



Request for Proposal No. HSS 13 056

Applicant | The Giving Tree- First State Compassionate Care, Inc.
Address | PO Box 1584 | Rehoboth, DE 19971 **Telephone** | 29 Del.C. Ch. 100 Freedom of Information Act [REDACTED]

Designated Contact: Kathleen McGuinness
BID OPENING DATE: April 8th, 2014 at 11:00am





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1. CONFIDENTIAL INFORMATION

Per Section §4920A Confidentiality of the Act, none of the proposal information will be subject to the Freedom of Information Act (FOIA). All portions of the proposal can be placed on a single CD for submission purposes.

§ 4920A. Confidentiality

(a) The following information received and records kept by the Department for purposes of administering this chapter are confidential and exempt from the Delaware Freedom of Information Act [Chapter 100 of Title 29], and not subject to disclosure to any individual or public or private entity, except as necessary for authorized employees of the State of Delaware to perform official duties pursuant to this chapter:

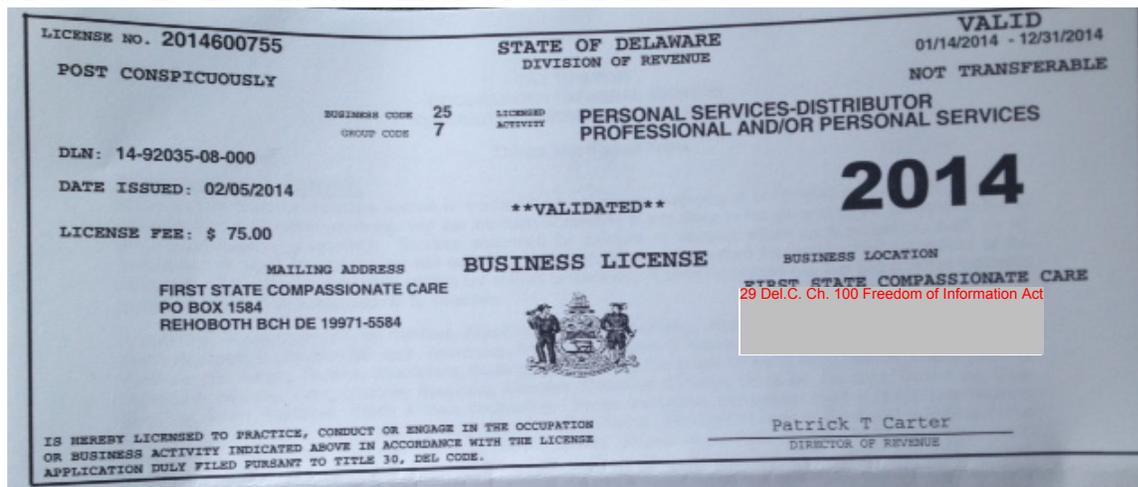
- (1) Applications and their renewals, their content, and supporting information submitted by qualifying patients and designated caregivers, including information regarding their designated caregivers and physicians.
- (2) Applications and renewals, their contents, and supporting information submitted by or on behalf of compassion centers and safety compliance facilities in compliance with this chapter, including their physical addressees.
- (3) The individual names and other information identifying persons to whom the Department has issued registry identification cards.
- (4) Any dispensing information required to be kept under § 4919A of this title or Department regulation shall identify cardholders and registered compassion centers by their registry identification numbers and not contain names or other personally identifying information.



2. QUALIFICATIONS AND EXPERIENCE

This section shall contain sufficient information to demonstrate our legal status, institutional knowledge, experience and expertise necessary to carry out the establishment and maintenance of a pilot compassion center in accordance with the State of Delaware's Medical Marijuana Act as defined in Title 16, Chapter 49A of the Delaware Code.

The Giving Tree-First State Compassion Care, Inc. hereby certifies that we have secured a Delaware Business License. License Number: 2014600755



Organization Structure

The Giving Tree- First State Compassionate Care, Inc., is organized as a nonprofit nonstock corporation under the Law of the State of Delaware. Founded in 2014, we plan to operate a medical cannabis compassion center in Delaware if awarded a permit by the Department of Health and Social Services (the "Department"). Our planned dispensary will use a patient-centered care model, collaborating with community stakeholders to provide quality and affordable care to all residents, including minority and underserved populations.

Our team structure is based on defined roles and a clear chain of authority. We have a number of very experience personnel on staff and will rely on each individual's expertise and qualifications to run a successful compassion center. All management personnel and subcontractors shall report at pre-determined intervals to our executive director based on their duties as described under their job profiles. Non-management personnel must report and work under the supervision of their direct managers. Our managers and board of directors have over a 100 combined years of experience running small to mid-sized businesses and non-profit organizations and which has aided The Giving Tree in establishing a highly efficient management team structure.

All managers and board of directors have defined roles within the organization and must adhere to these standards.

Ø Please see our [Staffing Plan](#) for Position Descriptions.



**Legal Entity: A Nonprofit Corporation - Certificate and
Articles of Incorporation**

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "FIRST STATE COMPASSIONATE CARE, INC.", FILED IN THIS OFFICE ON THE TWENTIETH DAY OF FEBRUARY, A.D. 2014, AT 4:04 O'CLOCK P.M.

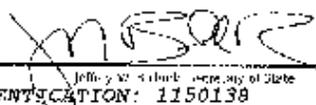
A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

5465349 8100

140210106

You may verify this certificate online
at corp.delaware.gov/authentic.html




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1150138

DATE: 02-20-14



**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT TO
CERTIFICATE OF INCORPORATION OF**

FIRST STATE COMPASSIONATE CARE, INC.

A NONPROFIT NONSTOCK CORPORATION

First State Compassionate Care, Inc., a nonprofit nonstock corporation organized and existing under and by virtue of the General Corporation Law of the State of Delaware (the "Corporation"),

DOES HEREBY CERTIFY:

FIRST: That the Amendment to the Certificate of Incorporation of the Corporation set forth below was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

SECOND: Article THIRD of the Certificate of Incorporation of the Corporation is amended to be and read as follows:

The purpose of the Corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of the State of Delaware. The Corporation shall be a nonprofit nonstock corporation that has for its object the assistance of the sick, needy or disabled individuals. The Corporation is organized not for profit and no part of its earnings shall inure to the benefit of any member or other individual.

IN WITNESS WHEREOF, the Corporation has caused this certificate to be signed by its President, this 19 day of February, 2014.

FIRST STATE COMPASSIONATE CARE, INC.

29 Del.C. Ch. 100 Freedom of Information Act

By: _____

Kathleen K. McGuiness,
President



**CONSENT OF THE MEMBERS OF
FIRST STATE COMPASSIONATE CARE, INC.**

The undersigned, being all of the Members of First State Compassionate Care, Inc., a Delaware corporation (the "Corporation"), do hereby consent to and adopt the following resolutions pursuant to the General Corporation Law of Delaware.

RESOLVED, that the number of Directors of the Corporation shall be three (3).

RESOLVED, FURTHER, that the following persons are hereby elected to serve as Directors of the Corporation, each to serve until his or her successor is elected and qualified or until his or her earlier death, resignation or removal:

- Kathleen K. McGuiness
- Brian J. Costleigh, M.D.
- Michelle Carey

IN WITNESS WHEREOF, the Members of the Corporation have caused this Consent to be executed as of March 14, 2014.

Dated: March 14, 2014

29 Del.C. Ch. 100 Freedom of Information

Kathleen K. McGuiness

29 Del.C. Ch. 100 Freedom of Information Act

Dated: March 14, 2014

Brian J. Costleigh, M.D.

Receipt of the foregoing Consent, delivered in accordance with Section 228 of the General Corporation Law of the State of Delaware, is acknowledged.

FIRST STATE COMPASSIONATE CARE, INC.

29 Del.C. Ch. 100 Freedom of Info

By: _____

Kathleen McGuiness

Office: _____

President

Date: _____, 2014

March 14



Non-Profit Evidence and Description

Our business model is governed by two constraints: the legal conditions placed by state and local governments on the operation of medical cannabis compassion centers and the commitments specific to our mission. The Giving Tree has taken great care to ensure patient and neighborhood security, to design our operations so as to prevent cannabis diversion, and to comply with all applicable laws, including state and local laws.

We will operate as a closed-loop, in which cannabis is cultivated, processed, acquired, distributed, and consumed only by patients. All transactions will be internal to the compassion center. No cannabis will be acquired from or distributed to non-patients. All monies tendered will be for the sole purpose of reimbursing the costs of products and services provided, as well as the overhead costs of operating the dispensary, including its peripheral wellness services and community outreach programs.

At no time will we operate in a manner that would constitute—or give the appearance of constituting—doing business for profit or as a retail seller of cannabis. No member of the compassion center, including board members, officers, directors, and patient, will profit from the distribution of cannabis.

Transactions between providing and receiving patients will be consultative in nature, focused on matching product with patient needs in light of his or her medical condition, specific treatment limitations, and history of response to previous dispensary products.

All revenues in excess of the costs to operate our wellness facility will be used to sustain our charitable outreach and community benefits mission.



BYLAW

FIRST STATE COMPASSIONATE CARE, INC.

BY-LAWS

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FIRST STATE COMPASSIONATE CARE, INC.

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FIRST STATE COMPASSIONATE CARE, INC.

BY-LAWS

ARTICLE 1 – MEMBERS

Section 1.1 Membership. The members of the Board of Directors, *ex officio*, shall be the Members of the First State Compassionate Care, Inc. (the “Corporation”), a nonprofit nonstock corporation, as that term is set forth in the Certificate of Incorporation and the General Corporation Law of the State of Delaware. A Director shall be a Member of the Corporation only for so long as such Director serves as a Director under these By-laws.

ARTICLE 2 – MEETINGS OF MEMBERS

Section 2.1 Annual Meetings. The annual meeting of the Members for the election of Directors and for the transaction of such other business as properly may come before such meeting shall be held each year on such date, and at such time and place within or without the State of Delaware, as may be designated by the President.

Section 2.2 Special Meetings. Special meetings of the Members for any proper purpose or purposes may be called at any time by the President, to be held on such date, and at such time and place within or without the State of Delaware, as directed by the President.

Section 2.3 Notice of Meeting. Written notice of every meeting of the Members, stating the date and time when, and the place where, it is to be held shall be delivered either personally or by mail to each Member not less than ten days before the meeting, except as otherwise provided by law. Such notice need not specify the business to be transacted, except as specifically provided in ARTICLE 13.

Section 2.4 Quorum. The presence at any meeting, in person or by proxy, of a majority of the Members then serving in office and entitled to vote shall be necessary and sufficient to constitute a quorum for the transaction of business, except as otherwise provided by law, the Certificate of Incorporation or these By-laws.

Section 2.5 Adjournments. In the absence of a quorum, the Members present shall have the power to adjourn the meeting from time to time without notice, other than announcement at the meeting, until a quorum shall be present. At any such adjourned meeting any business may be transacted that might have been transacted at the meeting as originally

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noticed. Only those Members entitled to vote at the meeting originally noticed shall be entitled to vote at any adjournment thereof.

Section 2.6 Voting. Directors shall be chosen by a plurality of the votes cast by the Members at their annual meeting, and, except as otherwise provided by law, all questions shall be determined by a majority of the votes cast on such question.

Section 2.7 Proxies. Any Member entitled to vote may vote by proxy, provided that the instrument authorizing such proxy to act shall have been executed in writing (which shall include telefacsimile) by the Member or by his or her duly authorized attorney, and shall bear a date not more than three months prior to such meeting, unless such proxy shall upon its face provide a longer period for it to remain in force.

Section 2.8 Minutes. At each meeting of the Members, the Secretary or an Assistant Secretary shall record the proceedings thereof.

Section 2.9 Written Consent of Members.

(a) Any action that may be taken at any annual or special meeting of Members, or any action which may be taken at any annual or special meeting of Members, may be taken without a meeting, without prior notice and without a vote, if a consent or consents in writing, setting forth the action so taken, shall be signed by Members having not less than the minimum number of votes that would be necessary to authorize or take such action at a meeting at which all Members having a right to vote thereon were present and voted and shall be delivered to the Corporation by delivery to its registered office in Delaware, its principal place of business or an officer or agent of the Corporation having custody of the book in which proceedings of meetings of Members are recorded. Delivery made to the Corporation's registered office shall be by hand or by certified or registered mail, return receipt requested.

(b) Every written consent shall bear the date of signature of each Member who signs the consent, and no written consent shall be effective to take the corporate action referred to therein unless, within sixty days of the earliest dated consent delivered in the manner required by this section to the Corporation, written consents signed by a sufficient number of holders to take action are delivered in the manner required by this section to the Corporation.

(c) An electronic transmission consenting to an action to be taken and transmitted by a Member or proxyholder, or by a person or persons authorized to act for a Member or proxyholder, shall be deemed to be written, signed and dated for the purposes of this section, provided that any such electronic transmission sets forth or is delivered with information from which the Corporation can determine (A) that the electronic transmission was transmitted by the Member or proxyholder or by a person or persons authorized to act for the Member or proxyholder and (B) the date on which such Member or proxyholder or authorized person or persons transmitted such electronic transmission. The date on which such electronic transmission is transmitted shall be deemed to be the date on which such consent was signed. No consent given by electronic transmission shall be deemed to have been delivered until such consent is reproduced in paper form and until such paper form shall be delivered to the



Corporation by delivery to its registered office in this State, its principal place of business or an officer or agent of the Corporation having custody of the book in which proceedings of meetings of Members are recorded. Delivery made to a Corporation's registered office shall be made by hand or by certified or registered mail, return receipt requested. Notwithstanding the foregoing limitations on delivery, consents given by electronic transmission, may be otherwise delivered to the principal place of business of the Corporation or to an officer or agent of the Corporation having custody of the book in which proceedings of meetings of Members are recorded if, to the extent and in the manner provided by resolution of the Board of Directors.

(d) Any copy, facsimile or other reliable reproduction of a consent in writing may be substituted or used in lieu of the original writing for any and all purposes for which the original writing could be used, provided that such copy, facsimile or other reproduction shall be a complete reproduction of the entire original writing.

(e) Prompt notice of the taking of corporate action without a meeting by less than unanimous written consent shall be given to those Members who have not consented in writing and who, if the action had been taken at a meeting, would have been entitled to notice of the meeting if the record date for notice of such meeting had been the date that written consents signed by a sufficient number of holders to take the action were delivered to the Corporation as provided in this section.

Section 2.10 Remote Participation. If authorized by the Board of Directors in its sole discretion, and subject to such guidelines and procedures as the Board of Directors may adopt, Members and proxyholders not physically present at a meeting of Members may, by means of remote communication:

(a) Participate in a meeting of Members; and

(b) Be deemed present in person and vote at a meeting of Members, whether such meeting is to be held at a designated place or solely by means of remote communication,

provided that (i) the Corporation shall implement reasonable measures to verify that each person deemed present and permitted to vote at the meeting by means of remote communication is a Member or proxyholder, (ii) the Corporation shall implement reasonable measures to provide such Members and proxyholders a reasonable opportunity to participate in the meeting and to vote on matters submitted to the Members, including an opportunity to read or hear the proceedings of the meeting substantially concurrently with such proceedings, and (iii) if any Member or proxyholder votes or takes other action at the meeting by means of remote communication, a record of such vote or other action shall be maintained by the Corporation.



ARTICLE 3 – BOARD OF DIRECTORS

Section 3.1 Powers. The Board of Directors shall exercise all the powers of the Corporation, except such as are by law, by the Certificate of Incorporation or by these By-laws conferred upon or reserved to the Members, including but not limited to the following:

- (a) To select and determine policies that shall be followed by the Corporation with respect to the maintenance and investment of its assets;
- (b) To take all other actions necessary to carry out the purposes of the Corporation.

Section 3.2 Number. The number of Directors that shall constitute the whole Board of Directors shall be fixed from time to time by resolution of the Members (any such resolution of the Members being subject to any later resolution of them), except that the number of Directors shall at no time exceed the number provided therefor in the Certificate of Incorporation.

Section 3.3 Election and Term of Office. Directors shall be elected at the annual meeting of the Members, except as provided in Section 3.4. Each Director (whether elected at an annual meeting or to fill a vacancy or otherwise) shall continue in office until his or her successor shall have been elected and qualified or until his or her earlier death, resignation or removal in the manner hereinafter provided.

Section 3.4 Vacancies and Additional Directors. If any vacancy shall occur among the Directors by reason of death, resignation or removal, or as the result of an increase in the number of Directorships, a majority of the Members may fill any such vacancy.

Section 3.5 Meetings

(a) The Board of Directors by resolution may provide for the holding of regular meetings of the Board and may fix the times and places at which such meetings shall be held. Notice of regular meetings shall not be required to be given, provided that whenever the time or place of regular meetings shall be fixed or changed, notice of such action shall be mailed promptly to each Director who shall not have been present at the meeting at which such action was taken, addressed to him or her at his or her residence or usual place of business.

(b) Special meetings of the Board of Directors may be called by or at the direction of the President or any two Directors, except that when the Board of Directors consists of one Director, then the one Director may call a special meeting. Except as otherwise required by law, notice of each special meeting shall be mailed to each Director, addressed to him or her at his or her residence or usual place of business, at least seven days before the day on which the meeting is to be held, or shall be sent to him or her at such place by electronic transmission or telephoned or delivered to him or her personally, not later than the second day before the day on which the meeting is to be held. Such notice shall state the time and place of such meeting, but need not



state the purposes thereof, unless otherwise required by law, the Certificate of Incorporation or these By-laws.

Section 3.6 Telephonic Meetings Permitted. Members of the Board of Directors, or any committee designated by the Board of Directors, may participate in a meeting thereof by means of conference telephone or other communications equipment by means of which all persons participating in the meeting can hear each other, and participation in a meeting pursuant to this By-law shall constitute presence in person at such meeting.

Section 3.7 Quorum and Manner of Acting. At each meeting of the Board of Directors the presence of a majority of the total number of members of the Board of Directors as constituted from time to time shall be necessary and sufficient to constitute a quorum for the transaction of business, except that when the Board of Directors consists of one Director, in which case one Director shall constitute a quorum. In the absence of a quorum, a majority of those present at the time and place of any meeting may be held as adjourned without further notice or waiver. A majority of those present at any meeting at which a quorum is present may decide any question brought before such meeting, except as otherwise provided by law, the Certificate of Incorporation or these By-laws.

Section 3.8 Resignation of Directors. Any Director may resign at any time by giving notice of such resignation to the Secretary in writing or by electronic transmission. Unless otherwise specified in such notice, such resignation shall take effect upon receipt thereof by the Board of Directors or any such officers, and the acceptance of such resignation shall not be necessary to make it effective.

Section 3.9 Removal of Directors. At any meeting of the Members, duly called as provided in these By-laws, any Director or Directors may be removed from office, either with or without cause, as provided by law. At such meeting a successor or successors may be elected by a plurality of the votes cast by the Members.

Section 3.10 Written Consent of Directors. Any action that might have been taken under these By-laws by vote of the Directors at any meeting of the Board of Directors or any committee thereof may be taken without a meeting if all the members of the Board of Directors or such committee, as the case may be, consent thereto in writing, or by electronic transmission and the writing or writings or electronic transmission or transmissions are filed with the minutes of proceedings of the Board, or committee. Such filing shall be in paper form if the minutes are maintained in paper form and shall be in electronic form if the minutes are maintained in electronic form.

Section 3.11 Compensation. The Corporation may pay reasonable compensation to its Directors for personal services that are reasonable and necessary to carry out the purposes of the Corporation.



ARTICLE 4 – COMMITTEES OF THE BOARD

Section 4.1 Designation, Power, Alternate Members and Term of Office. The Board of Directors may, by resolution passed by a majority of the whole Board of Directors, designate one or more committees, each committee to consist of one or more of the Directors of the Corporation. Any such committee, to the extent provided in such resolution and permitted by law, shall have and may exercise all the powers and authority of the Board of Directors in the management of the business and affairs of the Corporation, and may authorize the seal of the Corporation or a facsimile thereof to be affixed to or reproduced on all such papers as said committee shall designate. The Board of Directors may designate one or more Directors as alternate members of any committee who, in the order specified by the Board of Directors, may replace any absent or disqualified member at any meeting of the committee. If at a meeting of any committee one or more of the members thereof should be absent or disqualified, and if either the Board of Directors had not so designated any alternate member or members, or the number of absent or disqualified members exceeds the number of alternate members who are present at such meeting, then the member or members of such committee (including alternates) present at any meeting and not disqualified from voting, whether or not he or she or they constitute a quorum, may unanimously appoint another Director to act at the meeting in the place of any such absent or disqualified member. The term of office of the members of each committee shall be as fixed from time to time by the Board of Directors, subject to these By-laws; provided, however, that any committee member who ceases to be a member of the Board of Directors, shall ipso facto cease to be a committee member. Each committee shall appoint a secretary, who may be the Secretary or an Assistant Secretary.

Section 4.2 Meetings, Notices and Records

(a) Each committee may provide for the holding of regular meetings, with or without notice, and may fix the times and places at which such meetings shall be held. Special meetings of each committee may be called by or at the direction of its chairman or, if there is no chairman, by or at the direction of any one of its members. Except as otherwise provided by law, notice of each special meeting of a committee shall be mailed to each member of such committee, addressed to him or her at his or her residence or usual place of business, at least seven days before the day on which the meeting is to be held, or shall be sent to him or her at such place by electronic transmission, or telephoned or delivered to him or her personally, not later than the second day before the day on which the meeting is to be held. Such notice shall state the time and place of such meeting, but need not state the purposes thereof, unless otherwise required by law, the Certificate of Incorporation or these By-laws.

(b) Each committee shall keep a record of its proceedings.

Section 4.3 Quorum and Manner of Acting. At each meeting of any committee the presence of a majority of its members then in office shall be necessary and sufficient to constitute a quorum for the transaction of business, except that when a committee consists of one member, then the one member shall constitute a quorum. In the absence of a quorum, a majority



of the members thereof present at the time and place of any meeting may adjourn the meeting from time to time until a quorum shall be present and the meeting may be held as adjourned without further notice or waiver. The act of a majority of the members thereof present at any meeting at which a quorum is present shall be the act of such committee. Subject to the foregoing and other provisions of these By-laws and except as otherwise determined by the Board of Directors, each committee may make rules for the conduct of its business.

Section 4.4 Resignations. Any member of a committee may resign at any time by giving notice of such resignation to the Secretary in writing or by electronic transmission. Unless otherwise specified in such notice, such resignation shall take effect upon receipt thereof by the Secretary, and the acceptance of such resignation shall not be necessary to make it effective.

Section 4.5 Removal. Any member of any committee may be removed at any time with or without cause by the Board of Directors.

Section 4.6 Vacancies. If any vacancy shall occur in any committee by reason of death, resignation, disqualification, removal or otherwise, the remaining member or members of such committee, so long as a quorum is present, may continue to act until such vacancy is filled by the Board of Directors.

ARTICLE 5 – OFFICERS

Section 5.1 Officers. The officers of the Corporation shall be a President, a Secretary, a Treasurer, and such other officers as may be appointed in accordance with the provisions of Section 5.3.

Section 5.2 Election, Term of Office and Qualifications. Each officer (except such officers as may be appointed in accordance with the provisions of Section 5.3) shall be elected by the Board of Directors at its first meeting after the annual meeting of the Members. Each such officer (whether elected at the first meeting of the Board of Directors after the annual meeting of the Members or to fill a vacancy or otherwise) shall hold his or her office until his or her successor shall have been elected, or until his or her death, or until he or she shall have resigned in the manner provided in Section 5.4 or shall have been removed in the manner provided in Section 5.5.

Section 5.3 Subordinate Officers and Agents. The Board of Directors from time to time may appoint other officers or agents (including one or more Vice Presidents), to hold office for such period, have such authority and perform such duties as are provided in these By-laws or as may be provided in the resolutions appointing them. The Board of Directors may delegate to any officer or agent the power to appoint any such subordinate officer or agents and to prescribe their respective terms of office, authorities and duties.



Section 5.4 Resignations. Any officer may resign at any time by giving notice of such resignation to the Secretary in writing or by electronic transmission. Unless otherwise specified in such written notice, such resignation shall take effect upon receipt thereof by the Board of Directors or any such officer, and the acceptance of such resignation shall not be necessary to make it effective.

Section 5.5 Removal. Any officer specifically designated in Section 5.1 may be removed with or without cause at any meeting of the Board of Directors by affirmative vote of a majority of the Directors then in office. In addition, the President may be removed with or without cause by the affirmative vote of a majority of all the Members. Any officer or agent appointed in accordance with the provisions of Section 5.3 may be removed with or without cause at any meeting of the Board of Directors by affirmative vote of a majority of the Directors present at such meeting, or at any time by any superior officer or agent upon whom such power of removal shall have been conferred by the Board of Directors.

Section 5.6 Vacancies. A vacancy in any office by reason of death, resignation, removal, disqualification or any other cause shall be filled for the unexpired portion of the term in the manner prescribed by these By-laws for regular election or appointment to such office.

Section 5.7 The President. The President shall be the chief executive officer of the Corporation. He or she shall preside at all meetings of the Board of Directors and of the Members, and shall see that all orders and resolutions of the Board of Directors are carried into effect. Subject to the direction of the Board of Directors, he or she shall have general charge of the business, affairs and property of the Corporation and general supervision over its officers and agents. He or she may sign and execute in the name of the Corporation deeds, mortgages, bonds, contracts, agreements or other instruments duly authorized by the Board of Directors, except in cases where the signing and execution thereof shall be expressly delegated by the Board of Directors to some other officer or agent. From time to time he or she shall report to the Board of Directors all matters within his or her knowledge that the interests of the Directors may require to be brought to their attention. The President is charged with the day to day supervision of the business, affairs and property of the Corporation. He or she shall have such other powers and perform such other duties as may from time to time be prescribed by the Board of Directors or these By-laws.

Section 5.8 The Vice President. At the request of the President or in his or her absence or disability, the Vice President shall perform all the duties of the President and, when so acting, shall have all the powers of and be subject to all restrictions upon the President. The Vice President may also sign and execute in the name of the Corporation deeds, mortgages, bonds, contracts, agreements or other instruments duly authorized by the Board of Directors, except in cases where the signing and execution thereof shall be expressly delegated by the Board of Directors to some other officer or agent. Each Vice President shall have such other powers and perform such other duties as may from time to time be prescribed by the Board of Directors, the President or these By-laws.



Section 5.9 The Secretary. The Secretary shall

- (a) record all the proceedings of the meetings of the Members, the Board of Directors, and any committees in a book or books to be kept for that purpose;
- (b) cause all notices to be duly given in accordance with the provisions of these By-laws and as required by law;
- (c) whenever any committee shall be appointed in pursuance of a resolution of the Board of Directors, furnish the chairman of such committee with a copy of such resolution;
- (d) be custodian of the records and of the seal of the Corporation, and cause such seal to be affixed to or a facsimile to be reproduced on all instruments the execution of which on behalf of the Corporation under its seal shall have been duly authorized;
- (e) see that the lists, books, reports, statements, certificates and other documents and records required by law are properly kept and filed;
- (f) in general, perform all duties incident to the office of Secretary and have such other powers and perform such other duties as may from time to time be prescribed by the Board of Directors, the President or these By-laws.

