [10	
		State Employ	/ee: YES [10	
X	/ I wish to speak					
	Appearing in resp	onse to an inquiry fo	or information n	nade by n	nember, committee, c	or staff
	Appearing in resp	onse to subpoena				
느		written request of th				
=	_	officer appearing in o	, ,			
Ш	Lobbyist Appeara	nce form submitted o	online			
If you ar	re testifying on an a	mendment, please alsc	indicate your po	osition as a	proponent or opponer	nt on the bill as a whole.)
	Bill:	Proponent	Opponent	(Info only	
	Amendment:	Proponent	Opponent [Info only	



Assistant at the meeting.	
Bill Amendment Bill/PCS/PCB Number: 1397 Amendment Number:	
Name: Josephinic Cannella-Krehl	
Representing: Suffering Patients	
Title: Licensed Clinical Social Work	
Address: 3784 Wentworth	
City: <u>Tall</u> State/Zip: <u>F</u> 32311	
Phone Number: 650-653-6938 Meeting Date: 4/24/17	•
Committee/Subcommittee: HHS	
Presentation/Workshop Topic: Medical (annabis	
Registered Lobbyist: YES NO NO	
State Employee: YES NO	
I wish to speak Appearing in response to an inquiry for information made by member, committee, or staff Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	





<u>-</u>	
·	Bill Amendment Bill/PCS/PCB Number: 1397 Amendment Number:
Name: Muet Jetrey Ch	udnow
Representing: The Florida Police	e Chiefs Association
Title: Chief of Police	
Address: 2636 Mitcham D	nle
	State/Zip: FL 32308
Phone Number: 850-219-3631	Meeting Date: <u>April 34, 20</u> /7
Committee/Subcommittee: Heath +	Human Servius
Presentation/Workshop Topic:	
Registered Lobbyist: YES	NO D
State Employee: YES	□ NO □
I wish to speak	
Appearing in response to an inquiry for information	made by member, committee, or staff
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	
Lobbyist Appearance form submitted online	
If you are testifying on an amendment, please also indicate your p	osition as a proponent or opponent on the bill as a whole.)
Bill: Proponent / Opponent	Info only
Amendment: Proponent Opponent	Info only



Please fill out the $\underline{\text{entire}}$ form and submit $\underline{\text{both}}$ copies to the Committee Administrative Assistant at the meeting.

Bill

	Bill/PCS/PCB Number: > 13
	Amendment Number: 1000 (1)
Name: David Custin	
Representing: Euse Ka Vaposis Inc	: AND KATCHA HOLD INGS, LCC
Title: Labbyist / PresiDent	David R Custin & Associatest
Address: 6401 5W 113 PL	
City: Miami	State/Zip: FL 33173
Phone Number: 305-607-8576	
Committee/Subcommittee: Health + Hi	iman Services
Presentation/Workshop Topic:	
Registered Lobbyist: YES	NO O
State Employee: YES	□ NO ☑
I wish to speak	
Appearing in response to an inquiry for information	made by member, committee, or staff
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	У
Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicate your p	position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent	Info only
Amendment: Proponent Oppone	Info only





					Bill EPCS/PCB Number		
	Senting: MY	BAMBI)					
Title	e: <u>Mr</u>	N. Abjar	y (irde			e e e e e e e e e e e e e e e e e e e	
Pho		59) 53/- 97			State/Zip:		Zp 7
		mittee: hop Topic: Registered Lo State Employ	obbyist: YES		NO \(\)		
	Appearing in resp Appearing at the Judge or elected	oonse to an inquiry fo oonse to subpoena written request of th officer appearing in c ance form submitted	e chair official capacit		/ member, committ	ee, or staff	
(If you a	re testifying on an a	Proponent	o indicate your Opponent	position a	s a proponent or opp	oonent on the bill a	s a whole.)
	Amendment:	Proponent	Opponent		Info only		





Bill Amendment Bill/PCS/PCB Number:
Name: TEIN
Representing:
Title:
Address: 7035 BELT LINA LOOA
• /
11. 3.705 806
Committee/Subcommittee: HRS
Presentation/Workshop Topic:
Registered Lobbyist: YES NO NO
State Employee: YES NO NO
I wish to speak Appearing in response to an inquiry for information made by member, committee, or staff Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online
If you are testifying on an amendment, please also indicate your position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent Info only
Amendment: Proponent Opponent Info only