Section 5.10 The Treasurer. The Treasurer shall

- (a) have charge of and supervision over and be responsible for the funds, securities, receipts and disbursements of the Corporation;
- (b) cause the moneys and other valuable effects of the Corporation to be deposited in the name and to the credit of the Corporation in such banks or trust companies or with such bankers or other depositories as shall be selected in accordance with Section 7.3 or to be otherwise dealt with in such manner as the Board of Directors may direct;
- (c) cause the funds of the Corporation to be disbursed by checks or drafts upon the authorized depositories of the Corporation, and cause to be taken and preserved proper vouchers for all moneys disbursed;
- (d) render to the Board of Directors, the President, or any Member, whenever requested, a statement of the financial condition of the Corporation and of all of his or her transactions as Treasurer;
- (e) cause to be kept at the Corporation's principal office correct books of account of all its business and transactions and such duplicate books of account as he or she shall determine and upon application cause such books or duplicates thereof to be exhibited to any Director;



(f) be empowered, from time to time, to require from the officers or agents of the Corporation reports or statements giving such information as he or she may desire with respect to any and all financial transactions of the Corporation;

(g) in general, perform all duties incident to the office of Treasurer and have such other powers and perform such other duties as may from time to time be prescribed by the Board of Directors, the President or these By-laws.

Section 5.11 Compensation. The Corporation may pay reasonable compensation to its officers for personal services that are reasonable and necessary to carry out the purposes of the Corporation.

ARTICLE 6 – INDEMNIFICATION

Section 6.1 Right to Indemnification. Each person who was or is made a party or is threatened to be made a party to or is otherwise involved in any threatened, pending or completed action, suit or proceeding, whether civil, criminal, administrative or investigative (a “Proceeding”), by reason of the fact (a) that he or she is or was a Director, officer or agent of the Corporation, or (b) that he or she, being at the time a Director, officer or agent of the Corporation, is or was serving at the request of the Corporation as a director, officer, member, employee, fiduciary or agent of another corporation or of a partnership, joint venture, trust or other enterprise, including service with respect to an employee benefit plan (collectively, “Another Enterprise” or “Other Enterprise”), may, subject to the terms and conditions of this ARTICLE, be indemnified and held harmless by the Corporation to the fullest extent permitted by Delaware law as the same exists or may hereafter be amended (but, in the case of any such amendment, with respect to alleged action or inaction occurring prior to such amendment, only to the extent that such amendment permits the Corporation to provide broader indemnification rights than permitted prior thereto), against all expense, liability and loss (including, without limitation, attorneys’ and other professionals’ fees and expenses, claims, judgments, fines, ERISA excise taxes or penalties and amounts paid in settlement) reasonably incurred or suffered by such person in connection therewith (“Losses”). Without diminishing the scope of indemnification provided by this Section, such persons shall also be entitled to the further rights set forth below.

Section 6.2 Actions, etc. Other than those by or in the Right of the Corporation. Subject to the terms and conditions of this ARTICLE, the Corporation shall have the power to indemnify any person who was or is a party or is threatened to be made a party to any Proceeding (other than an action by or in the right of the Corporation) by reason of the fact that such person is or was a Director, officer or agent of the Corporation, or, being at the time a Director, officer or agent of the Corporation, is or was serving at the request of the Corporation as a director, officer, member, employee, fiduciary or agent of Another Enterprise, against all Losses, reasonably incurred or suffered by such person in connection with such Proceeding if such person acted in good faith and in a manner reasonably believed to be in or not opposed to



the best interests of the Corporation, and, with respect to any criminal action or proceeding, had no reasonable cause to believe the conduct was unlawful. The termination of any Proceeding by judgment, order, settlement, conviction, or upon a plea of nolo contendere or its equivalent, shall not, of itself, create a presumption that the person did not act in good faith and in a manner reasonably believed to be in or not opposed to the best interests of the Corporation, and, with respect to any criminal action or proceeding, had reasonable cause to believe that the conduct was unlawful.

Section 6.3 Actions, etc. by or in the Right of the Corporation. Subject to the terms and conditions of this ARTICLE, the Corporation shall have the power to indemnify any person who was or is a party or is threatened to be made a party to any Proceeding by or in the right of the Corporation to procure a judgment in its favor by reason of the fact that such person is or was a Director, officer or agent of the Corporation, or being at the time a Director, officer or agent of the Corporation, is or was serving at the request of the Corporation as a director, officer, member, employee, fiduciary or agent of Another Enterprise against all Losses reasonably incurred or suffered by such person in connection with the defense or settlement of such action or suit if such person acted in good faith and in a manner reasonably believed to be in or not opposed to the best interests of the Corporation except that no indemnification shall be made in respect of any claim, issue or matter as to which such person shall have been adjudged to be liable to the Corporation, unless and only to the extent that the Court of Chancery or the court in which such action or suit was brought (or if no action was brought, any court of competent jurisdiction) shall determine upon application that, in view of all the circumstances of the case, such person is fairly and reasonably entitled to indemnity for such expenses which the Court of Chancery or such other court shall deem proper.

Section 6.4 Authorization of Indemnification. Any indemnification under this ARTICLE (unless ordered by a court) shall be made by the Corporation only as authorized in the specific case upon a determination that indemnification of a person is proper in the circumstances because such person has met the applicable standard of conduct required by Section 6.1 or set forth in Section 6.2 or Section 6.3 of this ARTICLE, as the case may be. Such determination shall be made in a reasonably prompt manner (a) (1) by a majority vote of Disinterested Directors, whether or not they constitute a quorum of the Board of Directors, (2) if there are no Disinterested Directors, or if the Disinterested Directors so direct, by Independent Legal Counsel in a written opinion or by the Members, or (3) as Delaware law may otherwise permit and (b) by a majority vote of the Disinterested Members. To the extent, however, that a Director, officer, employee or agent of the Corporation has been successful on the merits or otherwise in defense of any action, suit or proceeding described above, or in defense of any claim, issue or matter therein, such person shall be indemnified against expenses (including attorneys' and other professionals' fees) reasonably incurred by such person in connection therewith, without the necessity of authorization in the specific case.

Section 6.5 Definitions. For purposes of this ARTICLE:

(a) "Disinterested Directors" shall mean Directors of the Corporation who are not parties to a Proceeding in respect of which indemnification is sought by a claimant.

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(b) “Disinterested Members” shall mean those Members of the Corporation who are not parties to a Proceeding in respect of which indemnification is sought by a claimant.

(c) “Independent Legal Counsel” shall mean a law firm, a member of a law firm or an independent practitioner, that is experienced in matters of corporate law and shall include any person who, under the applicable standards of professional conduct then prevailing, would not have a conflict-of-interest in representing either the Corporation or the claimant in an action to determine the claimant’s rights under this ARTICLE.

(d) “Good Faith”. For purposes of any determination under Section 6.4 of this ARTICLE, a person shall be deemed to have acted in good faith if the action is based on (i) the records or books of account of the Corporation or Another Enterprise, or on information supplied to such person by the officers of the Corporation or Another Enterprise in the course of their duties, or on (ii) the advice of Independent Legal Counsel for the Corporation or Another Enterprise, or on information or records given or reports made to the Corporation or Another Enterprise by an independent certified public accountant, independent financial adviser, appraiser or other expert selected with reasonable care by the Corporation or the Other Enterprise. The provisions of this Section shall not be deemed to be exclusive or to limit in any way the circumstances in which a person may be deemed to have met the applicable standard of conduct.

(e) “Agent” shall include, but shall not be limited to, Members, employees, consultants and advisors.

(f) In connection with employee benefit plans, etc., references to “fines” shall include any excise taxes assessed on a person with respect to an employee benefit plan; references to “serving at the request of the Corporation” shall include any service as a Director or officer of the Corporation which imposes duties on, or involves services by, such Director or officer with respect to an employee benefit plan, its participants or beneficiaries; and a person who has acted in good faith and in a manner reasonably believed to be in the interest of the participants and beneficiaries of an employee benefit plan shall be deemed to have acted in a manner “not opposed to the best interests of the Corporation” as referred to in this ARTICLE.

Section 6.6 Proceedings Initiated by Indemnified Persons. Notwithstanding any provisions of this ARTICLE to the contrary, the Corporation shall not indemnify any person or make advance payments in respect of Losses to any person pursuant to this ARTICLE in connection with any Proceeding (or portion thereof) initiated against the Corporation by such person unless such Proceeding (or portion thereof) is authorized by the Board of Directors or its designee; provided, however, that this prohibition shall not apply to a counterclaim, cross-claim or third-party claim brought in any Proceeding or to any claims provided for in Section 6.7 of this ARTICLE.

Section 6.7 Indemnification by a Court. Notwithstanding any contrary determination in the specific case under Section 6.4 of this ARTICLE or the absence of any determination thereunder, a director or officer may apply to any court of competent jurisdiction for



indemnification, and such court shall grant the application if it is determined that, in view of all the circumstances of the case, the director or officer is fairly and reasonably entitled to indemnity for such expenses that the court shall deem proper. Notice of any application for indemnification pursuant to this Section shall be given to the Corporation promptly upon the filing of such application. If the court grants the application, in whole or in part, the director or officer shall be entitled to be paid the expense incurred by such director or officer in connection with the application.

Section 6.8 Expenses Payable in Advance. Losses reasonably incurred by a director or officer in defending any threatened or pending Proceeding (or as provided in Section 6.6 of this ARTICLE) may be paid by the Corporation in advance of the final disposition of such Proceeding upon receipt of an undertaking by or on behalf of such Director, officer or agent to repay such amount if it shall ultimately be determined that such person is not entitled to be indemnified by the Corporation as authorized in this ARTICLE. Losses incurred by other employees may be so paid upon such terms and conditions, if any, as the Board of Directors deems appropriate.

Section 6.9 Communications with the Corporation. Any notice, request or other communication required or permitted to be given to the Corporation under this ARTICLE shall be in writing and either delivered in person or sent by telecopy, telex, telegram, overnight mail or courier service, or certified or registered mail, postage paid, return receipt requested, to the Secretary of the Corporation and shall be effective only upon receipt by the Secretary.

Section 6.10 Non-exclusivity and Survival of Indemnification. The indemnification and advancement of expenses provided by or granted pursuant to this ARTICLE shall not be deemed exclusive of any other rights to which those seeking indemnification or advancement of expenses may be entitled under the Certificate of Incorporation, any Bylaw, agreement, contract, vote of Members or of disinterested Directors, or pursuant to the direction (howsoever embodied) of any court of competent jurisdiction or otherwise. The provisions of this ARTICLE shall not be deemed to preclude the indemnification of any person who is not specified in Section 6.1, Section 6.2 or Section 6.3 of this ARTICLE but whom the Corporation has the power to indemnify (and pursuant to Section 6.4 of this ARTICLE determines to indemnify) or an obligation to indemnify under the provisions of Delaware law, or otherwise. The rights conferred by this ARTICLE shall continue as to a person who has ceased to be a Director or officer and shall inure to the benefit of such person and the heirs, executors, administrators and other comparable legal representatives of such person. The rights conferred in this ARTICLE shall be enforceable as contract rights, and shall continue to exist after any rescission or restrictive modification hereof with respect to events occurring prior thereto. No rights are conferred in this ARTICLE for the benefit of any person (including, without limitation, directors and officers of subsidiaries of the Corporation) in any capacity other than as explicitly set forth herein.

Section 6.11 Insurance. The Corporation may, but shall not be required to, purchase and maintain insurance on behalf of any person who is or was a Director, officer or agent of the Corporation, or, being at the time a Director, officer or agent of the Corporation, is or was



serving at the request of the Corporation as a director, officer, member, employee, fiduciary or agent of Another Enterprise against any liability asserted against such person and incurred by such person in any such capacity, or arising out of such person's status as such, whether or not the Corporation would have the power or the obligation to indemnify such person against such liability under the provisions of this ARTICLE.

Section 6.12 Amendment or Repeal. Any amendment or repeal of the provisions of this ARTICLE shall not adversely affect any right or protection under this ARTICLE of any person in respect of any act or omission occurring prior to the time of such amendment or repeal.

**ARTICLE 7 –
EXECUTION OF INSTRUMENTS
AND DEPOSITS OF CORPORATE FUNDS**

Section 7.1 Execution of Instruments Generally. The President, the Vice President, the Secretary or the Treasurer, subject to the approval of the Board of Directors, may enter into any contract or execute and deliver any instrument in the name and on behalf of the Corporation. The Board of Directors may authorize any officer or officers, or agent or agents, to enter into any contract or execute and deliver any instrument in the name and on behalf of the Corporation, and such authorization may be general or confined to specific instances.

Section 7.2 Borrowing. No loans or advances shall be obtained or contracted for, by or on behalf of the Corporation and no negotiable paper shall be issued in its name, unless and except as authorized by the Board of Directors. Such authorization may be general or confined to specific instances. Any officer or agent of the Corporation thereunto so authorized may obtain loans and advances for the Corporation, and for such loans and advances may make, execute and deliver promissory notes, bonds, or other evidences of indebtedness of the Corporation. Any officer or agent of the Corporation thereunto so authorized may pledge, hypothecate or transfer as security for the payment of any and all loans, advances, indebtedness and liabilities of the Corporation, any and all stocks, bonds, other securities and other personal property at any time held by the Corporation, and to that end may endorse, assign and deliver the same and do every act and thing necessary or proper in connection therewith.

Section 7.3 Deposits. All funds of the Corporation not otherwise employed shall be deposited from time to time to its credit in such banks or trust companies or with such bankers or other depositories as the Board of Directors may select, or as may be selected by any officer or officers or agent or agents authorized so to do by the Board of Directors. Endorsements for deposit to the credit of the Corporation in any of its duly authorized depositories shall be made in such manner as the Board of Directors from time to time may determine.

Section 7.4 Checks, Drafts, etc. All checks, drafts or other orders of the payment of money, and all notes or other evidences of indebtedness issued in the name of the Corporation, shall be signed by such officer or officers or agent or agents of the Corporation, and in such manner, as from time to time shall be determined by the Board of Directors.



Section 7.5 Proxies. Proxies to vote with respect to shares of stock of other corporations owned by or standing in the name of the Corporation may be executed and delivered from time to time on behalf of the Corporation by the President or any Vice President or by any other person or persons thereunto authorized by the Board of Directors.

ARTICLE 8 – CORPORATE SEAL

If the Board determines that a corporate seal should be obtained, the corporate seal shall be circular in form and shall bear the name of the Corporation and words and figures denoting its organization under the laws of the State of Delaware and year thereof and otherwise shall be in such form as shall be approved from time to time by the Board of the Corporation.

ARTICLE 9 – FISCAL YEAR

The fiscal year of the Corporation shall end December 31.

ARTICLE 10 – FORM OF RECORDS

Any records maintained by the Corporation in the regular course of its business, including its Member ledger, books of account, and minute books, may be kept on, or by means of, or be in the form of, any information storage device or method, provided that the records so kept can be converted into clearly legible paper form within a reasonable time.

ARTICLE 11 – NOTICE BY ELECTRONIC TRANSMISSION

Section 11.1 Notice by Electronic Transmission. Without limiting the manner by which notice otherwise may be given effectively to Members, Directors or committee members, any notice to Members, Directors or committee members given by the Corporation under any provision of law, the Certificate of Incorporation, or these By-laws shall be effective if given by a form of electronic transmission consented to by the person to whom the notice is given, unless otherwise provided by the General Corporation Law of the State of Delaware. Any such consent shall be revocable by such person by written notice to the Corporation. Any such consent shall be deemed revoked if (i) the Corporation is unable to deliver by electronic transmission two consecutive notices given by the Corporation in accordance with such consent and (ii) such inability becomes known to the Secretary or an Assistant Secretary of the Corporation or other



person responsible for the giving of notice; provided, however, the inadvertent failure to treat such inability as a revocation shall not invalidate any meeting or other action.

Section 11.2 When Notice Deemed Given. Notice given pursuant to Section 11.1 shall be deemed given: (i) if by facsimile telecommunication, when directed to a number at which the person has consented to receive notice; (ii) if by electronic mail, when directed to an electronic mail address at which the person has consented to receive notice; (iii) if by a posting on an electronic network together with separate notice to the person of such specific posting, upon the later of (A) such posting and (B) the giving of such separate notice; and (iv) if by any other form of electronic transmission, when directed to the person. An affidavit of the Secretary or an Assistant Secretary or other agent of the Corporation that the notice has been given by a form of electronic transmission shall, in the absence of fraud, be prima facie evidence of the facts stated therein.

Section 11.3 "Electronic Transmission" Defined. For purposes of this ARTICLE, "electronic transmission" means any form of communication, not directly involving the physical transmission of paper, that creates a record that may be retained, retrieved and reviewed by a recipient thereof, and that may be directly reproduced in paper form by such a recipient through an automated process.

ARTICLE 12 – WAIVER OF NOTICE

Whenever any notice is required to be given under the provisions of the statutes or of the Certificate of Incorporation or of these By laws, a waiver thereof in writing, signed by the person or persons entitled to said notice, whether before or after the time stated therein, shall be deemed equivalent thereto. Attendance of a person at a meeting shall constitute a waiver of notice of such meeting, except when the person attends a meeting for the express purpose of objecting, at the beginning of the meeting, to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at, nor the purpose of, any regular or special meeting of the Members need be specified in any written waiver of notice, or any waiver of notice by electronic transmission, unless so required by the Certificate of Incorporation or these By-laws.

ARTICLE 13 – AMENDMENTS

All By-laws of the Corporation may be amended or repealed, and new By-laws may be made, by an affirmative majority of the votes cast at any meeting of the Members called for such purpose.



CERTIFICATION

I hereby certify that I am the Secretary of First State Compassionate Care, Inc. (the "Corporation") and that the foregoing By-laws are the By-laws of the Corporation as adopted by the Board of Directors of the Corporation on January 14, 2014, and that these By-laws have not been amended or modified since that date.

29 Del.C. Ch. 100 Freedom of Information Act

Print Name: Kathleen McGinness

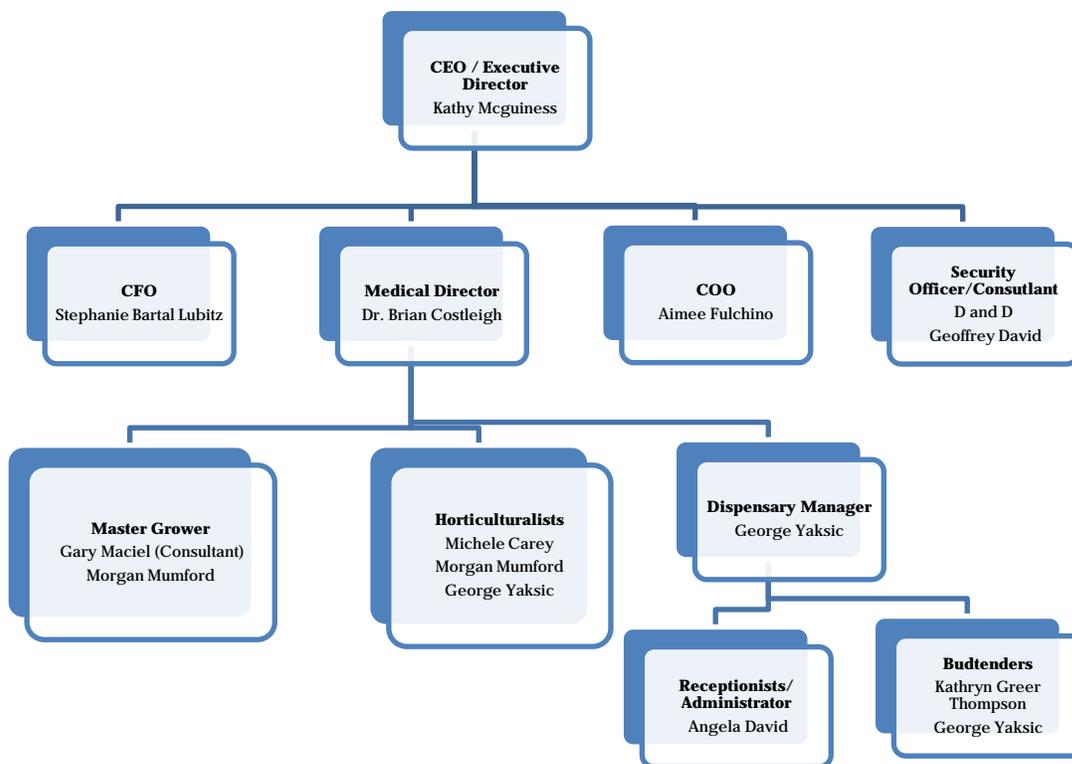
Secretary

Dated: January 15, 2014



Organizational Chart

The following organizational chart is a diagram that shows the structure of our organization and the relationships and relative ranks of its parts and positions. The chart demonstrates a few of the roles required to ensure dispensary and cultivating efficiency, productivity, and quality. The Workforce Role Requirements table below includes: the job classification, the staff responsibility, skills required, number of staff required, and unit of labor (FTE/PT) status. The following job classifications, responsibilities, and unit rates are subject for amendments depending upon current markets and organization needs and industry/company changes.





Workforce Role Requirements

Job Classification	Staff Responsibility	Required Skills	Number of Staff Required	Unit of Labor FTE/Part-time
CEO	Analyze and synthesize information.	Ability to plan, develop and organize	1	Part-time Exempt
CFO	Evaluate and advise on the impact of long range planning.	Financial management experience with a strong accounting training.	1	Part-time Exempt
COO	Oversee dispensary and dispensary operations of organization.	Operational experience, strong sense of internal controls.	1	Part-time Exempt
Medical Director	Provides overall strategic medical input and approval for industry.	3 years clinical experience with direct patient care	1	Part-time Exempt
Security Officer	Patrols assigned areas on foot.	Good working knowledge of security operations.	1	FTE/PT Non-Exempt
Dispensary Manager	Oversea daily operations and training of budtenders.	Organized, good interpersonal skills.	1	FTE Exempt
Budtenders	Planting, growing and harvesting medicinal plants.	Organized, detail-oriented and knowledgeable of cannabis varieties.	1	FTE Non-Exempt
Receptionist/ Administrator	Clerical duties and administration..	Organized and friendly customer service.	1	FTE Non-Exempt
Horticulturalists / Master Growers	Maintain and care for cannabis plants.	Good working knowledge of growing.	3	FTE



Staffing Plan

Classification/Skills Assessment/Education

CEO / Executive Director

Summary: Establishes credibility throughout the organization and with the Board as an effective developer of solutions to dispensary and dispensary business challenges. Provides leadership and management to ensure that the mission and core values of the company are put into practice. Responsible for driving the company to achieve and surpass business goals and objectives.

Position requires:

- a. Strong problem solving skills, ability to identify and resolve problems in a timely manner and gather and analyzes information skillfully.
- b. Must have strong written and verbal communication skills. Be able to speak clearly and persuasive in positive or negative situations, demonstrate group presentation skills and conducts productive meetings.
- c. Ability to effectively delegate work assignments and set expectations.
- d. Strong ability to inspire and motivate others to perform well and accepts feedback from others.
- e. Possess strong leadership skills with advance knowledge in staffing and planning, decision-making, facilitating and process improvement; makes self-available to staff; provides regular performance feedback; and develops subordinates' skills and encourages growth.
- f. Have ability to improve and promote quality processes and demonstrates accuracy and thoroughness.
- g. Exhibit strong talent to display willingness to make decisions, exhibits sound and accurate judgment, and makes timely decisions.
- h. Able to observe safety and security procedures and uses equipment and materials properly.

Experience: Previous Experience-must have at least five years previous experience as CEO or general manager. Should have experience in compounding, manufacturing or dispensary.

Education: BS or equivalent; or ten to fifteen years related experience and/or training; or equivalent combination of education and experience.



Chief Financial Officer (CFO)

Summary: The CFO is responsible for directing the fiscal functions of the corporation in accordance with generally accepted accounting principles issued by the Financial Accounting Standards Board, the Securities and Exchange Commission, and other regulatory and advisory organizations and in accordance with financial management techniques and practices appropriate within the private and public industries.

Position Requires:

- a. Ability to plan, develop, organize, implement, direct and evaluate the organization's fiscal function and performance.
- b. Participate in the development of the corporation's plans and programs as a strategic partner.
- c. Possesses the ability to evaluate and advise on the impact of long range planning, introduction of new programs/strategies and regulatory action.
- d. Strong ability to provide timely and accurate analysis of budgets, financial reports and financial trends in order to assist the CEO/President and the Board and other senior executives in performing their responsibilities.
- e. Ability to enhance and/or develop, implement and enforce policies and procedures of the organization by way of systems that will improve the overall operation and effectiveness of the corporation.
- f. Strong ability to improve budgeting process through education of department managers on financial issues impacting their budgets.
- g. Advance level experience in providing strategic financial input and leadership on decision making issues affecting the organization.
- h. Senior level experience optimizing the handling of bank and deposit relationships.
- i. Ability to develop a reliable cash flow projection process and reporting mechanism which includes minimum cash threshold to meet operating needs.
- j. Skillful advisor from the financial perspective on any contracts into which the Corporation may enter.
- k. Helps oversee not-for-profit status

Experience: Must have 10+ years' financial and accounting management experience and progressively responsible financial leadership roles.

Education: Bachelors in Accounting or Finance, MBA and/or CPA highly desirable with a combination of ten to fifteen years related experience and/or training.



Chief Operations Officer (COO)

Summary: The COO is responsible for managing all hands-on operational aspects of the company. Directs, administers, and coordinates the internal operational activities of the organization in accordance with policies, goals, and objectives established by the CEO and the Board of Directors.

Position Requires:

- a. Knowledge of the entire scope of services related to a compassion center
- b. Ability to run a sophisticated auditing and tracking bar code system
- c. Understanding how to safely dispense medication
- d. Possess the ability to manage multiple agents doing a variety of jobs
- e. Ability to draft and present reports to the board regarding operations of the center
- f. Understanding of all security protocols and how to execute emergency protocols
- g. Keen ability to spot errors in reporting or record keeping and how to remedy those mistakes

Experience: Minimum 5 years of experience managing a mid to large scale business or non-profit with a minimum of 10-15 employees/volunteers.

Education: Bachelors of Business Administration, MBA and/or CPA highly desirable.



Medical Director

Summary: The Medical Director drives the advancement of patient safety by rigorously and creatively applying their scientific and medical expertise. Medical Director possesses and leverages his or her credibility to inform and influence healthy growing practices, clinical studies, leads strategic research activities on cannabis, provide insights for and influence new strains for supporting patients. Works collaboratively with dispensaries to understand needs of patients.

Position Requires:

- a. Provide high-level commentary on Medical Cannabis Reports (MCR's). Responds to potential crises involving MCRs. Communicates with Dispensary Director. Communicates with outside industry entities as needed to support MCR surveillance.
- b. Provides high-level commentary on vital complaints. Responds to crises involving cannabis complaints. Communicates to Dispensary Director. Communicates with outside industry entities as needed.
- c. Proactively identifies need for analysis of potential safety issue. Communicates results of analysis to Dispensary Director as needed.
- d. Crafts strategy and directs others for pre-approval regulatory activities. Meets and communicates with regulatory agencies.
- e. Collaborates and interfaces with business units and development teams (clinical trials and preclinical) on projects of highly critical nature to support scientifically-sound decision-making related to new product or new indication development.
- f. Serves as a key physician advisor in management review meetings.
- g. Provides overall strategic medical input and approval for industry complex studies as they apply. Provides overall strategic advice on trial planning, execution/analysis and publication strategy for complex studies. Drives resolution for difficult or unclear cases.
- h. Serves as physician liaison to clinical trial team when high level decisions are needed (including high-level review meetings). Contributes to program overall development and strategy.
- i. Advises in business critical, high risk or high visibility Product Inquiry Report (PIR) issues, provides authoritative opinion; anticipates challenges and poses unasked questions; may request additional investigation; provides critical review at all phases of PIR.
- j. May provide guidance in resolution of medical issues with high visibility, high risk or strategic importance to business. Participates in management review of original documents and document updates that are high visibility, high risk, or of strategic importance.
- k. Serves as Cannabis physician representative on unusually sensitive or complex studies.
- l. Provides specific Cannabis medical education across division and corporation around specific issues. May provide focused educational



sessions, including for senior management, to address high profile, hi or business critical issues.

- m. Establish environment and sets standards for cleanliness, hygiene, prc and patient safety.

Experience: Minimum 3 years clinical experience with direct patient care (clinical years of medical school count towards direct patient care).

A minimum of 10 years of clinical trial or industry experience is required.
5 years Clique of Acesching and mentoring. (Direct managerial experience desired.)

Education: Medical degree preferred Residency training, board certification or additional advanced degree in medical patient treatment.



Dispensary Manager

Summary: The Dispensary Manager is responsible for training and oversight of Budtenders and receptionists, for ensuring a professional, friendly, respectful and hospitable environment filled with compassion for patients, visitors and associates.

Position Requires:

- a. Possess a passion and enthusiasm for medical cannabis
- b. Remarkable ability to manage a group of employees
- c. Ability to provide an excellent customer service experience and build rapport
- d. Extensive knowledge of medical cannabis: including but not limited to: strains, genetics, dispensary practices, modes of administration, selection of strains for ailments
- e. Capability to produce sales reports, identify market trends, and provide analysis
- f. Demonstrate an adaptable, flexible, proactive approach
- g. Commitment to accountability
- h. Ability to partner and collaborate both in and outside of the sales department
- i. Inspire trust to form strong working relationships with diverse groups of people

Experience:

- a. 3+ Years Recent Management Experience of a team of 15+ •
- b. 3+ Years Training/Educating
- c. 5+ Years Recent Retail/Service Experience
- d. Experience with high volume patient/customer intake
- e. Proficiency in using Microsoft Office Suite required
- f. Previous health care and/or dispensary experience highly desirable

Education: Bachelor's Degree or Equivalent Experience.



Budtenders

Summary: Responsible for planting, growing, transplanting, harvesting, manic and packaging medicinal plants.

Position Requires:

- a. Multiple years of experience working in cultivation/dispensary
- b. Knowledge of grow spaces and impact on cultivation/harvesting
- c. Ability to analyze yields and maximize yield efficiency
- d. Knowledge of cleanliness regulations
- e. Full knowledge of medical marijuana contaminants and how to properly deal with them

Experience: Working in a diverse cultivation/harvesting center

Education- Bachelors in Horticulture or relevant experience preferred.



Horticulturalists/Master Growers

Summary: The horticulturalists are growers that tend to cannabis plants. They responsible for planting, planting, growing, transplanting, harvesting, manicuring and packaging medicinal plants. All nursery workers must carefully care for the plants and the dispensary facility to ensure highest health and safety conditions are being met.

Position requires:

- a. Strong knowledge to maintain and care for cannabis plants.
- b. Able to grow, manicure and irrigate plants; perform general cleanup of the garden and perform pest control measures that meet organic and Department of Health standards.
- c. Knowledge to mix soil for plant beds and containers.
- d. Advanced knowledge in planting new vegetation in the dispensary garden taking special note of weather conditions, heat issues, mold, bacteria, pests and other potential problems.
- e. Strong ability to collect, compile and analyze data on experiments; writes evaluation of findings.

Experience:

- a. Must have a minimal of 5+ years' experience in horticulture or related experience.
- b. Knowledge of the principles of horticulture.
- c. Knowledge of modern research methods, data collection and analysis.
- d. Knowledge of a variety of growing techniques.
- e. Strong skills in both verbal and written communication.

Education: Bachelor's degree in Horticulture, Plant Science or related field and; OR, Any equivalent combination of experience and/or education from which comparable knowledge, skills and abilities have been achieved.



Receptionist/Administrator

Summary: Receptionist/Administrator provides both clerical and administrative support for the internal staff and friendly customer service to the Center's customers. The role plays a vital part in the administration and smooth-running of the corporation.

Position requires:

- a. ability to greet patients
- b. verifies qualifying patient and indoctrines patient on first visit (HIPAA WAIVER, HANDBOOK, DEPT FAQ, GOOD NEIGHR POLICY, ETC)
- c. verifies qualifying patient status and checks patients in on subsequent visits
- d. verifies patient location in facility in case of emergency
- e. verifies patient 3oz per 14 day limits
- f. experienced in MS word, excel and basic record keeping

Experience: Previous administrative or medical experience and customer service experience.



Security Officer

Summary: Provide a visual security presence to ensure that visitors have a safe pleasant experience while visiting the Center. Ensure that all mechanical systems are functioning properly.

Positions Requires:

- a. Patrols assigned areas on foot, checking for fires, vandalism, suspicious activity or persons or safety/fire hazards.
- b. Investigates and/or reports hazards, unusual or suspicious circumstances..
- c. Checks doors and windows of buildings to ensure they are tightly closed and locked; notes in written log any unlocked doors/windows; submits information to supervisor.
- d. Observes activity and traffic in assigned area to enforce rules/regulations.
- e. Escorts people/property to desired destination when monies, documents or safety of property or persons are a concern.
- f. Responds to alarms and dispatched calls; decides what actions to take based on situation, facts known and position limitations.
- g. Decides when incident requires written report; decides which report form to use and submits to supervisor.
- h. Unlocks buildings/doors after checking identification and compliance with company policies.

Experience: Good working knowledge of security operations, safety practices in a business environment and enforcement procedures.

Ability to communicate effectively both orally and in writing with staff, and in professional manner and appearance, to write and investigate required reports; to make independent and good judgment decisions within proper policy and procedures; to maintain a valid CCDW license.

Education: BA/BS in Law/ Business or equivalent experience required plus any Security/Law Enforcement experience preferred. Must be at least 21 years of age.



Agents of the Compassion Center and Organization

Ø See Appendix G- for full background checks

STAFF

29 Del.C. Ch. 100 Freedom of Information Act

KATHLEEN MCGUINNESS – CEO/ EXECUTIVE DIRECTOR

DOB: 29 Del.C. Ch. 100 Freedom of Information Act

Address: 29 Del.C. Ch. 100 Freedom of Information Act

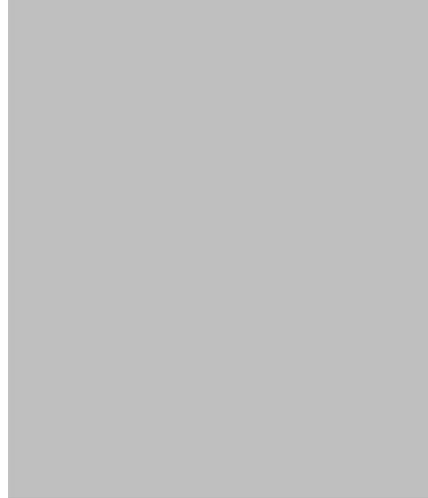
Phone: 29 Del.C. Ch. 100 Freedom of Information Act

Ms. McGuinness has run two successful businesses, Rehoboth Pharmacy as well as The Bootlegger. She is the founding President of the National Award Winning Rehoboth Beach Non- Profit Main Street and has sat on numerous boards and committees. She is also the founder, Chair and annual fundraising chair of the successful operation of The Rehoboth Fireworks every July 4th in downtown Rehoboth. Ms. McGuinness has been a Rehoboth Beach city commissioner for 12 years, she spearheaded and fought for several projects and funding including the multimillion streetscape infrastructure upgrade and beautification project, the traffic circle, the Boardwalk renovation to name a few. She chaired the Personnel committee for 10 of those years, as well as the Bandstand/Convention Hall Special events and sat on several others. She has proven she can start and run a non-profit, a successful business and believes in teamwork to manage any hurdles that may arise. As a Pharmacist, she has years of compounding experience under sterile and non-sterile conditions making, creams, ointments, troches, lip balm, suppositories.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



STEPHANIE BARTAL LUBITZ/CFO

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

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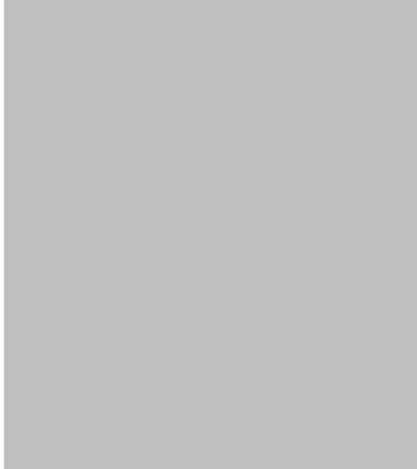
29 Del.C. Ch. 100 Freedom of Information Act

Ms. Lubitz has over 20 years of experience in varying accounting fields. She has provided both operational and programmatic support to the varying companies and organizations. She has directed financial audits and provided recommendations for procedural improvements in both in house and consulting positions. Ms. Lubitz has prepared financial statements for all types of entities and has knowledge of healthcare, bio-technology, and non-profit auditing and accounting systems. Ms. Lubitz will provide The Giving Tree with valuable financial procedures to stay compliant with all rules and regulations and be accurate in all aspects of our recordkeeping.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



BRIAN J. COSTLEIGH, MD/MEDICAL DIRECTOR

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

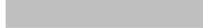
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29 Del.C. Ch. 100 Freedom of Information Act



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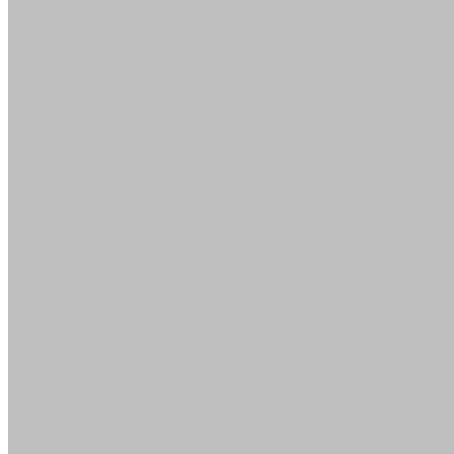


Dr. Costleigh will be the medical director for The Giving Tree. He is a well-respected medical mind and a prominent figure in the Delaware medical community. Dr. Costleigh was the Lead Radiation Oncologist in designing and opening the new Cancer Center. Dr. Initiated the CME program for tumor conferences and Initiated Prostate Brachytherapy Program. Dr. also initiated 3D and IMRT programs as well as Initiating Stereotactic radiation. Dr. Initiated the Varian EMR. Dr. grew the practice revenues by 60%. He is a Diplomat of American Board of Radiology-Radiation Oncology. Dr. Initiated research protocols with RTOG, GOG, CALGB and CCOP under the auspices of Christiana Medical Center in Newark, DE. ACS-COC accreditation with commendation and outstanding achievement. First accredited Breast Center in Delaware. Dr. Costleigh has knowledge of the vast array of diseases, syndromes, disorders, and ailments that medical marijuana use benefits. Dr. Costleigh is well known and revered in the oncological field and will bring a wealth of knowledge of the cannabis plant, uses and side effects to the Giving Tree.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



AIMEE FULCHINO/COO

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

Ms. Fulchino is an accomplished business owner, board member and CPA with over 15 years of experience in starting and running a new a business as well as how to ensure its success through strong internal controls and financial procedures. Ms. Fulchino will help implement and continually improve The Giving Tree’s financial reporting, auditing and recordkeeping practices.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



GEOFFREY K. DAVID/ SECURITY OFFICER

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

Jeff David is a retired Milford law enforcement officer with 27 years of experience. He sat on the DEA task force for 3 years and is a trained k-9 Handler. His partner of 6 years, Zeus (k-9) resides at the David residence with his wife and two children. Jeff will be a visible force and crime deterrent as well as a wealth of information with his law enforcement experience.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



GARY MACIEL/MASTER GROWER

DOB:

29 Del.C. Ch. 100 Freedom of Inf

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

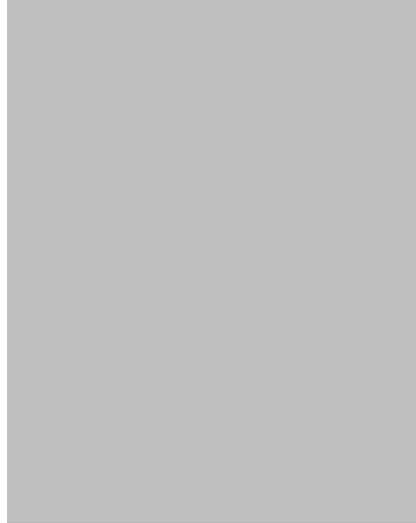
29 Del.C. Ch. 100 Freedom of Information

Gary Maciel has been growing marijuana for over 15 years. An expert in energy efficiency and master of innovation, his ability to customize grow spaces is unrivaled. Gary currently oversees medical marijuana grow operations all over the United States. He frequently lectures at Cannabis Career Institute seminars about advanced grow techniques. Ideal for the home closet grower or warehouse operations, Gary's advice will help increase current yields or develop a strategy to diversify a yield. Gary is a long-standing faculty member of Cannabis Career Institute. Mr. Maciel's experience and expertise in the field of medical marijuana is unmatched and The Giving Tree welcomes him to our team.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



MORGAN MUMFORD/MASTER GROWER/HORTICULTURIST

DOB:

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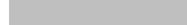
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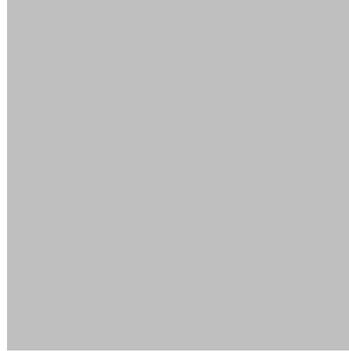


Early 2000, in California, Morgan Mumford was engaged by a group of caregivers serving medical marijuana patients in Northern California. As part of his employment, he set up their facility including building a greenhouse, designing and installing irrigation systems and installation of a solar power and inverter system. Mr. Mumford has extensive knowledge of the infrastructure needed to set up a self-sustaining organic medical marijuana farm. Mr. Mumford has experience working on the farms as a caretaker to the plants; making sure that they receive the right nutrients, processing organic fertilizer to feed the plants and maintaining, pruning, harvesting, trimming, drying, and curing the medical marijuana plants.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



MICHELE CAREY/HORTICULTURIST

DOB:

29 Del.C. Ch. 100 Freedom of Informa

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information

Michele has been an independent contractor horticulture and landscape architect in the Sussex county area for almost 2 decades. She has strong ties to the area, a plethora of knowledge in the plant industry combined with her administrative experience paying close attention to detail. Michele is known for her community outreach, volunteering and most notably landscaping projects including but not limited to the West Rehoboth West side New Beginnings property

As well as the The Community Resource Center. Michele will provide her horticulturist actual training and experience to the Giving Tree to ensure top quality product.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



**GEORGE M. YAKSIC/ HORTICULTURALIST/DISPENSARY
MANAGER/BUDTENDER**

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

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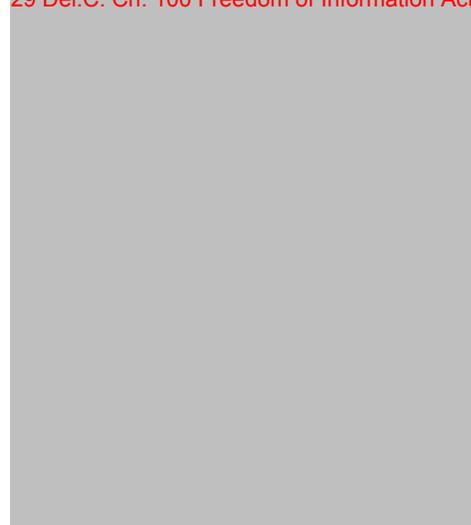
29 Del.C. Ch. 100 Freedom of Information Act

Mr. Yaksic along with his legal background also has over ten years of experience and increasing responsibility and expertise in Hotel and Property Management plus Rentals and Sales in the local Beach Resort environment. He has a Delaware Teaching Certification (Birth to Eight Years Old), Ten years of solid Project Management & Training experience on long and short-term projects with staffs ranging from 15 to 150. He's diverse background and proven customer experience skills make Mr. Yaskic the ideal Dispensary Manager and BudTender for The Giving Tree.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



ANGELA DAVID/RECEPTIONIST /ADMINISTRATOR

DOB:

29 Del.C. Ch. 100 Freedom of Inform

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information

Angela David is the owner of Fancy Ang Designs has experience in marketing, graphic design, computer skills and social media, and will be able to use her skills to help The Giving Tree reach out to the local community and beyond.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



KATHRYN GREER THOMPSON/BUDTENDER

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

Ms. Thompson has particular skills related to the various marijuana strains, their active medical use of marijuana constituents (spectrum of cannabinoids), and the healing effects that they impart. She has knowledge of the vast array of diseases, syndromes, disorders, and ailments that medical marijuana use benefits. She can explain in detail the different types of medical marijuana ingestion, the pros and cons of each type of ingestion, and which types are best for different diseases, syndromes, disorders, and ailments. Her background lies in human anatomy, physiology, and pathologies. Ms. Thompson also has knowledge of herbal compounding (making herbal medicines) that can be applied to compounding with medical marijuana and of medicinal herbs, supplements, and nutrition (including whole/natural foods and organic foods).

Her objective is to help maintain integrity in the operation of Delaware's first medical marijuana dispensary and to ensure that our patients will be served with the utmost respect and care by knowledgeable, compassionate members.

Qualification information:

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



Non-Staff Business Associates

29 Del.C. Ch. 100 Freedom of Information Act



STEVE MCGUINNESS/REALTOR

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

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29 Del.C. Ch. 100 Freedom of Information Act

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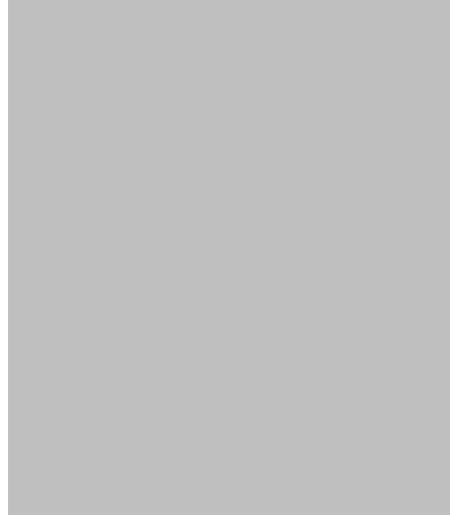
29 Del.C. Ch. 100 Freedom of Information Act

Mr. McGuinness has been a prominent member of the community for many years, and commitment and service to a wide range of associations and committees including The Pilots Association for the Bay and River of Delaware, Delaware Licensed Realtor and former Commissioner of Henlopen Acres. He will provide a valuable voice for The Giving Tree.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



KENNETH R. MORRIS/ATTORNEY

DOB:

29 Del.C. Ch. 100 Freedom of Informa

Address:

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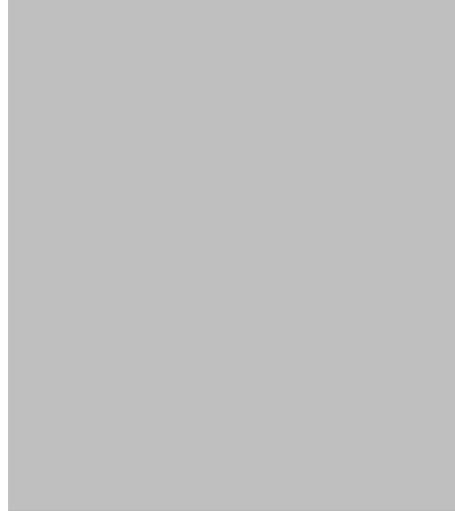
29 Del.C. Ch. 100 Freedom of Information

Mr. Morris has almost 20 years of experience in the legal field. He has knowledge in the area of commercial litigation and appeals, with an emphasis in complex commercial litigation, breach of contract, employment law disputes, insurance disputes, intellectual property issues, and construction law. He will provide a varying array of knowledge to The Giving Tree across numerous relevant legal fields.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



BRYAN E KEENAN/ATTORNEY

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

Mr. Keenan is a respected attorney with a range of expertise that will be a valuable addition to The Giving Tree. Mr. Keenan has authored numerous writings ranging from professional liability to economics. He has served as Adjunct Professor of Law at Widener Law School and is prominent member of the community serving as a member of the Wilmington Tax Group (Treasurer 2001-2002; President 2002-2003) and the Estate Planning Council of Delaware, Inc. (Director 2005-) as well as numerous sections of the Delaware State Bar Association. The Giving Tree will rely on Mr. Keenan's expertise to stay compliant with all regulations put forth.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



CHARLES STERNER/ACCOUNTANT

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

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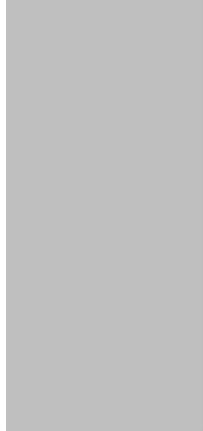
29 Del.C. Ch. 100 Freedom of Informa

A Local Delawarean, Charles bring his valuation techniques and background to The Giving Tree to help ensure all Delaware policies and procedures relating to the budget will be on target. Charles is a community volunteer. He is the Trustee and Treasurer for The Children's Beach House and a CenDel Foundation member and Greater Kent Committee in Dover, DE. Charles will continue to make The Giving Tree as transparent and compliant as possible.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information



CYNTHIA FERGUSON/ADVISORY BOARD

Cynthia is Secretary for Sixth District Community Service Scholarship Fund. She awarded scholarships based on the student's service to their community. Having seen the problems that people experience for being caught with minor amounts of marijuana (both her nephews lost their driving privileges until they were in their 30's), and believing that there is more good to marijuana than bad, she founded a state chapter of the National Organization for the Reform of Marijuana Laws(NORML). She is working to reform the cannabis laws in the First State. Ms. Ferguson also has years of consulting experience that will prove valuable to The Giving Tree as we expand our services list.

Criminal Back Ground Check: [29 Del.C. Ch. 100 Freedom of Information Act](#)



29 Del.C. Ch. 100 Freedom of Information Act



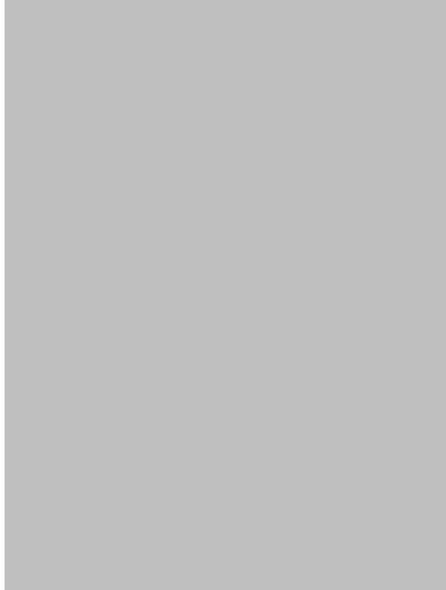
DELLOSE AND DIFONZO ASSOCIATES- SECURITY CONSULTANTS/
MICHAEL J. DELLOSE

Mr. Dellose is a Delaware licensed, bonded and insured private investigator. He has been fingerprinted for this position and has no criminal record.

A 25-year veteran of the Federal Bureau of Investigation, was assigned to the Boston, MA; Dayton, OH; Philadelphia, PA; Newtown Square, PA; and Wilmington, DE Offices. During his tenure with the FBI, Mike's wide range of knowledge and skills has distinguished him nationally in the field of criminal investigations such as kidnappings, extortions, bank robberies, fugitives, labor racketeering as well as white collar crimes and undercover work. Mike achieved distinction in the Organized Crime Program specifically dealing with a nationally known outlaw motorcycle gang. He has prominently served in the capacity of Lead Investigator in charge of high-profile background checks for candidates such as federal judges, White House appointees and United States attorneys. Mike has transitioned his background as an FBI SWAT Team Member and Defensive Tactics Instructor into his retirement where he serves the public and private sectors as a security consultant and private investigator. Mike has been instrumental in managing his associates in affiliation with the Delaware Gaming Background Project. Mike has also initiated a comprehensive, twofold program for a Delaware school district to conduct background investigations on employees and developed a protocol for conducting their internal inquiries. I have worked with Ms. McGuinness in the past on a particular project. Knowing her personally and her ethics, I am proud to be the security consultant on her behalf.



29 Del.C. Ch. 100 Freedom of Information Act



DAVID T. HEANEY/ BUILDING CONSULTANT

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

Dave Heaney has 25 years of experience in delivering architectural design and construction services. His Expertise in custom design/build solutions for the commercial healthcare & residential markets make Dave a aligned consultant for The Giving Tree project. He has been recognized nationally for excellence in design and construction. Since 1996, Dave has been Founder & President, Healthcare Facilities Solutions, Inc., Wilmington, Delaware Rockland Design-Build, Inc., and Wilmington, Delaware. Dave is Responsible for management of all aspects of operations including design, construction, project management, quality assurance, estimation, and business development. Dave specializes in design of commercial medical facilities and high-end residential projects that consist of renovations and new construction of commercial properties and residential homes.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act



ARTHUR E. WHEELER III/ CAMERA CONSULTANT

DOB:

29 Del.C. Ch. 100 Freedom of Information Act

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information Act

As of December 2013, Art is currently growing and servicing his companies' customer base of over 200+ sites and over 1000 cameras installed. Over the past twelve years Art has grown his offerings to include access control. Access control dovetailed perfectly into our business model as these access systems became network based, and a need for clientele to secure particular areas from the general public and staff that did not need full access to their facilities. Arts customers also enjoyed the benefit of knowing the status of their businesses as well as the movements of their employees through a simple web based portal. Arts video and camera expertise falls in line with the Giving Tree security section.