				Bill/PCS/	Bill PCB Numl	Amendment per:
						oer:
Name:	EM	es Rowl	and			
Repres	enting:	orida (T anna	bis A	tion	Network
Title	: Presid	ent	·			
Add	ress: <u>1375</u>	Cypress	Ave			
City	Melba	Cypress		·	State/Zip: ₋	FZ 32935
Pho	ne Number:	321-253-	3673		Meeting D	ate: 4-24-2017
Committee/Subcommittee: HHS						
Pres	entation/Works	nop Topic:				
		Registered Lo	obbyist: YES	☐ NC	X	
		State Employ	ree: YES	NC	A	
V	I wish to speak					
	·	onse to an inquiry fo	r information	made by me	mber, comi	mittee, or staff
$\overline{\Box}$		onse to subpoena				
\Box	Appearing at the	written request of th	e chair			
$\overline{\Box}$	Judge or elected	officer appearing in o	fficial capacit	/		
	Lobbyist Appeara	nce form submitted o	online			
(If you a	re testifying on an a	mendment, please also	indicate your	position as a p	roponent or	opponent on the bill as a whole.)
	Bill:	Proponent	Opponent	区	Info only	
	Amendment:	Proponent	Opponent		Info only	





	Bill Amendment Bill/PCS/PCB Number: Amendment Number:
Name: DENNIS DECKERHOFF	
Representing: BARRETT DECKERHOFF	+ PATIENTS OF FLORIDA
Title: FATHER / CARELIVER	
Address: 5704 VICTOR BROWN	1. TRAIL
City: TALL.	State/Zip:
Phone Number: 850.567-040 5	Meeting Date: $4/24/17$
Committee/Subcommittee: <u>H45C</u>	
Presentation/Workshop Topic:ComPASSIDN	ATE USE
Registered Lobbyist: YES	□ NO
State Employee: YES	□ NO □
Wish to speak	
Appearing in response to an inquiry for information	made by member, committee, or staff
Appearing in response to subpoena	
Appearing at the written request of the chair	
Judge or elected officer appearing in official capacity	y
Lobbyist Appearance form submitted online	
(If you are testifying on an amendment, please also indicate your p	position as a proponent or opponent on the bill as a whole.)
Bill: Proponent Opponent	Info only
Amendment: Proponent Opponent	Info only



Bill/PCS/PCB Number: Amendment Number:	•
Name: Michael Visher	
Representing: Self US Canabis Pharm. Research	& Orvel.
Title: President	
Address: 1222 Hillandale Reserve by	
City: ፲ኅካ /ኅ State/Zip:	FL,
City: \(\) \(\) \(\) \(\) State/Zip: Phone Number: \(\) \(4/24/17
Committee/Subcommittee: HHS	
Presentation/Workshop Topic:	·
Registered Lobbyist: YES NO	
State Employee: YES NO NO	
I wish to speak Appearing in response to an inquiry for information made by member, committed Appearing in response to subpoena Appearing at the written request of the chair Judge or elected officer appearing in official capacity Lobbyist Appearance form submitted online	ee, or staff
If you are testifying on an amendment, please also indicate your position as a proponent or oppo	onent on the bill as a whole.)
Bill: Proponent Opponent Info only	
Amendment: Proponent Opponent Info only	



	Bill Amendment Bill/PCS/PCB Number: 1397						
	Amendment Number:						
Name: tephani Scr Representing: Epilepsy	roges Bowen Fordation of Florida						
Title:							
Address: (108 Parkin	g Ave						
City: Pensacrola	State/Zip: <u>1</u> 32507						
Phone Number: \$50-530-1	874 Meeting Date: 4-24-2016						
Committee/Subcommittee:	th						
Presentation/Workshop Topic:	ical Murijuna HB. 1397						
Registered Lobby	yist: YES NO 🗹						
State Employee:	YES NO VE						
I wish to speak							
Appearing in response to an inquiry for inf	ormation made by member, committee, or staff						
Appearing in response to subpoena	Appearing in response to subpoena						
Appearing at the written request of the ch	Appearing at the written request of the chair						
Judge or elected officer appearing in official	Judge or elected officer appearing in official capacity						
Lobbyist Appearance form submitted onlin	ne						
(If you are testifying on an amendment, please also indi	cate your position as a proponent or opponent on the bill as a whole.)						
Bill: Proponent O	oponent Info only						
Amendment: Proponent Op	oponent Info only						



Please fill out the <u>entire</u> form and submit <u>two</u> copies to the committee/subcommittee administrative assistant at the meeting.

Type or Print Clearly

Filed Bill Number: 1397	Meeting Date: $4/29/2017$
Fill in appropriate information: • Amendment # • PCB/PCS • Presentation/Workshop Topic	
Committee/Subcommittee:	45
Name: BRIAN Pitts	
Title: Trustee	
Address: 1119 Newton Avenue	South
City: St. Petersburg	State/Zip: FL / 33705
Phone Number: 727/897-929/	
Representing: Justice-2-Jesus	
Registered Lobbyist: ☐ Yes ☑No	State Employee: Yes VNo
I Wish To Speak E	Bill Amendment #
I Wish To Speak: I Have Been Requested To Speak: □	Proponent D Proponent D Opponent D
Thave been requested 10 speak.	Info Only Info Only