Criminal Back Ground Check: 29 Del.C. Ch. 100 Freedom of Information Act

- Ø Please see Full Resumes attached under Appendix E.
- Ø Please see Full Background Checks attached under Appendix I.



Ability, Capacity, Skills, and Expertise of The Giving Tree

The Giving Tree has put together a diverse group of experts to run and manage First State Compassionate Care Center, Inc. in Delaware. We seek to be an example for future centers with our professionalism, ability, capacity, and skills in our products and services.

With the help of our Master Growers Gary Maciel, Morgan Mumford and Michele Carey along with Budtenders, George Yaksic and Greer Thompson, The Giving Tree has over 80 years combined experience in how marijuana is grown, cultivated, harvested, cured, processed, packaged and labeled. Mr. Maciel has over 40 years of experience growing marijuana and his knowledge of the different strains and how they impact medical conditions will help diversify our yield.

All of our growers have experience in the different forms of marijuana and their accompanying properties. They will contribute to our patient education handbook, which will be edited and updated throughout our tenure. They also, throughout their growing careers, know the proper method to destroy marijuana and how to properly label each batch. Mr. Maciel is a frequent lecturer with The Cannabis Career Institute teaching advanced grows techniques. He is considered a master within the industry and The Giving Tree is honored to have him on our team.

Our team strongly believes in quality control and the important part testing plays in a well-run compassion center. Our grow team has helped developed one of the most comprehensive and exhaustive testing protocols in the industry. We wish to set the standard in testing and quality control. Mr. Mumford, and Mr. Maciel are experienced in testing TCH/CBC levels and ratios and in detecting contaminants.

Our testing policy involves multiple stages of sampling and testing throughout the growing process using state of the art methods and technology. The multiple testing layers assure us that we never miss anything and have documented records for auditing our procedures. We also believe very strongly in strict preventative measures and growing conditions to prevent contamination and foster ideal growing conditions. Close observation and recording by our Master Growers and Budtenders will be a second layer of protection on top of our testing methodology. We have also developed comprehensive initiative for dealing with contaminants if found. All these put together will set the industry standard in product quality.

Ø Please see our [Testing Plan](#) for more details.



3. LOCATION AND SECURITY OF COMPASSION CENTER



Real Estate Sites

SITE #1:

1636 Savannah Road,
Lewes, DE 19958

C-1

2400 sq FT

Over 1000 feet from school

Less than 1.3 miles from Troop 7

(All proposed site locations can be built out in the timeframe given by the government)

Public Transportation

Greyhound	4.8mi	4120 Coastal Hwy, Rehoboth Beach, DE
Park "N" Ride Transit System, Operated by DART	0.2mi	N. Village Main Blvd, Lewes, DE
Cape May Lewes Ferry	3.7mi	43 Cape Henlopen Drive, Lewes, DE

Schools

Sussex Consortium	2.4mi	520 DuPont Avenue, Lewes, DE
Richard A. Shields Elementary	1.6mi	910 Shields Avenue, Lewes, DE
Cape Henlopen High School	1mi	1250 Kings Hwy, Lewes, DE

Services - Health, Safety & Information

Beebe Medical Center	2mi	424 Savannah Road, Lewes, DE
Lewes Public Library	2.1mi	111 Adams Avenue, Lewes, DE
Lewes Fire Department	2.1mi	347 Savannah Road, Lewes, DE
Lewes Fire Department Substation #2 - Nassau	1.5mi	32198 Janice Rd, Lewes, DE
State Police; Troop 7 Barracks	1mi	18006 Coastal Highway, Lewes, DE
City of Lewes; Lewes Police Department	2.3mi	114 E. Third Street, Lewes DE

Services - Worship

Unitarian Universalist church	0.4mi	
New Covenant Presbyterian Church	1.3mi	3072 Savannah Road, Lewes, DE
Israel United Methodist Church	1.2mi	Mackenzie Way, Lewes, DE
St Jude the Apostle Church	0.9mi	152 Tulip Drive, Lewes, DE

Intersections

Wawa Food Market & Gas Station	0.9mi	402 Coastal Highway, Lewes, DE
Five Points Intersection: DE 1 N/US 9 W/Coastal Hwy	0.2mi	





*Sussex County, DE
Saturday, February 15, 2014*

Chapter 115. ZONING

Article XI. C-1 General Commercial District

§ 115-76. Purpose.

[Amended 7-20-1999 by Ord. No. 1328]

The purpose of this district is to provide for retail shopping, personal services and a wide variety of commercial and miscellaneous service activities generally serving a community-wide area. Such uses are generally located along major arterial roadways where a general mixture of commercial and service activity now exists. Such uses shall not be characterized by extensive warehousing, frequent heavy trucking activity, open storage of materials or the nuisance factors of dust, odor and noise associated with manufacturing.

§ 115-77. Permitted uses.

A. A building or land shall be used only for the following purposes:

Animal hospitals or kennels with any open pens at least 200 feet from any residential district and 50 feet from any property line

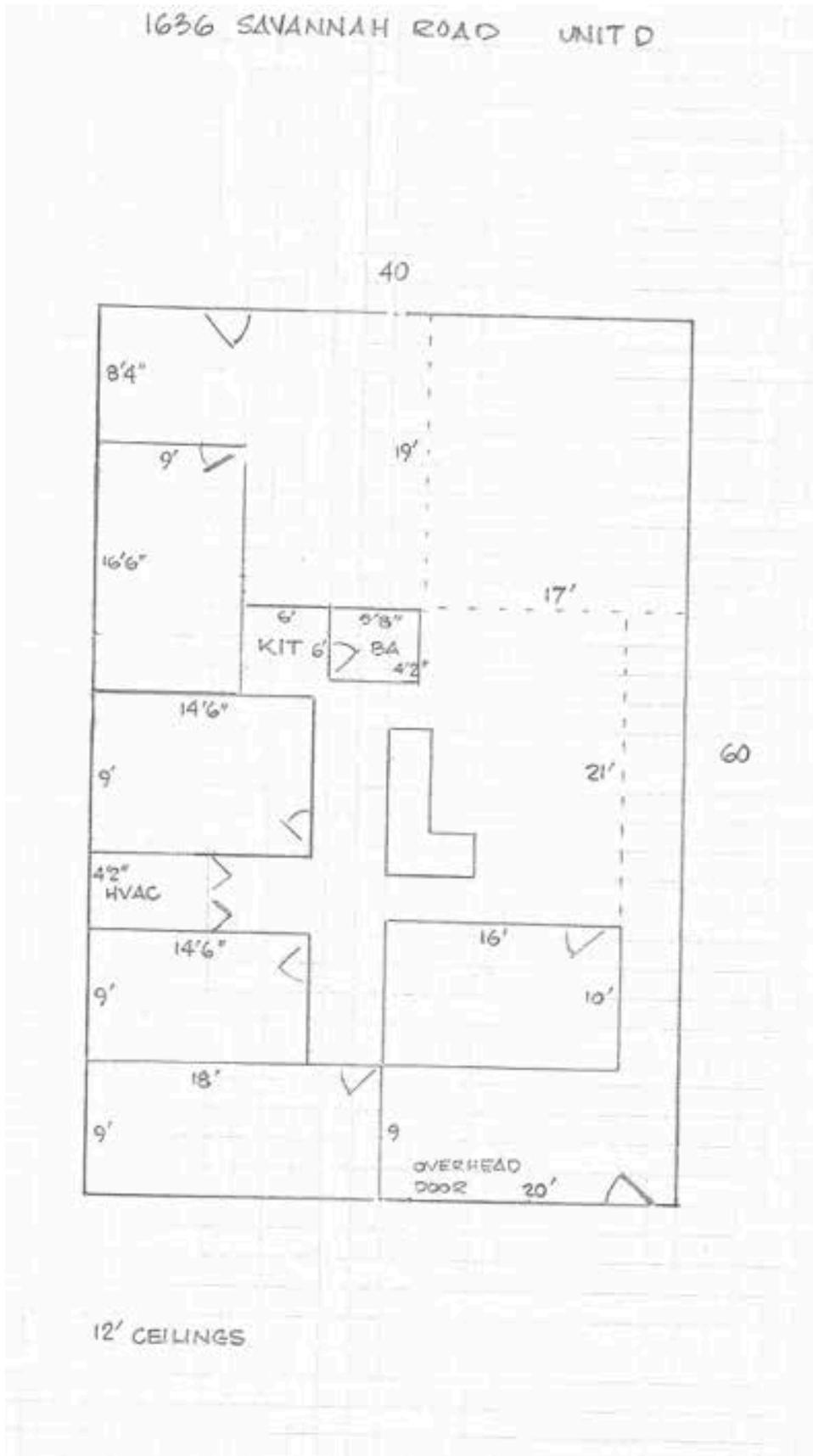
Any use permitted in an AR District and the B-1 District

Automobile or truck sales, service and repair, body or fender repair, but not auto salvage or junk, and any major repairs shall be inside a completely enclosed building. All displays shall be a minimum of twenty-five feet from front property line

Bakeries

Boat and boat trailer sales and storage. Boat displays of more than five feet in height shall be a minimum of 25 feet from the front property line

Bottling works, dyeing and cleaning works or laundry, plumbing and heating shops, painting shops, upholstering shops, cabinet and furniture manufacture, sheet metal shops, tire sales and service (including vulcanizing and recapping but no manufacturing), appliance





LAWRENCE LANK
DIRECTOR OF PLANNING & ZONING
(302) 855-7878 T
(302) 854-5079 F
llank@sussexcountyde.gov



Sussex County
DELAWARE
sussexcountyde.gov

March 11, 2014

Kathy McGuiness
First State Compassionate Care/The Giving Tree
P.O. Box 1584
Rehoboth Beach, DE 19971

RE: Use of an existing business unit for growing/selling Medicinal Marijuana
Site Location – Northeast of Route One (Coastal Highway) and Southwest of Business
Route 9 (Savannah Road) near Five Points
Tax Map I.D. 3-34-6.00 Parcel 3.01

Dear Ms. McGuiness:

Please accept the following information in response to your questions raised about the use of the above referenced property for the growing/selling of Medicinal Marijuana.

Be advised that the above referenced parcel is zoned C-1 General Commercial. Chapter 115, the Zoning Ordinance, of the Code of Sussex County provides in Article XI Subsection 115-77 "Permitted Uses" that "Commercial greenhouses, wholesale or retail, and nurseries for growing of plants, trees and shrubs, including a building for sale of products produced on the premises" is a permitted use. Therefore, the growing/selling of medicinal marijuana is a permitted use under the Sussex County Zoning Ordinance if permitted under the laws of the State of Delaware and approved by all State agencies with jurisdiction over the use.

The zoning process to convert the use of one or more of the units in the existing building to another use will require submittal of site plans for review to determine if adequate parking, loading, setbacks, etc. are compliant with the Zoning Ordinance. The process includes a need for verification of certain necessary agency approvals prior to granting final approval. In this instance, since there is a need to establish that the State of Delaware has authorized such use, it will also be necessary that the Office of the Attorney General advise this Department that the use is permitted. The Office of the Attorney General may also provide this Department with a list of more appropriate agencies that need to sign off on the use and site plan prior to our granting final approval.

I do not want to sound vague in my response, but this is a new concept for consideration.



COUNTY ADMINISTRATIVE OFFICES
2 THE CIRCLE | PO BOX 417
GEORGETOWN, DELAWARE 19947



SITE # 2:

SUSSEX OPTION

LOCATION:

17298 Coastal Hwy,
Lewes, Delaware 19958

C-1

Over 1000 feet from school

Less than 1.3 miles from Troop 7

(All proposed site locations can be built out in the timeframe given by the government)





*Sussex County, DE
Saturday, February 15, 2014*

Chapter 115. ZONING

Article XI. C-1 General Commercial District

§ 115-76. Purpose.

[Amended 7-20-1999 by Ord. No. 1328]

The purpose of this district is to provide for retail shopping, personal services and a wide variety of commercial and miscellaneous service activities generally serving a community-wide area. Such uses are generally located along major arterial roadways where a general mixture of commercial and service activity now exists. Such uses shall not be characterized by extensive warehousing, frequent heavy trucking activity, open storage of materials or the nuisance factors of dust, odor and noise associated with manufacturing.

§ 115-77. Permitted uses.

A. A building or land shall be used only for the following purposes:

Animal hospitals or kennels with any open pens at least 200 feet from any residential district and 50 feet from any property line

Any use permitted in an AR District and the B-1 District

Automobile or truck sales, service and repair, body or fender repair, but not auto salvage or junk, and any major repairs shall be inside a completely enclosed building. All displays shall be a minimum of twenty-five feet from front property line

Bakeries

Boat and boat trailer sales and storage. Boat displays of more than five feet in height shall be a minimum of 25 feet from the front property line

Bottling works, dyeing and cleaning works or laundry, plumbing and heating shops, painting shops, upholstering shops, cabinet and furniture manufacture, sheet metal shops, tire sales and service (including vulcanizing and recapping but no manufacturing), appliance



LAWRENCE LANK
DIRECTOR OF PLANNING & ZONING
(302) 855-7878 T
(302) 854-5079 F
llank@sussexcountype.gov



Sussex County
DELAWARE
sussexcountype.gov

March 11, 2014

Kathy McGuiness
First State Compassionate Care/The Giving Tree
P.O. Box 1584
Rehoboth Beach, DE 19971

RE: Growing and selling Medicinal Marijuana
Site Location – Southwest of Route One (Coastal Highway) at 17298 Coastal Highway
Tax Map I.D. 3-34-5.00 Parcel 100.00

Dear Ms. McGuiness:

Please accept the following information in response to your questions raised about the use of the above referenced property for the growing/selling of Medicinal Marijuana.

Be advised that the above referenced parcel is zoned C-1 General Commercial. Chapter 115, the Zoning Ordinance, of the Code of Sussex County provides in Article XI Subsection 115-77 "Permitted Uses" that "Commercial greenhouses, wholesale or retail, and nurseries for growing of plants, trees and shrubs, including a building for sale of products produced on the premises" is a permitted use. Therefore, the growing/selling of medicinal marijuana is a permitted use under the Sussex County Zoning Ordinance if permitted under the laws of the State of Delaware and approved by all State agencies with jurisdiction over the use.

The zoning process to convert the use of one or more of the units in the existing building to another use will require submittal of site plans for review to determine if adequate parking, loading, setbacks, etc. are compliant with the Zoning Ordinance. The process includes a need for verification of certain necessary agency approvals prior to granting final approval. In this instance, since there is a need to establish that the State of Delaware has authorized such use, it will also be necessary that the Office of the Attorney General advise this Department that the use is permitted. The Office of the Attorney General may also provide this Department with a list of more appropriate agencies that need to sign off on the use and site plan prior to our granting final approval.

I do not want to sound vague in my response, but this is a new concept for consideration.



COUNTY ADMINISTRATIVE OFFICES
2 THE CIRCLE | PO BOX 417
GEORGETOWN, DELAWARE 19947



Kathy McGuiness
March 11, 2014
Page 2

Should you have any questions, please do not hesitate to contact me at this Department.

Sincerely,

29 Del.C. Ch. 100 Freedom of Information Act

Lawrence B. Lank
Director of Planning and Zoning

Cc: J. Everett Moore, County Attorney
Vincent Robertson, Assistant County Attorney
Todd Lawson, County Administrator
C. Shane Abbott, Assistant Director
Office of the Attorney General



Sussex County
Planning & Zoning Commission
P.O. Box 417
Georgetown, DE 19947
302-855-7878
302-854-5079 (fax)



Robert C. Wheady
Michael B. Johnson
Rodney Smith
Benjamin Goody
Irwin G. Burton, III
Lawrence H. Lank, Director

LAND PARCEL ZONING VERIFICATION

PLEASE BE ADVISED THAT THE FOLLOWING PARCEL:

TAX MAP (DISTRICT) 334 (MAP) 5.00 (PARCEL) 100.00

LOCATION: Delaware Sand Co Block 6

CURRENT ZONING: C-1

THIS INFORMATION HAS BEEN CONFIRMED FROM OFFICIAL SUSSEX COUNTY ZONING MAP.

THE CURRENT PROPERTY OWNER LISTED (BASED ON ASSESSMENT RECORDS):

Siobain-VI LLC
1100 N. Market St, Radney Sq.
Wilmington DE. 19899

INFORMATION PROVIDED BY:

29 Del.C. Ch. 100 Freedom of Information Act

SUSSEX COUNTY STAFF MEMBER

3-12-14

DATE



SITE #3:

KENT COUNTY

Camden Site

Frank Dimondi

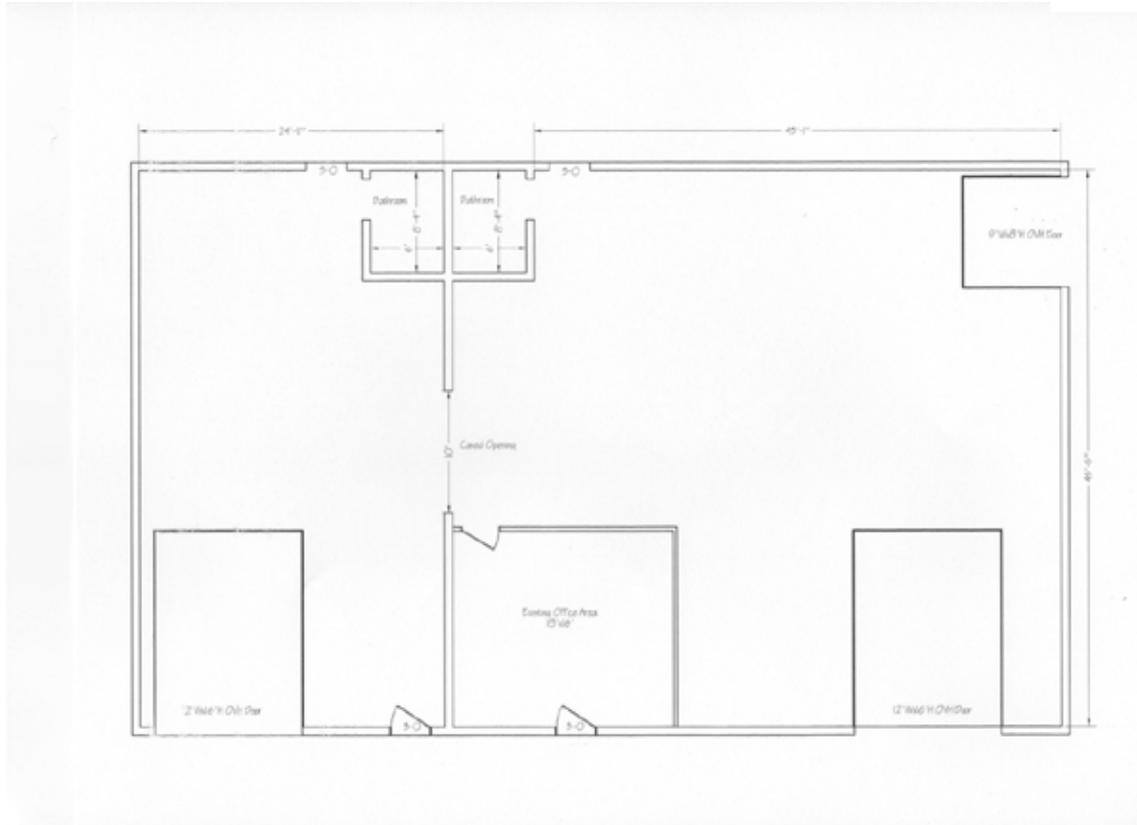
Zoned C-2

3700 sq foot space aside for us

Located more than 1,000 feet from any school

(All proposed site locations can be built out in the timeframe given by the government)







*E & D Holdings, LLC
P.O. Box 578
Dover, DE 19903-0578*

February 14, 2014

To Whom It May Concern,

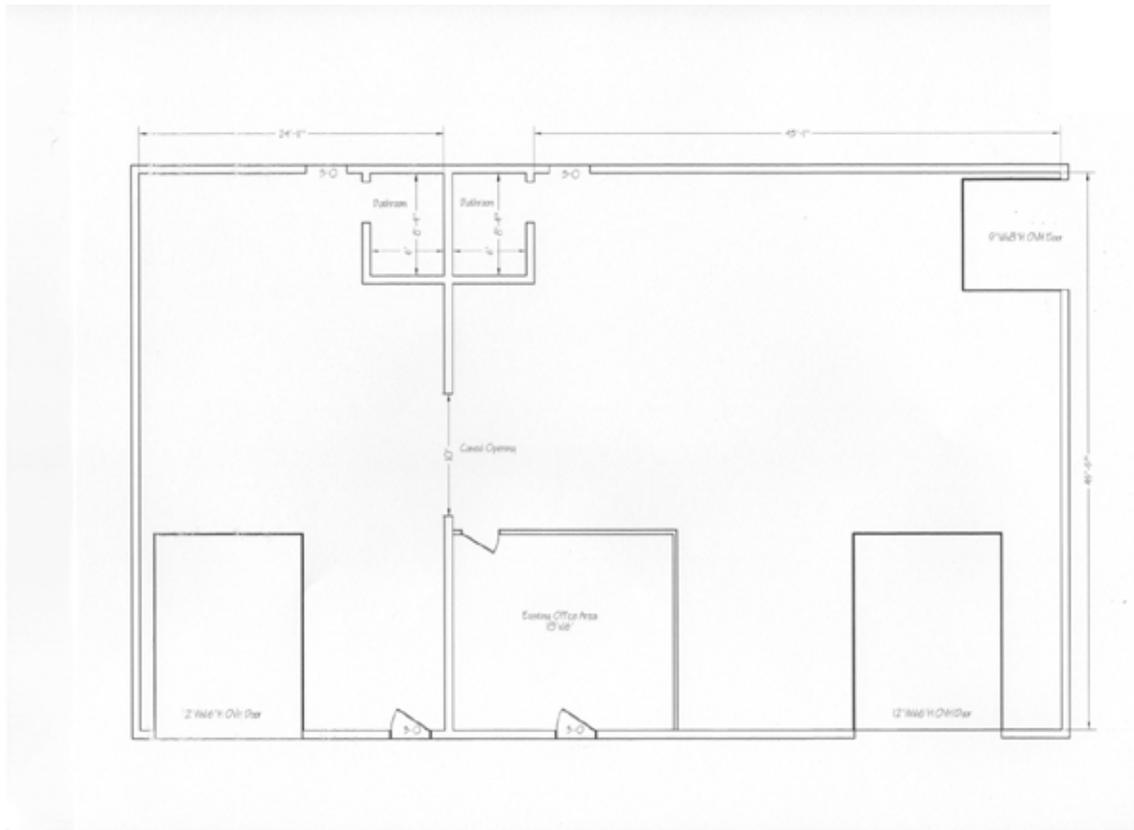
Our facility is physically located at 91 Brenda Lane Camden, DE 19934. The proposed units to be leased are located within our complex at 49 Brenda Lane, Units E & F which is one (1) 2500 s.f. unit and one (1) 1250 s.f. unit directly adjoined to one another in the Camden Business Center. We are located directly off of Willow Grove Road (State Route 10) which connects Camden, Delaware and continues to the Maryland line when it turns into Sandtown Road (Maryland State Route 287). We are zoned C-2 for the Town Of Camden which allows for Agricultural-Related Uses as follows: Farms, Customary and conventional farming operations including the raising of vegetables, flowers, and horticultural materials. If you should have any questions, please do not hesitate to contact me.

Thank You

29 Del.C. Ch. 100 Freedom of Information Act

Carl S. Acton
Property Manager / Construction Manager
E&D Holdings, L.L.C.
P.O. Box 578
Dover, DE 19903
P: 302-730-0150
F: 302-698-5205

(302) 730 0150 Office • (302) 698-5205 Fax
Email: Info@fadoffice.net





1. Fred Fifer Middle School
2. First Pilgrim Baptist Church

<https://www.google.com/maps/place/81+Brenda+Ln/@38.1114082,-75.5046882,129m/data=!3m1!1e3!4m2!3m1!1s4b48c77c196c07d450d28e1d4d31579>

1/1



February 18, 2014

E & D Holdings, LLC
Attention: Mr. Frank DiMondi
P.O. Box 578
Dover, DE 19903

Dear Mr. DiMondi,

This correspondence is in response to your inquiry recently to the Town of Camden regarding your ability to lease out a building on your business complex for an agricultural operation. Since the property is zoned commercial with a C-2 designation and further permits agricultural-related uses, it fits that zoning category perfectly.

With that said, please keep in mind that the ordinance does contain restrictions directly related to commercial poultry and swine production, cattle feeder lots, and fur bearing animal farms.

Also, the customary and conventional farming operations that are permitted must conform to all state regulations as well as be properly licensed by the State of Delaware. Once properly insured and licensed by the State of Delaware, the lessee must then apply and acquire a business license from the Town of Camden.

If any questions arise, please don't hesitate to contact our Town Clerk, Ms. Jamie Fenske, at (302) 697-2299.

Very truly yours,

29 Del.C. Ch. 100 Freedom of Information Act

L. Aaron Chaffinch
Town Manager

1783 Friends Way, Camden, DE 19934 (Tel) 302.697.2299 (Fax) 302.697.9115



Site #4:

LOCKERMAN HUB PLAZA

222 s DuPont Hwy

Dover, DE 19901

(All proposed site locations can be built out in the timeframe given by the government)

SPACE

1000 SQ FT RECTANGLES FOR RENT

WE RESERVED END UNIT AND ONE ADJACENT FOR 2000 SQ FEET TOTAL

C-4

LOCATION

Lockerman Street

On site

Home2 suites

TGI Fridays

Dover library 4/10 miles

Bus stop 4/10

Med express 2/10

City hall 4/10

Wawa 1/10

Bay health hospital 1.3 miles

Legislative hall 7/10

Rt 1 access 2.0 miles

Central middle school 6/10

Wesley College 9/10



City of  Dover

March 14, 2014

Thomas Kramedas
Axia Management
222 S. DuPont Hwy.
Dover, DE 19901

Dear Mr. Kramedas:

This letter is written in response to a request dated March 11, 2014 for zoning certification to determine whether the subject site is appropriately zoned for the intended use. This Department did not perform an inspection of this site and this letter does not ensure there are not any violations. This Department has determined the following information to be correct to the best of our knowledge.

Address:	222 South DuPont Highway, Dover, Delaware 19901
Owner of Record:	A & G Kramedas Assoc
Tax Parcel Number:	ED05-077.06-01-87.00-000
Proposed Use:	Medical Marijuana Compassion Site
Zoning:	C-4 (Highway Commercial Zone)/C-PO (Commercial and Professional Office District

The property is split-zoned, but the proposed retail building lies within the C-4 Zoning District. The C-4 Zoning District in the City of Dover permits the following uses: service establishments including dry cleaning and laundry plants; wholesale, storage, and warehousing establishments; bowling alleys, and animal hospitals; motor vehicle, boat or farm equipment sales or service; motor vehicle service stations with restrictions; manufacturing, assembling, converting, altering, finishing, cleaning, or any other processing of products for sale on or off the premises, provided that not more than 25 persons shall be engaged in such activity; and provided further, that any such use shall be subject to the performance standards procedure as set forth in Article 5 Section 8; newspaper and job printing; ministorage facilities with restrictions; drive-in facilities designed primarily to provide goods and services to persons while they are in automobiles, including drive-in eating establishments; motels and eating establishments; outdoor recreational facilities; auction establishments, and roadside vegetable markets; theaters, clubhouses, and places of worship; household moving firms and related storage facilities; trucking terminals, including service, storage and repair; building contractors, construction material and related equipment storage, provided that areas shall be screened from public view; offices and retail establishments; bus terminals; and adult entertainment establishments, subject to the provisions stated in Article 5 Section 13. There are also a number of Conditional Uses that require Planning Commission approval.

The listing of permitted uses is given in the City of Dover *Zoning Ordinance* Article 3, Section 16 and referenced sections. The *Zoning Ordinance* is available through the City's website www.cityofdover.com, following the Municipal Code link.

The use of the property as a medical marijuana compassion site that cultivates, grows, and dispenses medical marijuana would be a permitted use. The cultivation and growth of medical marijuana is considered a manufacturing use for which no more than 25 persons shall be engaged in the activity. The dispensing of the medical marijuana is considered a retail use that is accessory to the manufacturing use.

P. O. Box 475 Dover, DE 19903
Community Excellence Through Quality Service



City of  Dover

This letter speaks only to the compliance of the intended use with the provisions of the *Zoning Ordinance*. The establishment of such use shall also comply with all other State and municipal regulations that may be applicable, including any requirements or regulations associated with *Del. Code*, Title 16, Chapter 49A The Medical Marijuana Act.

If there are any further questions, please do not hesitate to contact this office during normal business hours at (302) 736-7196.

Sincerely,
Planning Office

29 Del.C. Ch. 100 Freedom of Information Act



Bill Cook
Planner I

P. O. Box 475 Dover, DE 19903
Community Excellence Through Quality Service



AXIA MANAGEMENT

Fax:3026745246

Feb 17 2014 01:40pm P001

**FIRST STATE COMPASSIONATE CARE, INC.
P.O. BOX 1584
REHOBOTH BEACH, DE 19971**

February 15, 2014

Axia Management ("Landlord")
Dover, DE 19903- 0578
Via Email

RE: Proposal To Lease 2000 sq. ft. at Lockerman Hub Plaza, 222 S. DuPont Hwy.
Dover, DE 19901

Dear Mr. Kramedias :

The purpose of this letter is to express an intent to lease approximately one 2000 square feet of space (two 1,000 SF units) at Lockerman Hub Plaza, 222 S. DuPont Hwy., Dover, DE 19901 upon the following terms and conditions:

Lessee: First State Compassionate Care, Inc.

Premises: 2000 SF of space (two 1000 SF units) at Lockerman Hub Plaza located at 222 S. DuPont Hwy., Dover, DE 19901

Initial Term: 5 years

Lease Commencement: 1 day after a final contract is entered into by the Lessee and the Department of Health and Social Services for the State of Delaware pursuant to Request for Proposal No. HSS 13 056

Rent Commencement: 30 days after a final contract is entered into by the Lessee and the Department of Health and Social Services for State of Delaware pursuant to Request for Proposal No. HSS 13 056.

Base Rent: \$18 per square feet annually, *TRIPLE NET LEASE*
Total: \$36,000.00 per year

Renewal Options: Lessee shall have two 5 year options to renew the lease at fair market value with a 3 % annual increase each year after the first year of renewal.

Common Area Maintenance Expenses: None

Security Deposit: None

09/07/2007 05:54 FAX 302 228 6408
Received: FAX:302/6745246
Feb 15 2014 09:04am
Jack Lingg Realtor
002/004



SITE #5

Lippman Property
S Governors Ave
Dover, De

Zoned C-3

Site is located more than 1,000 ft from any school

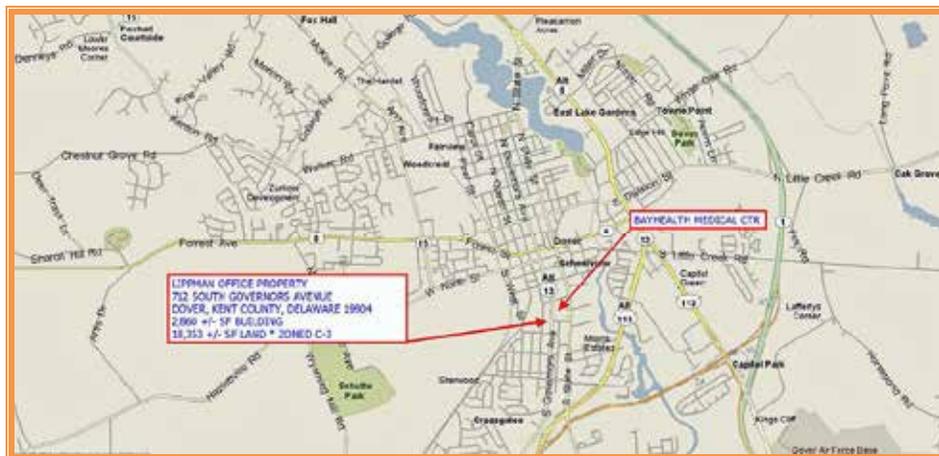
(All proposed site locations can be built out in the timeframe given by the government)



LIPPMAN DENTAL OFFICE PROPERTY
712 SOUTH GOVERNORS AVENUE, DOVER, KENT COUNTY, DELAWARE 19904
FILE # 2142014 ** MLS # 6338162



SALE PRICE \$ 644,000 * \$ 225 +/- PER SQUARE FOOT BUILDING AREA



ALL INFORMATION SUBMITTED SUBJECT TO ERRORS AND MODIFICATIONS. ALL INFORMATION CONTAINED HEREIN OBTAINED FROM RELIABLE SOURCES BUT NOT GUARANTEED. PROSPECTIVE PURCHASERS SHOULD VERIFY ALL INFORMATION SUBMITTED. LISTING BROKERAGE REPRESENTS SELLER. PAGE 1 OF 5 PAGES



Tax Map Identification ED05-077.13-01-36.00

Deed Reference D305 - 0006

Zoning C-3, Service Commercial, City of Dover

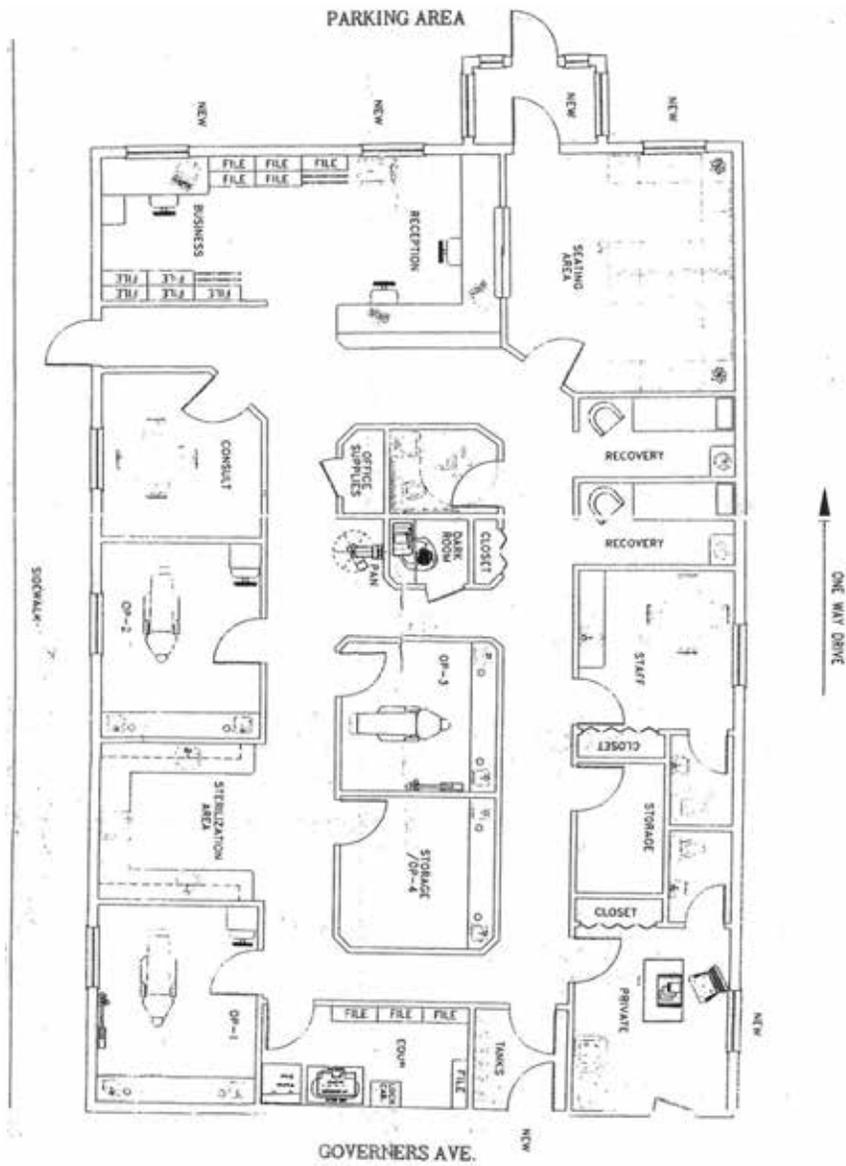
Land Area		18,353	sq ft +/-	0.421	acre
Frontage	87.00	ft +/-			
Depth	266.18	ft +/-			
Bldg Area (sq ft)	2,860	sq ft +/-			
Coverage Ratio		15.58%			
Parking Spaces		20			
Parking Ratio		3.50	per 500 sf		
City Tax Assessment		Per Sq Ft	Rate	Tax	Per Sq Ft
\$499,800		\$174.76	\$0.338	\$1,688.32	\$0.59
\$499,800		\$174.76	\$0.000	\$0.00	\$0.00
					PROPERTY
\$499,800		\$174.76	\$0.338	\$1,688.32	\$0.59
					No BID
					TOTAL
County Tax Assessment		Per Sq Ft	Rate	Tax	Per Sq Ft
\$144,500		\$50.52	\$2.2872	\$3,305.00	\$1.16
TOTAL PROPERTY TAX				\$4,993.33	\$1.75



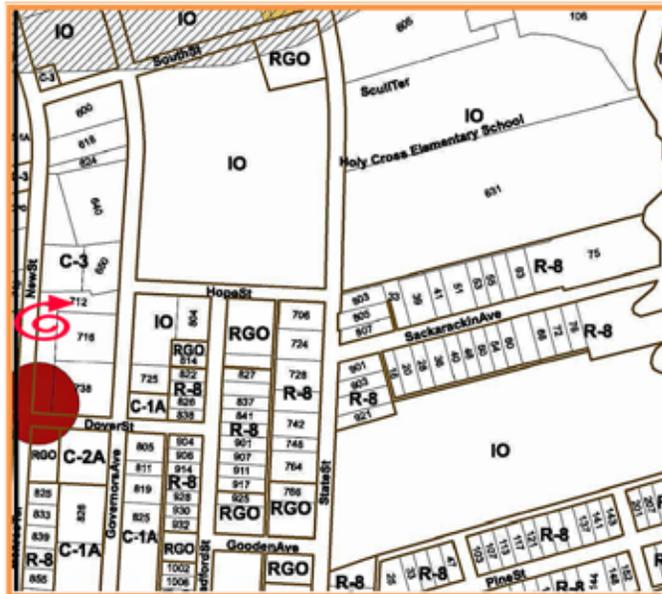
ALL INFORMATION SUBMITTED SUBJECT TO ERRORS AND MODIFICATIONS. ALL INFORMATION CONTAINED HEREIN OBTAINED FROM RELIABLE SOURCES BUT NOT GUARANTEED. PROSPECTIVE PURCHASERS SHOULD VERIFY ALL INFORMATION SUBMITTED. LISTING BROKERAGE REPRESENTS SELLER.
PAGE 2 OF 5 PAGES



Office Floorplan



ALL INFORMATION SUBMITTED SUBJECT TO ERRORS AND MODIFICATIONS. ALL INFORMATION CONTAINED HEREIN OBTAINED FROM RELIABLE SOURCES BUT NOT GUARANTEED. PROSPECTIVE PURCHASERS SHOULD VERIFY ALL INFORMATION SUBMITTED. LISTING BROKERAGE REPRESENTS SELLER. PAGE 3 OF 5 PAGES



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PAGE 4 OF 5 PAGES



**ALL INFORMATION SUBMITTED SUBJECT TO ERRORS AND MODIFICATIONS. ALL INFORMATION CONTAINED HEREIN OBTAINED FROM RELIABLE SOURCES BUT NOT GUARANTEED. PROSPECTIVE PURCHASERS SHOULD VERIFY ALL INFORMATION SUBMITTED. LISTING BROKERAGE REPRESENTS SELLER.
PAGE 5 OF 5 PAGES**



City of  Dover

March 6, 2014

Kathy McGuiness
PO Box 1584
Rehoboth Beach, DE 19971

Dear Ms. McGuiness:

This letter is written in response to your request dated February 27, 2014 for zoning certification to determine whether the subject site is appropriately zoned for the intended use. This Department did not perform an inspection of this site and this letter does not ensure that there are not any violations. This Department has determined the following information to be correct to the best of our knowledge:

Address:	712 South Governors Avenue, Dover, Delaware 19904
Owner of Record:	Norman M. Lippman
Tax Parcel Number:	ED05-077.13-01-36.00-000
Proposed Use:	Medical Marijuana Compassion Site
Zoning:	C-3 (Service Commercial Zone)

The C-3 Zoning District in the City of Dover permits the following uses: Service establishments including dry cleaning and laundry plants; Wholesale, storage, and warehousing establishments; Bowling alleys, and animal hospitals; Motor vehicle, boat or farm equipment sales or service; Motor vehicle service stations, subject to a series of regulations; Manufacturing, assembling, converting, altering, finishing, cleaning or any other processing of products for sale on or off the premises, provided that not more than 25 persons shall be engaged in such activity; Newspaper and job printing; Ministorage facilities, subject to a series of regulations.

The use of the property as a medical marijuana compassion site that cultivates, grows, and dispenses medical marijuana would be a permitted use. The cultivation and growth of medical marijuana is considered a manufacturing use for which no more than 25 persons shall be engaged in the activity. The dispensing of the medical marijuana is considered a retail use that is accessory to the manufacturing use.

The listing of permitted uses is given in the City of Dover *Zoning Ordinance* Article 3, Section 15 and referenced sections. The *Zoning Ordinance* is available through the City's website www.cityofdover.com, following the Municipal Code link.

This letter speaks only to the compliance of the intended use with the provisions of the *Zoning Ordinance*. The establishment of such use shall also comply with all other State and municipal regulations that may be applicable, including any requirements or regulations associated with *Del. Code*, Title 16, Chapter 49A The Medical Marijuana Act.

If there are any further questions, please do not hesitate to contact this office during normal business hours at (302) 736-7196.

Sincerely,

Department of Planning and Inspections

29 Del.C. Ch. 100 Freedom of Information Act

Ann Marie Townshend, AICP
Director, Planning & Community Development

P. O. Box 475 Dover, DE 19903
Community Excellence Through Quality Service



SECURITY PLAN

This is the written Security Plan for The Giving Tree. This plan addresses and meets the application requirements of the Act, the Regulations, and the OMM policies and guidelines.

INTRODUCTION

We understand that security is of paramount importance. We are keenly aware of the added security challenges that a business of this nature faces, and we have taken extensive measures to have professionally-vetted policies, procedures, and systems in place to provide comprehensive protection, not only for our physical center and inventory, but also for our employees, patients and neighbors. Our security will meet or exceed the Department's requirements set forth. All 5 potential sites have been vetted and mocked up with our security team. They meet all required zoning laws and department requirements.

We have Dellose and DiFonzo owned by Michael J. Dellose and Ralph A. DiFonzo, Jr. ("Security Agent") as the dispensary agent in charge of security. Michael Dellose has more than 25 years' of experience in the information security sector. A 25-year veteran of the Federal Bureau of Investigation, he was assigned to the Boston, MA; Dayton, OH; Philadelphia, PA; Newtown Square, PA; and Wilmington, DE Offices. During his tenure with the FBI, Mike's wide range of knowledge and skills has distinguished him nationally in the field of criminal investigations. He has worked kidnappings, extortions, bank robberies, fugitives, labor racketeering as well as white collar crimes and undercover work. Mike achieved distinction in the Organized Crime Program specifically dealing with a nationally known outlaw motorcycle gang. He has prominently served in the capacity of Lead Investigator in charge of high-profile background checks for candidates such as federal judges, White House appointees and United States attorneys.

Mike has transitioned his background as an FBI SWAT Team Member and Defensive Tactics Instructor into a second career where he serves the public and private sectors as a security consultant and private investigator. Mike has been instrumental in managing his associates in affiliation with the Delaware Gaming Background Project. Mike has also initiated a comprehensive, twofold program for a Delaware school district to conduct background investigations on employees and developed a protocol for conducting their internal inquiries.

Mr. DiFonzo is a retired FBI Supervisory Special Agent who has 30 years of experience in the violent crime program and in the field of crisis management. Since his retirement he has been a private investigator and security consultant. He has conducted safety and



security audits and assessment in school facilities and has developed Site-Based Facility Emergency Action Plans. Mr. Dellose and Mr. DiFonzo and together Dellose and DiFonzo, LLC (D &D) will be valuable components of our overall security in their capacity as Security Agent.

The Security Agent will have oversight responsibility for the implementation of the Security Plan. As the person responsible for implementation, they also will serve as a liaison with the executive staff and board. In addition, they will have oversight responsibility to review and update the plan on a regular basis (at intervals not to exceed one year) to ensure our continued compliance to the Act and Rules.

With the leadership of our Security Agent, we are developing a state-of-the-art plan that takes advantage of the security industry's best practices and most up-to-date technology, ensuring that our dispensary facility operates at the highest level of security preparedness.

If our application is approved, we will reach out to local law enforcement officials in our application area to enlist their input and cooperation in the development of our security procedures. The goal is for our plan to meet or exceed current standards for policing and securing this type of facility.

Our Security Plan is divided into two components: *Facility Security* and *Operations Security*. The preventive measures adopted in these components will minimize our security exposure, protecting the public, our patients, and our staff. We also are confident that should there be any breach of security, our comprehensive response capabilities will ensure the incident is quickly detected, contained, and resolved at the appropriate response level.



FACILITY SECURITY

Our dispensary and cultivation facilities are located jointly. The security at our proposed facilities is designed to reduce the likelihood of security breaches and trigger an immediate response in the event of a breach. In addition, it is designed to control access to the dispensary and cultivation areas, limiting it to authorized and properly identified personnel. All five proposed locations are zoned C-1.

A. Building Configuration

29 Del.C. Ch. 100 Freedom of Information Act

- [Redacted]
 - [Redacted]
- [Redacted]

B. Lighting

Statistics show that crimes are less likely to occur in well-lit areas, because a well-lighted property is an excellent deterrent against criminals. Security lighting is one of the most practical and effective ways to prevent crime in or around commercial facilities.

The main objectives of our security lighting system at the dispensary and cultivation sites are to illuminate dark areas and detect and recognize movement in the protected area. The best vision with outdoor lighting is obtained from



29 Del.C. Ch. 100 Freedom of Information Act

C. Guards

Security personnel will perform and keep records of having performed routine regular inspections of all security systems, barriers, gates, doors, and locks, immediately reporting any malfunctioning or compromised security feature to the Security Agent. Any incidents qualifying as irregular or suspicious will be handled immediately.

D. Perimeter Security

We will secure the perimeter of our center to prevent unauthorized intrusion. We plan to use one or more of the following critical elements to secure the perimeter of our building: 29 Del.C. Ch. 100 Freedom of Information Act

E. Access Conditions for Staff and Non-Staff Business Associates

At the compassion center, all staff and business associates will park in the common parking spots in front and in the rear of the building. All staff will



need keycards and/or electronic passcodes to access the facility, including restricted areas within the facility.

Staff here refers to anyone defined by the Department as a dispensary agent: a principal officer, board member, employee, or volunteer. Non-staff business associates are all those, such as vendors and contractors, who do business with our Company but are not dispensary agents. To access restricted areas of either facility, non-staff business associates will need to be admitted by appropriate staff and must be accompanied by a staff member at all times.

All persons working for or doing business with us will need a company-issued permanent identification card or temporary identification tag to be able to enter restricted areas. Staff will receive these upon hire.

Once the reason for their visit is confirmed, vendors and contractors will receive temporary identification tags at the reception window before being allowed to enter the dispensary or cultivation rooms under staff escort.

We will require that ID cards and tags be visibly worn by all staff and non-staff at all times within the facility.

F. Patient Access

29 Del.C. Ch. 100 Freedom of Information Act



Patients and designated caregivers must have a valid Department Medical Marijuana Program registry card, and they must have another form of State-issued



photo ID to prove they are the person identified on the registry card. They provide this documentation at the reception window/area in the waiting room order to be admitted to the dispensary room.

G. Non-Patient Public Access

Persons other than management, employees, volunteers, vendors, contractors, and patients and their caregivers may from time to time have legitimate reasons to visit our facility. These include:

- a. Law enforcement,
- b. Political officials and government administrators,
- c. Medical, health, and social service professionals

Besides dispensary agents, no one other than law enforcement may enter the restricted areas of our facility unless their visit has been approved by management, they have been issued and are wearing a temporary facility identification tag authorizing their entry into restricted areas, and they are accompanied at all times by a staff member who has been specifically authorized to bring them into access-restricted areas.

Internal Access-Point Control

29 Del.C. Ch. 100 Freedom of Information Act

H. Electronic Security System

29 Del.C. Ch. 100 Freedom of Information Act

A. Video Surveillance

29 Del.C. Ch. 100 Freedom of Information Act



29 Del.C. Ch. 100 Freedom of Information Act

[Redacted]

[Redacted]

I. Third-Party Monitoring

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Dellose and DiFonzo Associates, LLC is a Delaware-based firm dedicated to providing a wide range of services to include security and safety audits and assessments, comprehensive backgrounds and internal investigations. Their goal and mission is to ensure (a) a Safety and Security Plan is the foundation from which we can build a safe and secure business environment and (b) your Safety and Security Plan is bona fide and withstands a litmus test.



29 Del.C. Ch. 100 Freedom of Information Act

Panic Buttons and Internal Communications

29 Del.C. Ch. 100 Freedom of Information Act

L. Fire Security

Both facilities will comply with all local fire code requirements. In addition, all rooms in the facility will be equipped with smoke detectors. ABC rated fire extinguishers are present in the kitchen, cultivation room, and dispensary of the facility.

M. Maintenance and Testing

All security-related systems will be routinely inspected to insure that they are functioning properly. This includes:

- a. Video surveillance equipment
- b. Third-party monitoring equipment and connections
- c. Alarm systems
- d. Sensors
- e. Electrical connections
- f. Motion detectors
- g. Smoke detectors
- h. Panic buttons
- i. Phone connections



- j. Information storage and backup systems
- k. Electrical backup systems

The Security Agent will be responsible for ensuring that such inspections take place at reasonable intervals. We will promptly implement all necessary repairs to ensure continuous proper functioning of the security system. The Department and appropriate oversight authorities will securely keep inspection results and maintenance records for review.

N. Incident Management and Emergency Response

We understand that smooth operations require well-laid contingency plans and a staff well trained in their execution. Under the leadership of our Security Agent and with input from appropriate local agencies and enforcement authorities, we will develop a comprehensive Emergency Response Plan.

The Emergency Response Plan will include contingencies for non-security related emergencies such as medical emergencies, bomb threats, fires, explosions, chemical release, and weather-related disasters to ensure an appropriate and orderly response. This will prevent non-security related emergencies from becoming aggravated security emergencies as well. Emergency procedures and emergency contact numbers will be provided in writing to all employees and posted prominently in all areas of the facility.

We will also develop a comprehensive set of guidelines for dealing with security threats. All staff will learn and be drilled in these procedures to ensure they are adequately prepared for emergencies. Preparedness means all staff members:

- a. Know how to assess emerging situations to determine the type and level of threat they may pose;
- b. Know how to respond to different kinds of security threats;
- c. Know which types of situations warrant the activation of panic buttons; and
- d. Know how to proceed when a security alarm goes off or a panic buttons has been activated.

If a security breach is found to constitute an actual emergency we will then follow the emergency response procedures and cooperate with local law enforcement authorities for smoothly bringing the situation under their control.



Procedures will be revised and updated as necessary. They will be reviewed at least every twelve months. We will invite local law enforcement to offer their input on a to-date security threat analysis and contingency planning.

a. Outside Partnerships: Liaising with Community and Local Law Enforcement.

Local law enforcement and neighbors in close proximity to our facilities will have the name of one or more contact persons on our staff that they can notify day or night in case there is a problem impacting them or that they feel may impact us.

We will periodically reach out to neighbors to ensure that there are no unreported problems of this sort.

We also will reach out to local law enforcement to develop a professional working relationship and a coherent contingency plan for incidents that require a law enforcement involvement at our facility. Local law enforcement officials will be invited on-site to discuss and evaluate potential security risks, vulnerabilities, and to assist in the development or enhancement of our current security program.

b. Closing Procedures

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O. Preventing Theft & Non-Diversion

To prevent diversion of medical marijuana we will take the following measures:

- a. Any personnel that are aware of any theft or diversion shall immediately report it up the chain of command or result in immediate termination upon discovery of concealment by management. Any such incident will be promptly reported to both the Department and the Police Department
- b. All medical marijuana will be maintained in a secure and locked room that is accessible only to authorized persons.



- c. No individuals who are not authorized to be on the premises will not be allowed access thereby reducing the threat of theft or diversion of medical marijuana.
- d. At the time of each purchase, we will verify that the status of the medical marijuana patient is in good standing with the Department.
- e. Have the medical marijuana patient agree not to distribute cannabis to non-patients;
- f. Have the medical marijuana patient agree not to use the cannabis for other than medical purposes;
- g. Maintain patient records on site or have them reasonably available in a secure filing cabinet;
- h. Track when dispensary and/or medical marijuana patient licenses and/or permits expire;
- i. Enforce conditions of purchasing by excluding those who are caught diverting cannabis for non-medical use;
- j. Monitor transactions and program controls to see if a medical marijuana patient is purchasing more than should be reasonable as provided in the regulations.
- k. Implementing our state-of-the-art supply chain tracking system that follows every plant from seedling to sale to prevent shrinkage within the cultivation facility. Each plant has a barcode and if it is missing we will know that a serial number is unaccounted for;
- l. Compare average yields of plants, whereby if plants in particular areas are yielding less end product we can alert Security to a possible concern; and

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We shall notify the Department and local law enforcement within 24 hours of any suspected loss of marijuana.

We believe that by having strict guidelines aimed at preventing diversion, and creating an inventory tracking system that allows us to follow each plant from seedling to sale, we will be able to create a closed loop system and effectively mitigate risks of theft and diversion.

a. Preventing On-Site Consumption

We shall not permit the consumption of medical marijuana at the registered premises in any form unless allowed by the Departments and the regulations. All medical marijuana will be kept in a closed container that shall not be opened on the premises. Any medical marijuana or marijuana paraphernalia that shows evidence of the medical marijuana having been consumed or partially consumed will be reported to the Department and/or local Police Department. We will place smoke detectors around premises and routinely monitor surveillance to prevent the use of medical marijuana on the registered premises.

b. Incident Log

We will maintain an incident log for a period of seven (7) years with reports of incidents that triggered an alarm. Such reports shall be made available to the Department during any inspection of the facility. We will notify the Department by electronic means within twenty-four (24) hours of any incident in which a theft, burglary, robbery, or break in occurred, whether or not items were actually removed from the facility. Our facility manager shall follow up the initial notice with a written report describing in detail the factual circumstances surrounding the incident and include an inventory of all stolen items, if applicable. The incident log will be kept in a safe, secured filing cabinet.

c. Suspicious Activity and Loitering

Staff will be trained to identify and respond appropriately to all levels of suspicious activity. Loitering will not be tolerated. Patients will be advised orally at their first visit of our no loitering policy as well as be given a patient handbook in which they are shown the policy in writing. Noncompliance will result first in a warning, then in a suspension of purchasing privileges at our facility. Loitering by non-patients will result first in a warning from our staff or security guard, and then in notification of local law enforcement.



OPERATIONS SECURITY

Making sure that our routine operations follow secure procedures is as important as physically securing each facility and having emergency response procedures in place. Consistent, proactive operational security policies and procedures greatly reduce the likelihood that emergencies will arise.

A. Workforce Security

Staffing Structure and Current Employee Roster

We expect to employ a more than sufficient number of people at the center. A breakdown of the positions by title and job description is found in the Staffing Plan. For any positions that have already been filled, we provide the names and biographies of the persons hired.

Background Checks

We will perform background checks on all employees, volunteers, principals, directors, and board members. We will also perform background checks on any contractors or vendors who regularly work within the facility or will be employed there for an extended time. Copies of any public records obtained through the background check process will be provided to the individual concerned. To ensure transparency, the entire background checking process will be conducted by a third-party

We will not employ anyone who has been convicted of a felony except for the purposes regulations as an “excluded felony offense.”, nor with a arrsst or conviction in the past 5 years. Also, we elect not to engage any contractors or vendors who would have access on a regular basis or for an extended time to restricted areas of our facility if they have been convicted of any excluded felony offenses.

Training and Drills

Security and emergency response training is only part of the comprehensive training required for all employees. Training will also cover:

- a. Medical marijuana laws and regulations,
- b. Patient privacy, confidentiality, and secure electronic record keeping,



- c. Procedures for patient reception and registration,
- d. Procedures for product sales, and
- e. Personal safety, fire safety, and crime prevention.

Employees will be tested on training content and must pass the test by their third attempt in order to remain employed. All staff will also go through periodic refresher seminars, as well as new training on any policy updates or changes in procedure. All emergency procedures will be rehearsed in periodic drills.

In addition to training and periodic drills, all employees will receive official Company reference material, written in plain English and presented in an easy-to-use outline format, explaining all our operational, safety, and security policies and protocols.

In developing our official safety and security policies, we will consult with local law enforcement. We will also work with local police to develop effective ongoing employee training seminars and practices. Especially in developing our policies and training procedures on crime prevention and security threat response, we will seek the involvement of local law enforcement.

Personnel Records

We will maintain personnel records for each employee, agent, or volunteer that includes:

- a. Application,
- b. Documentation of all required training,
- c. A signed statement from the individual indicating the date, time, and place that he or she received training and the topics discussed, including the name and title of the presenters, and
- d. Record of any disciplinary action taken against employee at any time during employment.

These personnel records will be maintained for a period of at least six months past the end of the individual's affiliation with us.

Limited Cash Operation



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c. Inventory Security

Sale

The inventory tracking and control system associates every product sold with a single transaction, a single patient or caregiver, and a single dispensary agent.

All sales take place under camera surveillance that captures inventory movement as well as the faces and identifying features of the patient or designated caregiver making the purchase and the dispensary agent making the sale.

- Ø See our [Inventory Control Plan](#) for details on our inventory tracking system.

Storage

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Visibility

Medical marijuana or paraphernalia will not be visible from any public or other property not owned by us.

Transport



We plan to eventually offer delivery of medical marijuana to patients as all by the Act. To ensure the security of transport agents and of inventory being transported and to comply with Department regulations, we have adopted the following procedures described in this section:

- a. Vehicles will not have any medical marijuana identification, and no medicine, plants, or paraphernalia will be visible.
- b. All deliveries from our facility will include the use of trained security or internal personnel. Delivery drivers will be required to successfully complete our training, how to prevent robberies, protect their lives, and stop “car jackings.”

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We will require all incoming materials to have a detailed transit slip ready on arrival and carried throughout the trip. This will include:

- a. The origination of the items (the names and registry identification numbers of the releasing dispensary and dispensary agent),
- b. A description of the products being transported (the type of product, quantity, and tracking numbers),
- c. Designated and actual route of transport,
- d. Name and registry identification number of the transport agent responsible for the transport, and
- e. Date and time of departure and arrival.

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■ We will keep all transportation documents computerized and ready for inspection, and will have appropriate commercial liability insurance that covers travel.



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All transport of products will be supported by a detailed transit slip containing:

- a. Maps and designated routes,
- b. Date and departure times,
- c. The name and identification number of the dispensary agent responsible for the transport, and
- d. Product information (type of product, quantity, inventory tracking numbers).

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All transport records will be kept and maintained and provided to the Department for review on request.

We plan to digitize all transport recordkeeping and integrate delivery and transport data directly into our inventory tracking system.



D & D Delivery Plan

D & D's overall plan will ensure the integrity and control of the legal name, medical marijuana, with respect to the Delaware State Statutes in place for control of the deliverables, and a palpable resolve to safeguard driver safety and patients' privacy:

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



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For information on our inventory tracking system, see our Inventory Control Plan.

Disposal of Unused or Surplus Medical Marijuana

We intend to dispose of unused or surplus medical marijuana and its by-products by contacting DHSS for appropriate disposal. All unused or surplus medical marijuana and its by-products shall be weighed and documented and recorded on a form.

We shall report any stolen or lost medical marijuana by filing a police report by calling 911 or in person with the Police District where our registered business resides either in person or in writing and DHSS within twenty-four (24) hours of becoming aware of the theft or loss.

Record Keeping

We will keep meticulous records, complying with local, state, and federal laws and regulations regarding patient records, inventory records, and transportation records. Transport agents will carry with them a copy of the transport authorization and control data (the “transit slip”) during transport of medical marijuana. All inventory control records and records of inventory transfer, transport, and delivery will be kept for five years and made available to the Department and authorities on request.

d. Information Systems Security

Securing Data

Our data and information are as valuable as our products. We will take both ordinary and extraordinary measures to protect our information systems and keep our data secure. Ordinary measures are:

- a. Using virus protection, spam-filtering, and firewalls
- b. Keeping software and OS updated
- c. Using passwords and changing them frequently
- d. Using secure wireless networks



- e. Restricting web browsing
 - f. Initiating frequent and secure data backups
- We will limit access to our network by using unique user passwords and by restricting IP addresses and MAC addresses to specific computers. The use of third party email, web, and data servers will be avoided. We will provide training on user security procedures.
- a. All data and information from our security system and from our inventory control system will be secured and encrypted and backed up automatically every night, not only to a private server on site., but also to a secure, off-site server location. Should there be an emergency, natural disaster, or criminal breach at our facility, all data remain safe and remotely accessible on our remote backup server.

Patient Health Information

Just as sensitive and important as our security system data and our inventory tracking data are our patient records. We take patients' privacy very seriously. Consequently, all the safeguards in place to protect and preserve our security data and inventory control data will also be employed to preserve patient information and prevent any breach of patient confidentiality, ensuring that the electronic storage, transmission, and retrieval of patient health information is secure.

Patient records will be stored on a database and encrypted at the OS level. All digital records will follow HIPPA and PCI regulations and guidelines.



4. BIDDER REFERENCES

The Giving Tree has not undertaken any similar projects as a Compassion Center, however we have presented references relating to our comparable skills. Furthermore, neither The Giving Tree nor its predecessors have not been awarded any contracts by the State of Delaware.



Peter C. Shwartzkopf Reference Page 1 of 2

PETER C. SCHWARTZKOPF
Speaker of the House
STATE REPRESENTATIVE
14th District



HOUSE OF REPRESENTATIVES
STATE OF DELAWARE
411 LEGISLATIVE AVENUE
DOVER, DELAWARE 19901

COMMITTEES
Legislative Council, Chair
Ethics
House Administration
House Rules
Veterans Affairs

March 4, 2014

To Whom It May Concern,

I am writing a letter of recommendation and strong support for the non-profit organization, The Giving Tree-Compassion Care of Delaware, under the leadership of Executive Director, Kathy McGuiness to become an approved medical marijuana dispensary.

I am in great support of the state's passage of Senate Bill 17 authorizing the opening of this first medical marijuana dispensary in 2011. I stand firm in wanting Delaware to help provide those means necessary for the state's ill and suffering citizens to receive safe and readily available relief for their HIV, Cancer, Chemotherapy and other medically generated symptoms.

To that end, I urge that our new dispensary be opened and operated with the highest medical standards, expertly trained staff and the most professional patient-focused care. It is also important to me that our first dispensary be in Sussex County due to the significant aging population located in Sussex County.

Kathy McGuiness, Executive Director of The Giving Tree-Compassion Care of Delaware, is an experienced pharmacist at the helm of this non-profit.

I am familiar with Ms. McGuiness from several years working together when I was the State Police Captain at Troop 7 in Lewes and she was heading up the Rehoboth Beach fireworks operation – a program also requiring great responsibility, safety precautions and a level-headed leadership approach. She excelled at that job, as I expect her to excel in this important task.

Additionally, I have known Ms. McGuiness as Pharmacist and owner of the Rehoboth Beach Pharmacy. Her compassion for her customers and willingness to provide expert, highly professional care, with a focus on wellness issues, makes her and the team she has assembled, a perfect choice for the dispensary license.

24 Coventry Road, Rehoboth Beach, DE 19971
Home: 302-227-6252 House Office: 302-744-4351 House Fax: 302-739-2313
email: Peter.Schwartzkopf@state.de.us



Peter C. Shwartzkopf Reference Page 2 of 2

Furthermore, I have seen Kathy's commitment and tireless hands-on service to Delaware charity events, exemplary service on the Rehoboth Beach Board of Commissioners, as founder and long-time president of Rehoboth Beach Main Street, Inc., a downtown economic development organization and much more. Her reputation for giving back to the community is well known and was recognized in the past with the Governor's Award as Travel and Tourism Person of the Year.

In summary, I urge selection of The Giving Tree-Compassion Care of Delaware as the licensee and operator for the state's first medical marijuana dispensary. It is so important to launch and follow through with this program effectively, successfully and safely. The Giving Tree-Compassion Care of Delaware would be the right choice to get this done correctly.

Sincerely,

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Peter C. Schwartzkopf
Speaker of the House



SENATE
STATE OF DELAWARE
LEGISLATIVE HALL
DOVER, DELAWARE 19903

March 5, 2014

RE: The Giving Tree

I wanted to take a moment to offer my support for the application of Kathy McGuiness and her associates at the Giving Tree of Delaware Compassion Care. As a member of the General Assembly, I feel strongly that the State of Delaware make it a priority to insure that only the most caring and capable individuals provide organic medicines to customers.

While I continue to have concerns in regards to this type of medicine being used here in our state, the bottom line is that the day has arrived and I can't think of a group of finer individuals with more knowledge and expertise to get this off the ground in a secure and safe way. They have shared with me their business plan along with measures and benchmarks towards making this operation a success.

I offer the Kathy and her team at the Giving Tree Compassion Care of Delaware my support and hope that those who are making the final decision will allow them the opportunity to begin this work here in our state in a manner that becomes a model for others to follow.

With warmest regards and very best wishes as always,

29 Del.C. Ch. 100 Freedom of Informa

Dr. Ernesto B. "Ernie" Lopez
Delaware State Senate
District 6

PRINTED ON RECYCLED PAPER



**CITY OF REHOBOTH BEACH
POLICE DEPARTMENT**

229 REHOBOTH AVENUE
REHOBOTH BEACH, DE 19971

KEITH W. BANKS
Chief of Police
Phone: (302)227-2577
Fax: (302)227-6054
www.rehobothpolice.org

March 5, 2014

To Whom This May Concern:

I have had the privilege of knowing Kathy McGuiness for more than 14 years, and I am confident of her ability to work tirelessly to help bring a Compassion Care Facility to Delaware.

As the Chief of Police for the Rehoboth Beach Police Department, I have had the opportunity to work with Kathy many times – during both her service as a long-seated Commissioner for the City of Rehoboth Beach, and as a local businesswoman.

In her capacity as Commissioner for more than 12 years, Kathy was instrumental in bettering our community through her chairmanship of the Convention Hall and Bandstand Committee, the Personnel Committee and the Fireworks Committee. I witnessed her ability to make tough decisions under pressure first-hand, and I appreciated her commitment to get the job done many times – perhaps never more so than when facing the possibility of disappointing thousands of residents and visitors due to inclement weather on the 4th of July. Then, and many times since, Kathy proved to be a valuable partner and effective leader.

As Commissioner, Kathy also actively participated on the Boardwalk committee, the City Street and Light Committee, and the Parks and Tree Committee. She was the founding president of Rehoboth Beach Main Street, and I have no doubt her efforts significantly contributed to Rehoboth Beach's recognition as one of the Best Main Streets in the USA.

Kathy also is a local businesswoman and volunteer, and has proven generous in her commitment to helping others. She is a licensed pharmacist and recipient of the Bowl of Hygeia award, a recognition for outstanding community service bestowed upon only one pharmacist annually in the State of Delaware. She has also volunteered for Meals on Wheels, the YMCA and the Rehoboth Beach Museum, raising funds and awareness that contributed to their success.

Kathy McGuiness is an energetic, committed and compassionate leader in our community. She is a positive role model for those who have had and will have the opportunity to meet and work with her, and it's my privilege to submit this letter in support of Kathy McGuiness.

Sincerely,

29 Del.C. Ch. 100 Freedom of Information Act

Keith W. Banks
Chief of Police



THE
EPISCOPAL
PARISH
OF

— — — — —

**All Saints'
Church**
Established 1892

— — — — —

**St. George's
Chapel**
Founded 1719



THE REVEREND MAX J. WOLF, Rector
18 Olive Avenue
Rehoboth Beach, DE 19971
302-227-7202; Fax: 302-227-7085
info@allsaintsparish-rehoboth.org
www.allsaintsrehoboth.org
www.stgeorgeschapel.org

March 11, 2014

To Whom It May Concern:

I am writing in support of Kathy McGuiness and her project to bring The Giving Tree-Compassionate Care of Delaware into fruition. I have been the pastor of three generations of Kathy's family since 2001. I know her to be a very gifted person of extraordinary strength of character.

Kathy shared with me the extensive preparations that she has accomplished over these past two years with this project. Her thorough, precise plans are consistent with what she has displayed in her professional career as a Pharmacist, business owner and as President of Rehoboth Beach Main Street. She shepherded the latter to bring significant renewal and recognition to Rehoboth Beach and to the surrounding community here.

Kathy is a compassionate, community-oriented person, and I know this inspires her in pursuing this project. I myself have seen the comforting and even healing effects of medical marijuana with parishioners and visitors from states where it is legal. People that I have counseled who are facing the challenges of cancer, AIDS and other health conditions have truly benefited from medical marijuana treatment. Their quality of life has been greatly improved. I trust that Kathy McGuiness will skillfully and compassionately direct The Giving Tree program to provide first-rate care and service in meeting the individual needs of her patients. Please contact me with any questions.

Sincerely,

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The Rev. Max J. Wolf

The mission of our parish is to help make the love of God more widely known in our community and in the world.



37 Baltimore Avenue, Rehoboth Beach, DE 19971 | VOICE 302.227.5820 | FAX 302.227.5804 | EMAIL steve@camprehoboth.com | www.camprehoboth.com

March 3, 2014

To Whom It May Concern:

We are writing to express our support for the proposal by First State Compassionate Care, Inc, to be the organization opening the first Delaware dispensary and cultivation center for medical marijuana in Delaware.

We believe that their proposal, led by a professional pharmacist as its Executive Director, speaks well for the success of the venture. I have worked with Kathy McGuiness in cooperative efforts with the City of Rehoboth, Rehoboth Beach Main Street, Inc, and various events and programs through CAMP Rehoboth. I have found her to be responsible, professional, business savvy and most importantly, an advocate for those in need in Sussex County.

This is a sensitive operation and we all have a stake in it turning out right – professional, safe and effective in its services.

As Executive Director of CAMP Rehoboth, Inc., a non-profit LGBT service organization, we have had almost a quarter of a century experience in working with HIV prevention and the HIV positive community. We anticipate that the operation of a medical marijuana facility in Sussex or Kent counties will go a long way to help those Delaware residents suffering from HIV wasting and the effects of HIV-related cancers or other painful illnesses and treatments.

For those reasons, we support First State Compassionate Care, Inc. in its quest to be selected to open and operate this facility.

We believe that the operation, under the leadership of a professional pharmacist will put patient care first and lead to a successful program.

Sincerely,

29 Del.C. Ch. 100 Freedom of Inform

Stephen W. Elkins
Executive Director



March 9, 2014

To whom it may concern:

I am writing this letter for support for Kathy McGuiness of The Giving Tree Compassion Care of Delaware, who are applicants for a medical marijuana dispensary and grow license in Delaware.

Kathy has taken the time to travel to Chicago to attend my education courses at Cannabis Career Institute. We have been in touch since last years course. She is outgoing, passionate and in the medical field. She can certainly get this program up and running on behalf of the state. I deal with many clients and students all over the US and am a seasoned consultant well versed in grow, harvest and business models. Kathy will run a professional operation for Delaware.

I am also on board to consult and help Kathy and The Giving Tree/Compassion Care of Delaware any step needed along the way.

29 Del.C. Ch. 100 Freedom of Information Act

Thank you,

Gary Maciel



**Morgan Consulting, LLC
4228 York St.
Denver CO, 80216**

March 7, 2014

To whom it may concern:

I am writing this reference for Kathy McGuiness who is applying for a medical marijuana dispensary and grow license in Delaware, and also describing my experience as a master grower and consultant. My name is Daniel Morgan, I moved to Denver in 2006 to attend the University of Denver. In 2010, I graduated with a BSBA and started working in the medical marijuana industry right after. I currently manage two medical/recreational cultivations and I plan on opening a 3rd that I will manage as a part owner. I started my consulting company in 2012 and currently have 3 consulting contracts with medical/recreational grows in Colorado. Before I started managing grows, I was the assistant manager of the dispensary Citi Med from 2010-2012. In mid-2010, when Colorado approved the first medical marijuana commercial grows, I also began building some of the first commercial grows in Colorado, initially as a part time grow assistant until I started managing full time.

I have met extensively with Kathy McGuiness in Denver and have shown and discussed with her the ins and outs of the medical marijuana industry. She has also participated in my specialized grow and dispensary training. The training included step-by-step instructions on: 1) growing from the start of the plant's life to harvest;; 2) creating the optimal environment for plants at all stages of growth; 3) preventing bugs, fungus and mold from entering the grow area; 4) harvesting, properly curing and storing cannabis; 5) tracking inventory; 6) learning specific characteristics and medical benefits of certain strains of cannabis; 7) discussing Colorado regulations and how they may pertain to Delaware. After the meeting with Kathy and the completion of her training, I feel confident Kathy is more than able to successfully implement my grow system.

I have agreed to provide my consulting services if requested with Kathy and her group. These services would include coming to Delaware and building out the infrastructure for the dispensary and grow, implementing my grow system, and ensuring compliance with all state laws and regulations. Because this will be a relatively small size grow, being able to control temperature, air flow, CO2 levels and humidity will be simple compared to other large scale operations I've helped establish. My grow system has also been tailored for complying with medical marijuana plant counts and limits by maximizing yield per plant. After meeting with and training Kathy, I'm very confident we could build out and start operating a fully compliant and well run dispensary and grow in a very short amount of time.

Sincerely yours,
Daniel Morgan
Morgan Consulting, LLC



5. PROPOSED METHODOLOGY AND WORK PLAN



Products

The Giving Tree plans to provide a wide variety of products to meet our patient's needs. As the field of medical marijuana research grows, new products are developed that are customized to the ailments of our patient base.

We believe medical marijuana is not a “one size fits all” medicine; every individual's body and mind react differently to each category of product and we at The Giving Tree shall strive to help our patients figure out exactly which product works most effectively for them.

We've listed out the basic categories our products fall into: Dried Cannabis and there are three types of Dried Cannabis- Sativa, Indica and Hybrids

1. *Dried Cannabis: Sativa, Indica, & Hybrids*

The effectiveness of cannabis is directly related to strain selection, therefore we will recommend care be taken in selecting appropriate strains to meet patient needs. Patients will be encouraged to use vaporizers, or ingest cannabis medicine to reduce any potential risks from smoking. Finished, dried, manicured, cured medical cannabis will be sold in 5g increments. The Giving Tree plans to begin with 8-12 medicinal varieties of cannabis.

Ø Please See [Appendix A](#), for a full list of all Products.

Services

The Giving Tree seeks to become not just a dispensary/cultivation center but an overall wellness center where our patients can obtain physical and mental relief through established and emerging services.

Our excellent staff will continue to develop new and exciting services for our patients. We at some point plan to offer some or all of the supportive services for our target patients; we believe that these services will be most important to the wellness and needs of our medical cannabis patients:

- Classes on medical cannabis compliance,
- Classes on pain management, wellness strategies, and oncology issues,
- Condition-based support groups (e.g., women's cancer support group, chronic pain support, HIV/AIDS support group),



- Counseling services focusing on proper medication practices and av substance misuse,
- Educational seminar/support group for those new to medical cannab
- Individual counseling,
- Medication interaction counseling,
- Resource services (referrals for a wide variety of essential life, social and economic services),
- A library providing patient information on medical cannabis, holistic healing, legality issues , and advocacy/activism, and
- Select workshops.(i.e. Yoga and Tai Chi)

All these services will be available to patients, free of charge. Their retention will depend on continuing demand and what we learn through our Community Needs Assessment, as discussed below. Additional services, including one or more of those set forth in the list of potential expansion services may be added based upon patient and community feedback.

Patient education will be taking place in the context of virtually every service we offer. As part of our education and counseling, we will offer a library that will include information on general holistic healing, cannabis use, and research. Understanding that patients will have different education levels and reading skills, we plan to offer our material in a variety of formats, including DVD, video, online, and tape formats.

We also plan to offer directly and through partner collaborations, patient advocate or licensed clinical social work services. We will have a full-time staffing position dedicated to:

- Providing one-on-one patient counseling,
- Managing our referral network to ensure that we have working and trusted alliances with a wide variety of other patient groups and healthcare providers.

Ø Please See Appendix B, for a full list of all Services.



Packaging

The Giving Tree's packaging will be designed for:

- a. Protecting the product;
- b. Providing safe and accurate packaging and labeling;
- c. Providing legal disclosures to promote Non-Diversion;
- d. Being environmentally friendly

A. Protecting the product

After all of the trimmed cannabis from a single plant is weighed, it is carefully placed in a compostable plastic bag, called a *BioBag*, and vacuum-sealed to retain freshness and eliminate odor. It is then combined with other bags to reach as close as possible to a .05oz increment.

Each package will have a seal that will alert dispensaries and patients that it has been tampered with or cannot be trusted if the seal is broken. This also serves as a seal of approval so dispensaries and patients know this is a verifiable The Giving Tree product that comes with the integrity associated with our name. If there is any doubt, each package has a serial number so dispensaries or patients will be able to call our customer service line and inquire about any of our products.

B. Providing Legal Disclosures to Promote Non-Diversion

Each product by The Giving Tree will have a standard legal disclosure. This legal disclosure may change from time to time depending on laws and company procedures. A sample of the legal disclosure is provided below:

- This product may only be possessed by customer of The Giving Tree in good standing. It may not be transferred to any person who is not a customer under any circumstances.
- This product may not be possessed, transported, or used outside of the state of Delaware.
- This product is for medical purposes only.
- Under federal law, the manufacture, distribution, or possession of marijuana is a criminal offense.



- The possession or use of this product carries with it an inherent risk of negative health consequences, criminal prosecution, and other possible risks.

C. Labeling

After a product is packaged, the final step before distribution is labeling (see sample label below on page 131). Labeling will be applied to every product after it is packaged. No medical marijuana shall be distributed unless the container in which it is distributed bears a legible label, firmly affixed, stating:

- a. The name of the center where the medical marijuana was produced;
- b. The name of the dispensary where the medical marijuana was dispensed;
- c. The quantity of medical marijuana contained within;
- d. The cannabinoid profile of the medical marijuana contained within, including the THC level and which batch/strain it originated from;
- e. Any other ingredient or ingredients besides medical marijuana contained within;
- f. The dispensing date that the medical marijuana was transferred to the qualified patient or caregiver;
- g. The qualifying patient's name and registration card number; and
- h. A statement that the product is for medical use and not for resale or transfer to another person and the product is free from contaminants.
- i. Written instructions that the marijuana shall remain in this container at all times except while being consumed or prepared

Finally, the bar code of the cannabis will be placed on the package, for traceability, along with The Giving Tree's product seal.

D. Compliance Language

As per the requirements regarding labeling and packaging of medical marijuana, we will abide by the following policies:

- a. All medical marijuana sold or otherwise distributed by our cultivation center shall be packaged and labeled in a manner that advises the purchaser that it contains

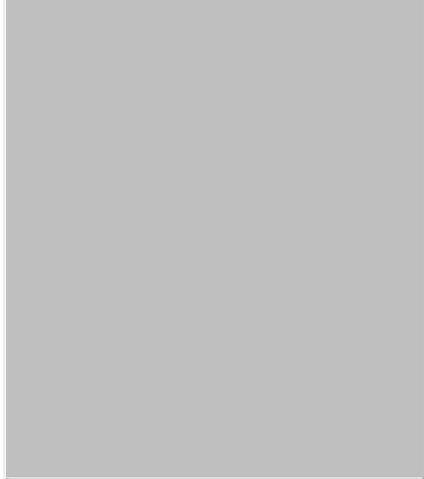


marijuana, specifies the amount of marijuana in the product, and that the marijuana is intended for medical use solely by the patient to whom it is so that any re-sale or re-distribution of the medical marijuana to a third person is prohibited.

- b. The label shall contain the following warning: “There may be health risks associated with the ingestion or use of this product.” Please consult your physician if you have any questions or concerns. .
- c. The label shall not contain any of the following information:
 - a. Any false or misleading statement or design; or
 - b. Any seal, flag, crest, coat of arms, or other insignia likely to mislead the qualified patient to believe that the product has been endorsed, made, or used by the District government,
- d. A cultivation center or dispensary shall not alter, obliterate, or destroy any label attached to a medical marijuana container.



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Operations Plan

This is the written Operations Plan for The Giving Tree. This plan addresses and meets the application requirements of the Act, the Regulations, and the OMM policies and guidelines.

IMPLEMENTATION STRATEGY

The Giving Tree’s compassion center will use a community-driven, patient-centered care approach that will benefit all Delaware residents, including delivering care in a way that makes quality, affordable medical cannabis available to underserved minority, low-income and indigent populations. This complex commitment dictates the features of our implementation strategy:

- Patient-centered care,
- Complementary therapies and support services,
- A professional clinical setting,
- Product variety,
- Scientific quality control,
- A skilled and knowledgeable staff,
- Investment in sustainable operations, community outreach, and enabling/support services.

A. Patient-Centered Care

The crucial element of our PCC approach will be meeting our patients where they are: communicating with them in the terms they are comfortable with. Understanding their medical needs and attending to it with proper medication. This requires that our staff be well trained, comfortable with diversity, and competent to interact appropriately with individuals from different backgrounds and levels of “medical literacy.” As a “socio-culturally competent” caregiver, The Giving Tree will educate and empower its patients so that they share responsibility for their own healthcare decision-making and healthy lifestyle choices. Patients will be educated as necessary on the ability of different options at the Compassionate Care Center. Our PCC-focused dispensary will provide:

- A welcoming environment,
- Respect for patients’ values and expressed needs,



- Patient empowerment,
- Staff socio-cultural competence,
- Help with coordination of care across providers,
- Emphasis on patient comfort and support, and
- Community outreach and collaboration.

Our staff, facility, and operations will prioritize education and patient empowerment. Maintaining a holistic focus and supportive services, it will seek to identify underlying factors that broadly influence quality of life, with emphasis falling on pain management, avoiding unhealthy behaviors, lifestyle change, improving physical conditioning, adopting better nutritional practices, reducing stress, and taking advantage of the profound mental health benefits that patients can derive from interpersonal support such as counseling, support groups, and community activities with those suffering from similar conditions.

As noted in our discussion above, research has shown PCC to result not only in far higher levels of patient satisfaction with their care, but also in better clinical outcomes and quality of life. While we are not practicing medicine, embracing PCC as the centerpiece of our model puts us ahead of the curve in this rapidly growing trend in healthcare.

B. Complementary Therapies and Support Services

The Giving Tree is not a cannabis dispensary that simply hands out Medical Marijuana to its patients. Our focus is on overall health and wellness, and as such, we must be a wellness clinic that offers more than medical cannabis. Offering an array of peripheral services is central to our holistic, patient-centered approach to healthcare.

We understand that we are not replacing traditional health care, but we seek to become its essential complement for patients who appreciate and need a customized, holistic, and coordinated approach to wellness. We plan to eventually offer several types of support services:

- An on-site library providing, in multiple languages and in both written and video formats, patient information on medical cannabis, holistic healing, legality issues, and cannabis advocacy/activism,
- Complementary and alternative wellness therapies, offered for free or at discounted rates (The Giving Tree will subsidize the fees charged by outside providers such as acupuncturists, rolfers, chiropractors, etc.),
- Free classes, workshops, and support groups, and
- Patient advocacy and care coordination/referral to other providers and organizations.



Although there is an emerging alternative medicine industry in Delaware, a wellness center will have a distinct advantage of integrating patient care at location and offering services free of charge or, in the cases where we bring skilled outside practitioners, at significantly reduced rates and more effectively targeted to underserved populations.

C. Professional Clinical Setting

The compassionate cause of medical cannabis is ill served by reminders of the counterculture or association with the image or ethos of the marijuana stigmatism. Our atmosphere will be designed to move medical cannabis away from any association with the counterculture or even with the casualness of uninformed home cultivation and focus attention on its scientific and medical legitimacy. In keeping with this, our compassion center maintains the professional look and feel of a professional medical service clinic, and the fact that our products are scientifically cultivated and tested will be the key element in our strategy on which we plan to build public awareness of our “brand.”

D. Strain Variety

Different strains of cannabis have different therapeutic and palliative effects, some offering relief from a given condition more than others. Furthermore, patients with serious medical conditions, such as those with wasting syndrome or undergoing chemotherapy for cancer, can have very specific tolerances, intolerances, and idiopathic reactions to medication. To offer patients customized and scientifically precise treatment options, it is critical that we provide as wide a variety of strains of medical cannabis and as great a variety of delivery methods as possible. Relying on patient members, we will provide a wide range of products as soon possible.

Ø See Appendix A and B-Products and Services List.

E. Skilled and Knowledgeable Member Staff

Without a skilled and knowledgeable staff, our product diversity and PCC approach would be of little benefit to most patients. A crucial feature of our strategy is the extensive training that our staff will undergo to be able to advise patients on such things as the specific effects and side effects of various strains or delivery methods, their benefits for specific medical conditions, and their interactions with other medications, as well as with drugs and alcohol.

Providing patients with types of information they cannot obtain in traditional health care settings conforms to our general strategy of offering something that



does not replace traditional health care, but complements it by providing something critically lacking in it. The need for complementary care is part evident in the case of medical cannabis because physicians typically recom only that the patient use it, without specifying the strain or delivery form. This creates a patient information deficit and education need that our approach is designed to address. Because many dispensaries do not take this need seriously enough, our educational approach will quickly distinguish our “brand.”

F. Investment in Community Outreach and Enabling Services

Many states have dispensaries offering a variety of peripheral services on a patient-centered care model. The Giving Tree’s approach builds on successful dispensary models, improves the scope and type of community outreach, and delivers more targeted services that will benefit all residents of Delaware, including underserved and minority residents. Our programs outlined in the Patient Education Plan highlight our efforts to make affordable marijuana for patients receiving Medicaid or receiving Social Security Income or Social Security Disability Insurance.

G. Support (“Enabling”) Services

To remove barriers to access for certain populations, we plan to offer the following free or reduced cost services:

- *Advocate Referrals* - Critical to enabling access to health care will be providing patients with expert assistance in locating providers and getting necessary referrals. This service will be offered by our center to all patients free of charge.
- *Delivery* - We would like to offer free delivery to patients who are homebound or too infirm to travel comfortably. We will explore adding a patient delivery service in our operations. It will comply with the strictest industry standards for medical cannabis delivery services:
 - Transporter will be a dispensary employee/consultant.
 - Vehicles will be insured.
 - Medical cannabis will be in a lockbox in the trunk.
 - Driver must sign for inventory from dispensary and must sign with each delivery and for ending inventory.
 - All vehicles will have GPS.

We plan to scale additional enabling services based on input from the community.



H. Substance Abuse and Misuse Counseling

We recognize the need to provide a safe environment that helps patients avoid substance abuse and misuse. Our employee members will be trained to recognize the signs and symptoms of substance abuse, including tolerance, dependency, and withdrawal. In our workshops, clinics, and materials, we will emphasize personal responsibility for individual behavior. We also will provide information about the differing strengths of medical cannabis strains and products and the potential drug-to-drug interactions, including interactions with alcohol, prescription drugs, non-prescription drugs, and supplements. Each patient and caregiver will receive a list of substance treatment facilities and counselors located within a reasonable distance of the compassion center. Finally, working with our member managers, patient education about the potential abuse of medical cannabis will be integrated in all patient visits, materials, and outreach.

SPECIFIC OPERATIONS

A. Patient Care

1. *Orientation*

All new patients must attend a one on one consultation where basic critical information is reviewed. This will include legal information such as:

- Where and when patients may legally use cannabis, with special attention paid to situations where it is expressly illegal regardless of medical cannabis qualifying status and situations where legality may be ambiguous and subject to conflicting interpretation, and
- What to do if stopped by law enforcement for possession or use of cannabis.
- Rules regarding the transportation of medical marijuana across state lines.

It will also cover medical and safety issues:

- Basic types of cannabis and their various benefits and effects,
- Safe and proper use of cannabis,
- Side-effects and drug interactions, and
- Keeping medication away from children and preventing diversion.

2. *Patient Handbook*

Each new patient / caregiver will receive a Patient Handbook. The new Patient Handbook will include:



- Patient Guidelines to Stay Safe and Healthy
- Patients' Rights
- Delaware Medical cannabis Law Overview
- Services
- Guide to Using cannabis
- Sativa vs. Indica
- Applications for Cannabis and Cannabinoids
- Ailment Specific Strains
- Substance Use Prevention
- References and Resources

3. *Dispensary Access*

Patient (hereafter in this document “patient members” shall include non-staff members of the center who are designated primary caregivers as well as patients themselves) enters the dispensary through the secure patient screening area. To proceed beyond the screening area, security personnel must verify patients. This requires in all cases three kinds of documents:

- 1) Their valid dispensary membership ID card,
- 2) A government-issued form of photo ID (other than a medical cannabis ID card), and
- 3) Their medical cannabis eligibility documentation: either a) their Delaware State Medical Cannabis ID or b) their physician’s medical cannabis recommendation (if a patient) or their Caregiver Designation Agreement and Disclosure Form, along with a copy of the designating patient’s recommendation (if a caregiver).

Transactions involving cannabis will not take place without verification of the patient’s current status as a qualified patient or caregiver and as a dispensary customer in good standing. Patients/caregivers will not be allowed to acquire more than reasonable and medically recommended amounts within any 14-day period per the regulations.

All receipts for medical cannabis dispensed will bear on their reverse side a Disclosure Statement attesting that the recipient is a patient in good standing of our compassion center and that the recipient’s eligibility to receive medical cannabis was duly verified at the time of the transaction.

4. *Patient Service*

The patient’s first visit as a patient/caregiver to our dispensary will involve a private consultation in which the patient’s medical needs, history, and dosing practices are discussed. Detailed records will be kept. Patients will be



recommended a “medication use journal” and asked to keep track of the medication use, indicating the date and time of use, the symptom they were treating, the exact product used, the amount, and the result obtained. Staff will follow up in private consultations with patients at each subsequent visit until the patient expresses satisfaction that an effective regimen for his or her needs has been found. Once we implement some or all of our support services; at every visit, staff will check with patients to see if they would like to use any of our free services such as care referrals and coordination, one-on-one counseling, or support groups. Staff will follow up with patients at regular intervals to ensure that they are getting the care they need.

We have dedicated space in our dispensary for both private patient consultations and for group meetings. The dispensary will be open five days a week and we will make sure that some group activities and essential consultative care services are available to patients.

The services are targeted to be available to our members are described above in our discussion of services: They are:

- An on-site library providing, in multiple languages and in both written and video formats, patient information on medical cannabis, holistic healing, legality issues, and cannabis advocacy/activism;
- Complementary and alternative wellness therapies, offered for free or at discounted rates will subsidize the fees charged by outside providers such as acupuncturists, rollers, chiropractors, etc.);
- Free classes, workshops, and support groups;
- Free counseling, patient advocacy, and care coordination/referral to other providers and organizations; and
- Enabling services such as transportation, interpreters, and needs/means-testing to qualify patients for products and services at no charge on or sliding fee scale.

5. *Feedback*

The Giving Tree will try and solicit continual customer feedback, take specific action to mitigate any customer dissatisfaction, and follow up to measure the success of the mitigation actions undertaken. We will keep a log of all customer complaints, of the response action taken, of the names of those assigned accountability for implementing and following up on the success of the mitigation, and of the ultimate outcome as measured against both management expectations and reevaluated member satisfaction. Mitigation will continue until management and customer satisfaction is complete and documented. These records will be available for the scrutiny of state, county and municipal oversight officials at any time. A comprehensive internal performance assessment will take place not less than annually and will, among



other self-assessment methods used, review these logs to ensure that our compassion center is successfully employing as its standard procedure : correcting and improving operations model.

B. Cultivation Production

The cultivation of cannabis will take place in a secure part of our facility that is off-limits and inaccessible to patient and unauthorized staff, requiring special combinations and key-card access. Cultivation is a multi-stage process. The processes at many of these stages require dedicated spaces. The proposed floor plan of our facility reflects this, with special areas dedicated to each of the following production stages:

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



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[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Disease and pest control techniques are described in detail in our Product Testing Plan.

C. Non-Diversion: Inventory Control

Our goal is a manufacturing process that tracks and secures each individual plant through the entire production process, that is, from the seed to sale.

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[Redacted]

[Redacted]



29 Del.C. Ch. 100 Freedom of Information Act

[REDACTED]

[REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



avoid providing cannabis to ineligible patients. Finally, we will track patient monthly cumulative buy amounts to ensure that patients do not exceed the amounts recommended by their physicians and to monitor for patterns suggesting diversion or abuse. Our software system will identify unusual purchasing levels that may suggest diversion.

In addition, records will be kept on all patient consultations in which the patient's health and cannabis use are discussed. These records are vital to knowing the history and details of the patient's health, physician recommendations, patient self-assessments and concerns, referrals to other caregivers, and any other staff-patient communications, as well as of specific strain recommendations, the patient's past reactions (including side-effects), treatment alternatives considered or rejected, and the other types of care the patient has received or is receiving.

Only authorized staff and Dispensary Directors will have access to patient records, which will be kept electronically in a secure on-site database and subject to the same level of security and confidentiality as other types of health information in traditional medical settings.

To the extent required by law, patient record keeping will be fully HIPAA-compliant.

E. Reporting

As required the Act, the Regulations, and the OMM policies and guidelines we will provide the following information to the Department:

- The total number of patients of the dispensary,
- The number of dispensary visits during the previous calendar quarter,
- A list of all medical cannabis products for sale during the previous calendar quarter, their prices, and the end-of-quarter quantity on hand.

F. Safety

1. *Patient Safety*

The safety of our patients and their information is important to us. Other than security guards, only patients or caregivers will be allowed in our facility. No one can gain access to the facility without passing through a secure screening area. The area is monitored on video surveillance by security personnel for any disturbances. Patient information is kept encrypted on a secure, password-protected database that only authorized staff can access and never directly associated with patient's names.

2. *Product Safety*



The purpose of product safety protocols is to ensure that our medical ca
is:

- Free of pests and microbiological contaminants, toxins, pesticides and non-organic nutrient residues,
- Medicinally potent, and
- Properly labeled to strength of active ingredients.

We achieve product purity first through preventive measures including:

- Proper sanitation, scrupulous clean room operations, maintaining a closed growing environment, and controlling for heavy metals;
- Limiting human traffic and transport and enforcing clean room and general hygiene protocols; and
- Systematically pruning plants of decaying matter, quarantining contaminated plants, employing predator species, and developing disease-resistant strains.

Secondly, we monitor for the failure of our preventive measures and the need for remediation through close observation of growing conditions and continual laboratory analysis of samples.

Finally, when necessary, we undertake remediation, always employing the most organic and least toxic method that will be effective for the purpose.

Details of our prevention, assessment, and remediation procedures can be found in our full Product Safety Plan.

Patient, worker, and neighborhood security are our highest priority. As discussed more fully in our attached Security Plan, we have, in partnership with our security consultant; D & D developed a state-of-the-art plan that takes advantage of the security industry's best practices and most up-to-date technology, ensuring that our dispensary facility operates at the highest level of legal compliance and security preparedness.

An independent security consultant has assessed the security of our site and proposed facility. D & D has undertaken this assessment for us. Their recommendations, detailed in the Security Plan, have been incorporated into our plan.

Our Security Plan is divided into two components: *Facility Security* and *Operations Security*. The preventive measures adopted in these components will minimize our security exposure, protecting the public, our patients, and our staff. We also are confident that should there be any breach of security, our



comprehensive response capabilities will ensure the incident is quickly detected, contained, and resolved at the appropriate response level.

A. Facility Security

The key to facility security is controlling ingress into and movement within the building a) through strict access protocols for employees and patients and b) through physical and electronic safeguards to protect against forced or surreptitious entry or movement.

This includes:

- Securing all doors and windows with locks and electronic alarm mechanisms,
- Adequate lighting and video surveillance with third-party monitoring in and around the facility,
- Round the clock monitoring of the facility
- Multiple redundant electronic systems to detect intrusion or unauthorized movement within the facility,
- Keycard and access-code-controlled access points in employees-only areas,
- Strict enforcement of identification requirements for all incoming persons.
- A secure pre-screening and reception area for incoming patients, and
- Strict enforcement of eligibility documentation and verification procedures for all patients.

B. Operations Security

The key elements of operational security are: procedural security, workforce security, and inventory security:

- Procedural security requires explicit and well-rehearsed protocols to deal with all types of incidents and eventualities, from suspicious behavior, loitering, or on-site consumption to full-blown emergencies and premeditated security threats. Well-laid plans, working security systems, and staff preparedness are paramount.
- Workforce security includes background checks, proper training and drills, and physical and electronic safeguards for employee safety during transactions.
- Inventory security requires a system for strict inventory tracking and control along with facility monitoring to prevent diversion, theft, and on-site consumption.



As reflected in our attached Security Plan, preventing minor incidents of misconduct and responding to them appropriately when they do occur is an important strategy to reducing the likelihood of major security breaches.

Ø See Security Plan

FIRE PLAN

To make sure we develop a fire protection plan adequate in all of the occupancy categories relevant to a medical cannabis dispensary, we have partnered with D & D to evaluate our building and assist us in crafting a comprehensive plan.

C. Background

The cultivation of medical marijuana sometimes requires complex components and lighting that may pose a fire risk if misused or in the event of a malfunction.

The Giving Tree recognizes that a prime motivation for regulating medical cannabis dispensaries is to protect the peace, health, safety, and welfare of the community from these types of problems. Electrical fires not only cause millions of dollars of property damage annually, but they also affect lives.

Because of the complex nature of a dispensary, which combines moderate-hazard manufacturing, medical-type services, and finished goods made available to a limited public, it needs to meet a variety of safety standards.

D. Fire Plan Overview

1. *Preventive Safety Measures*

a. Cultivation Areas of the Dispensary

Critical components of fire prevention in a dispensary facility that includes cannabis cultivation are:

- Complying with State and Local Fire Codes
- Going Beyond Code Requirements



- Ensuring Electrical Safety
- Good Housekeeping and Site Maintenance
- Adequate Signs and Notification for Hazardous Materials
- Fire Safety Training and Drills
- Effective Emergency Response Plans

b. Patient Service Areas of the Dispensary

In addition to the above, further fire safety measures must be adopted in the dispensary areas that will be frequented by patients:

- Promulgation of a strict no-smoking policy and other fire prevention rules to all patients and employees;
- Clearly marked and illuminated exits and evacuation routes; and
- A dispensary staff trained and routinely drilled in the proper procedures to evacuate members.

2. *Fire Suppression*

The Giving Tree will employ many techniques to mitigate and control fires if they occur. Smart mitigation techniques limit fire damage and danger, and they conserve the resources of the Fire Department by reducing the number of incidents that require response by firefighters. These mitigation techniques may include the following:

- Fire Alarms
- Sprinklers
- Extinguishers
- Monitoring Services
- Fire Evacuation Plan

3. *Standardization of Procedures*

Standardization of procedures is the only way to ensure accountability and comprehensive preparedness. Accordingly, The Giving Tree has developed a set of standardized forms and checklists to ensure that our safety procedures are correctly implemented and followed. In our Fire Safety Plan we provide a sample of these safety-procedure forms and checklists:

- Fire Risk Survey
- General Fire Prevention Checklist
- Exits Checklist
- Flammable and Combustible Material Checklist



MANAGEMENT AND GOVERNANCE

All agents must be at least 21 years of age, not been convicted of an excluded felony offense for Drug Misdemeanor within five years from the date of the application and has not been found to have violated Section 7.2.8 of the regulations, which refers to the marijuana dispensing limits.

A. Board Members

The team is composed of successful, established community leaders, professionals, doctors, and others committed to providing qualifying patients, their caregivers, and their healthcare providers with current, scientifically accurate information about medical cannabis and to bringing the highest quality medical cannabis and patient-centered care to those who need them most.

- Ø Please see [Appendix E](#) for our individual Board Member, Agents and Team Resumes.

B. Member Managers

We are committed to the highest ethical standards, patient safety, and transparency in our operations and business practices. We have submitted Live Scan applications as well as full background checks for each managing member of The Giving Tree for fingerprints.

C. Employee and Training

Qualified trainees will work for three-months on probationary status. During this period, they will participate in a rigorous training process and be evaluated for suitability in a restricted-access medical environment and for their ability to adapt to the needs of our patient-centered approach to healthcare. Training will include the employee work handbook, other reading materials, presentations by qualified



professionals, and hands-on training. The program may consist of one or more of the following modules:

- *Compliance.* Compliance training will cover all state laws and requirements relating to cannabis. Obligations of licensed cannabis compassion center will be emphasized. Other topics may include the rules and regulations of the dispensary, sexual harassment training, effective interaction with law enforcement personnel, and the rights and responsibilities of medical cannabis patients. The training will include at least one two-hour session with a licensed, subject-matter expert attorney who is a practicing member of the state bar.
- *Medical.* Medical training will include disabled rights and sensitivity, how to identify and interact with a patient having a medical emergency, the proper uses and benefits of medical cannabis, and an introduction to the other medical treatments offered by our wellness program.
- *Dispensing.* As noted before, staff will be trained in patient care—not retail sales. The focus will be on assisting patients in making appropriate decisions about how to choose the type of medicine, which is right for them. Staff will be provided with ongoing training in product information as well as general service philosophy.
- *Safety.* In addition to its focus on safety, security training will include acceptable currency identification and counterfeit detection, warning signs of possible diversion to the illegal market, lock and alarm procedures, perimeter and entrance control, robbery response techniques, conflict resolution techniques, and diversion detection techniques.
- *Patient-Centered Care.* Because of our focus on patient-centered care, staff training and education will have to go beyond the standard of care in traditional settings. Staff must not only be able to answer questions about the use of medical cannabis for many different conditions, the differences between various strains and the benefits of other complementary therapies, but they must also be able to do this in a patient-centered way, which means having the pedagogical, socio-cultural, and linguistic competencies needed to communicate effectively with patients regardless of their level of health literacy, education, language, or socio-cultural background.
- *Drug Free Policy.* All employees shall adhere to The Giving Tree drug free policy.



GREEN PRACTICES

The Giving Tree aims to become an industry role model for initiative and innovation in green cultivation and environmentally responsible business development. We believe that dispensaries have a responsibility to be as green as possible. As part of our green model, we plan to obtain:

A. “Clean Green Certification” for Cultivation, Products, and Compliance

The Clean Green Certified program is comprised of three parts: legal compliance, a review of the manner in which the medicine is grown, and a standard agricultural crop inspection. Taken together, the program helps to insure our legal compliance as well as to distinguish our products from others available to qualified patients. A certified operation is licensed to use the Clean Green Certified label on their products. It is an annual review requiring an on-site inspection once a year as well.

The cultivation portion of the facility will be a “closed” system with strict environmental controls. The facility will employ negative air pressurization to eliminate air exchange from the cultivation area to the rest of the dispensary. All exhausted air will be emitted from the building after undergoing carbon (charcoal) filtration and ozone treatment for the neutralization of odor (volatile organic compounds) to ensure no “tell-tale” odors are emitted to the outside. Furthermore, we will develop a comprehensive plan to ensure that our build-out and operations will be exceptionally responsible in the following areas of environmental concern:

- Management of storm water runoff,
- Energy use,
- Disposal of construction and demolition debris,
- Management of waste,
- Handling of hazardous materials, and
- Spill prevention.

Finally, as part of our research and development budget, we intend to work with energy efficiency, renewable energy, and carbon markets to invest in advanced green growing technology, equipment supplies, and operating standards. We intend to make the drive towards “100 percent green and clean” a signature element of our “brand” and a centerpiece of our industry leadership.



Given that dispensaries can be financially sustainable nonprofit organizations, simply no good reason not to invest in sustainable practices and build such practices into the costs of operation.

RESEARCH AND DEVELOPMENT

Once we are operating at capacity we will have three long-term-goals: improving patient care by building a clinical database, 2) improving strains through selective breeding, and 3) developing better green growing technologies.

A. Needs of Patients

We place great emphasis on researching and developing medicines that best fit the needs of patients. We will use patient feedback forums including anonymous web-based tools, in-house surveys, patient log books, forms to rate the scale of pain, guidelines for patient self-assessment, and direct feedback documentation to assess patient satisfaction and to correlate specific benefits, reactions, and effects with patients' medical conditions, lifestyle, and other relevant circumstances. We will use this information to build a comprehensive database that we can eventually use in helping patients pick just the right medications for their needs and condition. This will improve our clinical understanding of the benefits and side-effects of different strains, both in general and insofar as they relate to the management of specific diseases and patients with specific profiles (age, medical history, adjunctive treatments).

B. Conventions

We will also attend regular medical and medical-related cannabis conventions as a means of investigating current cultivation techniques and practices as they relate to patient care. As we develop a rich database on desirable and undesirable properties in different strains, we can begin a process of crossbreeding to selectively remove unwanted properties, such as anxiogenesis, and reinforce others, such as increased levels of specific cannabinoids, thus creating strains with specifically designed clinical applications.

C. Environmental Responsibility

We seek to be as environmentally responsible as possible. However, while there are many new green technologies touted on the market, such as LED cultivation lighting, many of these products do not live up to their alleged potential. We are happy to dedicate a portion of our growing facility as a testing ground for new technologies and to work with the industry develop better green growing technologies.



BUSINESS PLAN

EXECUTIVE SUMMARY

The Giving Tree is a not-for-profit dispensary compassion center organized as a non-profit nonstock corporation under the Laws of the State of Delaware. Founded in 2014, we plan to operate a medical cannabis compassion center in Delaware if awarded a permit by the Department. Our planned dispensary will use a patient-centered care model, collaborating with community stakeholders to provide quality and affordable care to all residents, including minority and underserved populations.

We will provide our patients with safe products, professionally packaged, and presented in a compassionate, service-focused way in a comfortable setting by well-trained staff. Patient education is a key element of our approach, and will be part of an array of wellness and support services (transportation, interpreters, and care advocates) we offer our patients.

The Giving Tree is governed by leading professionals and community leaders with over 100 years in combined management, finance, legal, government, and industry expertise. Our Board and the majority of our team members are Delaware residents and have extensive experience working with Delaware on a variety of issues. This breadth of experience and deep ties to the community will be needed to help guide us through the many complex issues facing medical cannabis dispensaries.

Our center is being designed and built to feature state of the art technology with forward-looking green practices. Security and safety are critical components of our operations. We also plan to take every effort to be “good neighbors” in the community. This means providing extensive community outreach, including hiring, indigent care, and public involvement. It also means minimizing any negative impacts or nuisances that may arise from our operations.

Our key objectives:

- To provide safe and legal access to medical cannabis for all qualified patients regardless of their ability to pay;



- To reduce the barriers and improve access to medical cannabis and its potential benefits, including the potential to reduce health disparities in underserved and minority residents in Delaware, and
- To revitalize our neighborhood and contribute to Delaware’s wider economic development through job creation, increased tax base, and education and outreach.

Finally, The Giving Tree has sufficient capital in place to build, secure, and start up the proposed dispensary. We believe that our initial capital is more than sufficient to cover estimated costs of build, operation, and compensation of employees with fringe benefits, equipment costs, utility costs, legal compliance, and other O&M as needed. As requested, we have provided proof of capitalization to cover such amounts if awarded a permit.

ORGANIZATION AND COMPLIANCE SUMMARY

a. Legal Entity: A Nonprofit Corporation

The Giving Tree is a nonprofit nonstock corporation under the Laws of the State of Delaware. Founded in 2014, The Giving Tree plans to improve access to medical cannabis and advance the cause of compassionate, patient-centered care for seriously ill patients, particularly minority and low-income residents from underserved neighborhoods in Delaware. We plan to accomplish this through a patient-centered care model, a variety of partner and collaborative relationships with key community stakeholders, and a commitment to the delivery of quality and affordable preventative healthcare with outstanding patient support services.

Our services shall include:

- A breeding department,
- An on-site laboratory,
- An expanded cultivation area,
- An expanded array of peripheral services, also discussed in this Operations Plan.

- Ø Please See our Articles of Incorporation and Bylaws.
- Ø Please See Appendix J for Proof of Capitalization

b. Organizational Compliance: Closed-Loop Operations and Nonprofit Status



Our business model is dictated by two constraints: the legal conditions plac state and local governments on the operation of medical cannabis compassi center and the commitments specific to our mission.

As a nonprofit center, The Giving Tree facilitates the collaborative efforts of its patient and caregiver members — including the allocation of costs and revenues — to cultivate physician-recommended cannabis. In organizing our center, The Giving Tree has taken great care to ensure patient and neighborhood security, to design our operations so as to prevent cannabis diversion, and to comply with all applicable laws, including state and local laws. To ensure lawful operation, we will:

- Operate as a nonprofit,
- Require patient application and patient verification,
- Acquire, possess, and distribute only lawfully cultivated cannabis,
- Not distribute and/or sell cannabis to non-patients/caregivers
- Comply with permissible reimbursements and allocations requirements,
- Provide adequate security to ensure patient safety and prevent the negative impact of any nuisance to surrounding homes and businesses,
- Keep accurate records and follow accepted cash handling practices, including regular bank runs and cash drops, and maintain a general ledger of cash transactions,
- Comply with possession and cultivation guidelines,
- Obtain necessary business licenses/permits and pay required sales taxes, and
- Meet IRS tax requirements for dispensaries?

We will operate as a closed-loop in which cannabis is cultivated, processed, acquired, distributed, and consumed only by patients. All transactions will be internal to the compassion center and involve patients interacting only with one another. No cannabis will be acquired from or distributed to non-members. All monies tendered will be for the sole purpose of reimbursing the costs of products and services provided, as well as the overhead costs of operating the dispensary, including its peripheral wellness services and community outreach programs.

At no time will we operate in a manner that would constitute—or give the appearance of constituting—doing business as a retail seller of cannabis. No member of the compassion center, including board members, officers, directors, staff, and patient members, will profit from the distribution of cannabis.

Transactions between The Giving Tree and patients will be consultative in nature, focused on matching product with patient needs in light of his or her medical



condition, specific treatment limitations, and history of response to previous dispensary products.

All revenues in excess of the costs to operate our wellness facility will be used to sustain our charitable outreach and community benefits mission.

c. Patient Compliance

Access to the center is strictly limited to patients or caregivers where an individual must be a properly enrolled patient whose status as a currently *qualifying patient or caregiver*¹ has been duly verified at the time he or she seeks services.

Under state law, The Giving Tree members must have a serious medical condition for which a physician as a treatment recommends cannabis in writing. Although verbal recommendations may be permitted by law, we will require all applicants for membership to provide a written proof of their physician recommendation, even if they have a state or city medical cannabis ID card, and we will require members to carry their recommendations or medical cannabis ID cards with them whenever in possession of medical cannabis.

d. Transparency and Oversight

To ensure transparency of our operations and easy verification and documentation that we are operating within the limits set for a non-profit compassion center and that our operations do form a closed loop with no outside diversion or acquisition, we will enforce strict oversight procedures regarding, facility access, operations, and documentation of legal compliance.

- We will verify all patient medical cannabis recommendations and medical cannabis identification cards and track when they expire so as to exclude those whose credentials are invalid or have expired.
- Medical cannabis will only be distributed on the dispensary site.
- Except for our security, only patients and caregivers will be allowed into the facility.
- All patients must have a valid form of government-issued photo ID that matches their medical cannabis recommendation or ID.
- All must show proof of State residency.
- All employees responsible for the handling, dispensing, providing and cultivation of cannabis will be enrolled as designated caregivers.

¹As defined by statute and/or applicable law.



- Those caught diverting cannabis to non-members or for non-medical use will be revoked. We will not dispense cannabis to anyone whose ID has been revoked.

e. Verification, Paperwork, and Tracking

a. Verification

Delaware allows patients and their designated caregivers to enroll in a voluntary state or local medical cannabis patient ID program that provides them with a government-issued card identifying them as legally-qualified medical cannabis patients or caregivers. These medical cannabis ID cards allow for easy verification of the cardholder's current eligibility status through a telephone or electronic verification system that dispensaries and law enforcement can access. To be eligible for membership in Delaware, we will verify a prospective member as follows:

- The individual's identity must be verified by a form of government-issued photo ID (separate from any medical cannabis ID).
- The individual must present proof of State residency.
- The enrolling employee officer of the dispensary must check to make sure the individual has not been a patient in the past whose ID was revoked.
- Every patient applicant must present his or her physician's recommendation for the use of medical cannabis, regardless of whether the applicant possesses a medical cannabis ID card issued by the State of Delaware. (This is more than a compliance issue: because we will focus in on providing health-focused patient-centered care, it is important that the first document in every patient's file be his or her doctor's recommendation so that we can take any specific information given by the doctor into consideration in recommending treatment options.) The presented document must be an original, not a copy. The validity of the physician's license to practice medicine in the state of Delaware is verified. The physician is then contacted and the recommendation is verified.



- If the patient applicant does not have a State Medical Cannabis Card, the individual will have to present the physician's recommendation at the time of each subsequent visit, and it matched against the copy on file.
- If the prospective patient presents a State Medical Cannabis ID Card, the validity of the card is checked electronically or by phone. Subsequently, the patient will not have to re-present his or her physician's recommendation at the time of each visit as long as he or she presents the medical cannabis ID card and it is found to be valid by the verification system.
- If the prospective applicant is a primary caregiver, the individual must present a Primary Caregiver Designation Agreement and Disclosure Form, signed and executed by the designating patient and designated caregiver, naming the prospective applicant as the patient's caregiver. The presented document must be an original, not a copy. The prospective member must also present a copy of the patient's physician recommendation. The patient is contacted to verify the validity of the agreement. The verification of the physician recommendation is the same as above.
- If the caregiver applicant presents a State Medical Cannabis ID, the validity of the card is checked electronically or by phone. Subsequently, the caregiver member will not have to re-present the Caregiver Agreement or physician's recommendation at the time of each visit as long as he or she presents the medical cannabis ID card and it is found to be valid by the verification system.
- If all verifications are in order, the applicant is eligible to be enrolled as a patient in our compassion center. The patient must complete compliance paperwork and agree to center rules before becoming a duly enrolled member, and must attend an orientation on dispensary rules, cannabis legality, and medical use of cannabis before applicant becomes active and cannabis can be obtained.

b. Paperwork Compliance.

Compliance consists in the *Patient Agreement*. The prospective patient/caregiver must read or have read to him/her all the compliance paperwork. He/she must attest in writing (by their signature) that they:

- have received the paperwork,
- have read it or had it read to them,



- understand it, and
- agree to abide by all its rules and requirements.

Ø See Sample Forms - Patient Rules and Agreement Sample.

c. Patient Tracking

We plan to track our patients and the individual activities of each patient. For every day, month, quarter, and year, we will track the total number of patients, the number of patients who visit the dispensary, the number of their visits, and the number, quantity, and type of products sold and on hand for sale, as well as the number of plants or products under cultivation or production. This will allow us to ensure and document for the purposes of regulatory compliance the aggregate amount of medical cannabis in our facility does not exceed allowable cannabis limits.

We also will keep accurate records of all transactions, whether cash or otherwise.

Finally, we will track patient's monthly cumulative buy amounts to ensure that patients do not exceed the amounts recommended by their physicians and to monitor for patterns suggestive of diversion or abuse.

All books, records, and accounts, including those related to patients, will be maintained to comply with applicable laws and regulations.

d. Tax Compliance and Accounting

The Giving Tree will comply with local, state, and federal tax requirements. We are well aware of the unique federal tax implications for medical cannabis businesses, and have consulted with appropriate professionals to ensure full compliance with the Internal Revenue Service's treatment of medical marijuana. We understand that for any drug that is considered illegal by the Federal government, including medical marijuana (albeit legal according to the State of Delaware), a 1982 tax code prohibits cost deductions for our business.

e. Insurance

The Giving Tree has obtained the required commitments necessary for insurance coverage, including general aggregate, products complete operations, personal and advertising injury, per occurrence, and medical payment coverage.



The Giving Tree has specifically acquired a “vacancy under renovation” policy and that will then be turned into the GL policy for our dispensing/cultivation operations.

The GL for our operations will give us \$1/2M limits, property coverage for our business personal property, cannabis stock/inventory, 3 months of Loss of Income coverage, and allow for the usual and customary landlord requirements such as a Certificate naming them an Additional Insured, Waiver of Subrogation, and Tenant Improvement coverage.

Our policy is through:

Doug Banfelder,
Licensed Agent/Commercial Specialist
Premier Southwest Insurance Group
Premier Dispensary Insurance



START-UP COSTS

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The following start-up expenses are anticipated for the build out of both the proposed dispensary and cultivation processing facilities:

PERMITS

- Permit Fees – \$45,000 (\$5,000.00 application fee and a \$40,000.00 bi-annual registration fee due with the vendor signed contract if The Giving Tree is awarded the permit.)

DESIGN

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REAL ESTATE

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EQUIPMENT

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CONSULTANTS

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Ø Please see Appendix F for full list of equipment and pricing.



**FIRST STATE COMPASSIONATE CARE INC
PRO FORMA SOURCES AND USES OF FUNDS**

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PROJECTION BASED ON ASSUMPTIONS

-
- Ø Please see Appendix G for full Financial Performa.
 - Ø Please see Appendix F for the Full Equipment List and Pricing



TESTING PLAN

Product Safety Plan

This is the written Product Safety Plan for The Giving Tree (“We”, “Us”, “Our”, “Applicant”). This plan addresses and meets the application of the Act, the Regulations, and the OMM policies and guidelines.

INTRODUCTION

Product safety is a vitally important component of the medical cannabis industry because patients with compromised immune systems utilize medical cannabis to improve their condition. As such, the medicine must be safe and free of contaminants to prevent further complications to patients with already weakened health. Too often this medicine that they rely on to provide treatment or relief contains mold, bacteria, pesticides or other harmful concerns can be dangerous as well. One of the most attributable causes is the lack of lab testing and quality assurance when distributing cannabis.

To address this concern, The Giving Tree will test QA/QC tests at different times along the plant production process before a medical cannabis patient ever receives one of our products. The testing results and data will be clearly labeled on our packaging so every patient knows that their medicine is safe for consumption.

Additionally, The Giving Tree will abide by strict product safety and testing standards that currently do not exist in the emerging cannabis industry. There are no federal guidelines defining acceptable levels of chemical or biological residues for cannabis. Moreover, there are no federal guidelines regarding appropriate analytical methods for detecting these residues in or on cannabis medicines. The Giving Tree sees this lack of official industry requirements and protocols as a unique opportunity to self-impose these standards, and to not only represent our industry well, but to ensure patient safety and medical efficacy. We will, with the help of qualified scientists, implement self-imposed product safety and testing protocols that will ensure all products produced by the proposed facility will be of known potency and free of chemical and biological contaminants.



The quality control process involves the examination of products and processes for certain minimum levels of quality. The goal of the quality control team is to identify products, or the processes used to develop products, that do not meet specified standards of quality. If a problem is identified, the job of the quality control team may involve stopping production temporarily and/or recalling finished products.

The Giving Tree has an effective and environmentally sensitive approach to mold, disease, pests and heavy metal management that emphasizes *prevention, observation, and intervention*. We will employ this strategy to manage these problems in a manner that meets Organic Foods production Act standards, while eliminating the use of organic pesticides to reduce potential hazards for human, wildlife, and ecosystem health.



Preventative Measures & Growing Conditions

The Giving Tree believes the best solution for controlling mold, disease, pests and heavy metals is not having them at all. We believe that a strict policy of prevention is the number one way to control the invasion of any harmful organisms. Many of these problems can be avoided by just maintaining appropriate growing conditions, requiring clean room protocols and through environmental design. This holistic approach can reduce or eliminate the conditions that these pests and contaminants need for sustainment. The Giving Tree believes a successful preventative design includes:

- A. Limiting Hazards from Humans & Equipment
 - B. Isolating plants & mitigation
 - C. Clean Room Requirements
 - D. Cleanliness & Sanitary Practices
 - E. Closed Growing Environment
 - F. Producing products Free of Heavy Metals
 - G. Separation of Cultivation Areas
 - H. Systematic Pruning
 - I. Introduction of Predator Species
 - J. Selecting Pest & Disease Resistant Strains
 - K. Maintaining complete records
- E. Limiting Hazards from Humans & Equipment

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F. Isolating plants & mitigation

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[Redacted]

G. Clean Room Requirements

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[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]



H. Cleanliness & Sanitary Practices

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[Redacted]

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted]

[Redacted]

- [Redacted]

- [Redacted]

- [Redacted]

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- [Redacted]

- [Redacted]



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I. Closed Growing Environment

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J. Separation of Cultivation Areas

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K. Systematic Pruning

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L. Introduction of Predator Species

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M. Selecting Pest & Disease Resistant Strains



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Observation & Laboratory Testing Standards

Close observation is critical to the safety of our products. While The Giving Tree's facility and procedures will be designed in a way to prevent pests and contaminants, examination of our products and environments are essential to detect and quarantine problems early on before they spread. Close observation will limit the need for extreme intervention measures. A successful observation plan includes:

- A. Product safety Standards
 - B. Laboratory Testing Processes
- N. Product safety Standards

There are no federal guidelines defining acceptable levels of chemical or biological residues on dried cannabis flowers. Moreover, there is no state or federal guidelines regarding appropriate analytical methods for detecting these residues in or on cannabis medicines. The Giving Tree sees the lack of official industry requirements and protocols as a unique opportunity to self-impose these standards; to not only represent our industry well but to ensure patient safety and medical efficacy. To meet this challenge, The Giving Tree will leverage their expertise to work towards development of published standards to which all future tests can be compared. Development of these standards will require a disciplined approach based on the scientific method. Only in this manner may an independent database be constructed that is credible. With time, the database will reveal the industry standards that will be relevant and supported by science and therefore much easier to translate and qualify by regulatory agencies.

We will begin our standards development by utilizing existing standards established for other relevant industries. Many, if not all, of the products used by cannabis cultivators to control pests, for example, have existing health effects thresholds. These thresholds were established through years of scientific research aimed at identifying a No Observable Adverse Effects Level (NOAEL), defined as the exposure level at which there is no statistically or biologically significant increase in the frequency or severity of adverse effects. NOAELs are a fundamental step in risk assessment methodologies that ultimately define acceptable levels of these chemicals on or in various foods and personal care products. The Giving Tree sees plans to utilize these health effects thresholds as the basis for our product safety and Laboratory Testing protocols.



We will search for and eliminate even naturally occurring chemicals that have been shown as harmful at certain concentrations to the breeding process. For example, bifenthrin, a pyrethroid insecticide (a synthetic pesticide based on naturally occurring pyrethrins found in the *chrysanthemum* flower), has an established tolerance of 0.05 ppm in or on herbal products such as basil, chamomile, sage, and cilantro. We will maintain analytical procedures capable of detecting bifenthrin at this concentration. As a result we will be able to verify the absence or presence of bifenthrin at a relevant level of concern. Any sample that tests positive for bifenthrin will, by definition, have a concentration above this level of concern and will be prevented from proceeding to packaging and distribution. The Giving Tree will adhere to its strict no pesticides policy.

A similar approach will be used to verify the presence or absence of microbiological residues. The American Herbal Products Association has established maximum mold acceptance guidelines for herbal products. For example, acceptable levels of total yeast and mold on dried herbs is 100,000 CFUs/g. The Giving Tree will compare total yeast and mold results for cured cannabis to this threshold. Only products with yeast and mold levels below this threshold will be considered safe for distribution.

Examples illustrate the approach we will take in interpreting and reporting lab results. While not perfect (the thresholds are not specific to cannabis), this approach at least puts lab results in the context of existing product safety regulations for other industries. Moreover, this approach provides a scientifically defensible basis from which we can begin developing safety standards specifically for the medical cannabis industry.

Although The Giving Tree seeks to lead the way in setting the highest standards for product safety, we will be cognizant of any additional standards set by the department of Health and be in compliance. In the event that our products are not in compliance with the department of Health's standards, we will immediately follow the instructions to get into compliance.

O. Laboratory Testing Processes

Our in house laboratory will define when and where samples should be taken, what tests should be run, and how results should be interpreted. This is the next step in cannabis science and beyond the scope of what is typically offered in the market today.

Laboratory Testing Processes

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Laboratory testing is a critical part of the quality assurance plan for the proposed facility. Testing will be performed by our laboratory and will focus on three basic goals: 1) ensuring product safety, 2) optimizing horticulture practices, and 3) research and development of new products. Ensuring product safety will be the priority for laboratory testing. The protocols for that process are detailed in this Section.

The effectiveness of the product safety protocols outlined here is dependent on the staff members who carry them out on a regular basis. The Giving Tree and our laboratory will, therefore, hold regular training programs to educate staff on the importance of these protocols. Staff will be trained to identify molds, yeasts, pests, and irregular growth patterns. Plants identified by staff as having one or more of these issues will be flagged for further inspection by laboratory personnel. Remediation measures will be taken accordingly.

- a. *Developing a Sampling Strategy*
- b. *Sample Collection*
- c. *Laboratory Analysis Methods*
- d. *Adjusting Testing Processes*
- e. *Reporting Product Safety Information*

Developing a Sampling Strategy

The first step in establishing an integrated monitoring program is to design an overall sampling strategy that meets the needs of the data users and the department of Health and patients. The primary data needs are to a) protect public health, b) optimize cultivation practices, and c) ensure product safety. In order to meet these needs, the sampling design must account for the intrinsic variability of the cultivation facility. A system will be established to continuously monitor the cultivation facility for physical conditions, such as temperature, humidity, air quality and water quality; and to determine the frequency of product testing required to produce reliable and representative results.

Plant material will be sampled throughout the cultivation cycle and prepared for laboratory analysis. The Giving Tree anticipates sampling 8 times during a plant's production cycle. Both targeted and random sample designs will be employed to ensure that all quality control concerns are addressed and lab results are truly representative of real-world conditions. Targeted (i.e., non-random) sampling will be used to screen plants and dried materials that are suspected to have quality control concerns. Ongoing random sampling will be used to provide a statistically unbiased view of facility processes and their relation to finished product quality. QA/QC samples (e.g., duplicates and blanks) will be collected regularly to ensure reliability of laboratory results.

Samples will be collected according to strict predefined protocols. Sample containers will be prepared daily and labeled with unique Sample ID numbers in the on-site laboratory. Laboratory Sample IDs will be linked to the unique plant serial number



detailed under our Supply Chain Tracking System. This linkage will allow for, among other things, recall policies for products that do not meet quality specifications.

Since our on-site lab testing is adjacent to the production, samples can easily be transported. Sample containers will be placed into a cart so that they can be easily moved through the facility during sampling. Lab Technicians and/or trained Horticulturists will take plant samples from the facility according to a detailed daily work list. Samples will be placed in the prepared containers and sealed. Samples will be transported to an on-site laboratory and prepared for analysis.

Sample Collection

Plant material for sample collection will be collected throughout the cultivation cycle as follows:

a. Breeding Testing Process

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b. Cloning Testing Process

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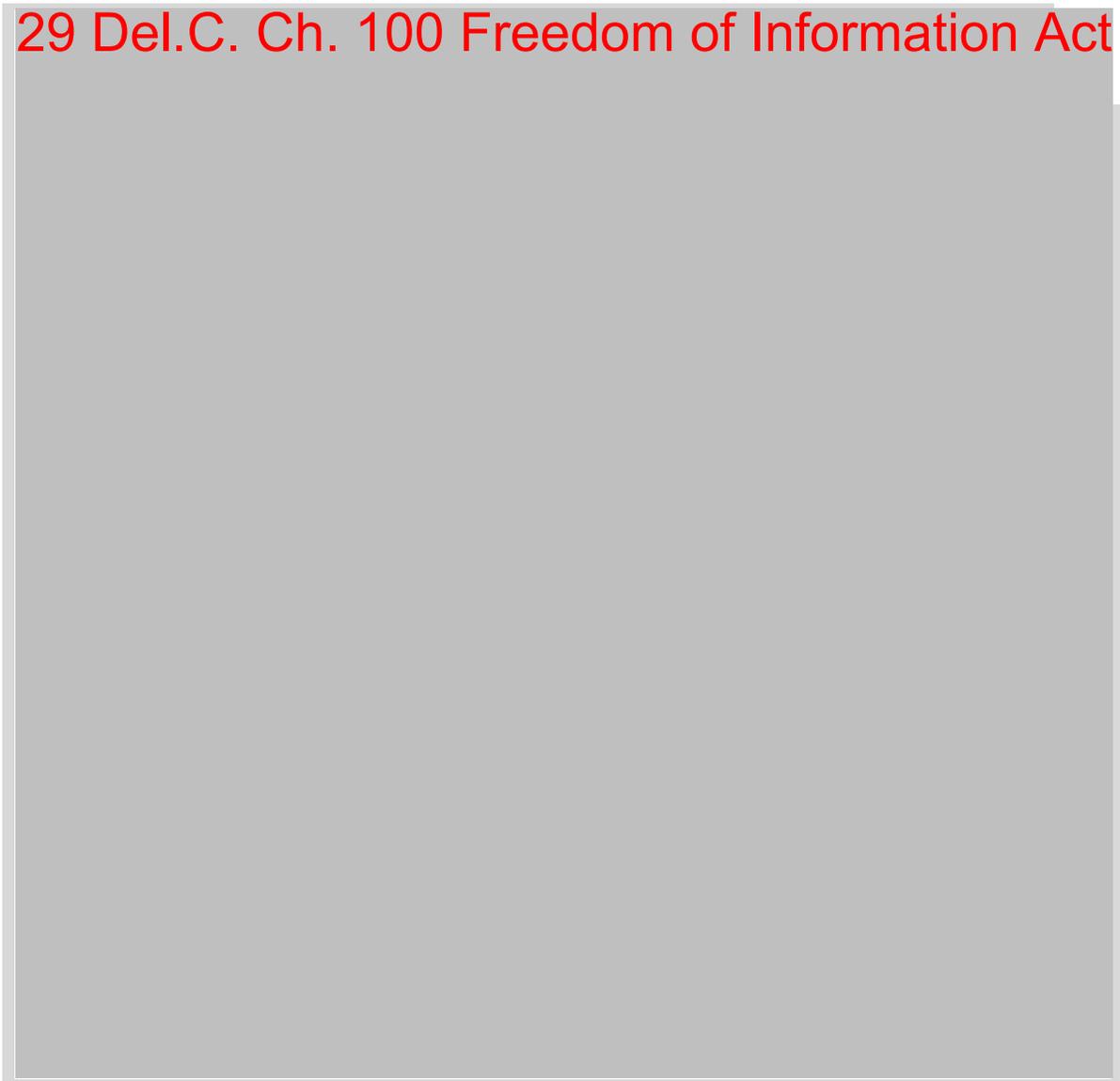
c. Vegetative Testing Process

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Flowering Testing Process

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d. Harvesting & Drying Testing Process

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[Redacted]

e. Trimming Testing Process

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[Redacted]

f. Curing Testing Process

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[Redacted]

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[Redacted]

g. Packaging Testing Process

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[Redacted]

h. Environmental Sampling

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[Redacted]



Laboratory
Analysis Methods

Laboratory Analysis
Methods

Visual Inspection

Moisture Analysis

Gender Testing

Microbiological
Screening

Cannabinoid
Profiling

Chemical Residue
Screening

Environmental
Testing

Laboratory Analysis Methods

Collected samples will be transported to the on laboratory and prepared for analysis.

A hold will be placed on any sampled finished dried material. Finished products will be held on-site until CDX laboratory results are released and the products are determined to be *suitable* for distribution.

Using a performance-based approach to ensure the scientific defensibility of all laboratory results, the collected samples are analyzed for the following battery of tests. This approach involves continuous laboratory evaluation through the use of accuracy-based materials, calibration standards, replicate analyses, and blank samples. These measures are in place to make sure that data produced are satisfactory, consistent, and dependable.

The following laboratory services as part of the quality control program for the proposed facility are planned:

a. Visual Inspection

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b. Moisture Analysis

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c. Gender Testing

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d. Microbiological Screening

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[Redacted]

e. Cannabinoid Profiling

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[Redacted]

f. Chemical Residue Screening

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[Redacted]

g. Environmental Testing

Swab samples will be routinely analyzed by Microbiological Screening for presence of yeast, mold, and bacteria.

Adjusting Testing Processes

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- | [Redacted]
- | [Redacted]
- | [Redacted]

Reporting Product Safety Information

Product safety related results (e.g., lab results, remediation, recalls, etc.) will be reported quarterly to the Department of Health or designee. Reports will be prepared by The Giving Tree and will include raw data, statistical representations, and narratives. The Giving Tree acknowledges that the department of Health may contract with an outside



party to take samples of cannabis for testing purposes, and we will make product sampling readily available for this purpose.

We will maintain a custom tailored laboratory information management system to manage samples from collection through reporting. All samples are given a unique Sample ID that will link to the unique plant serial number used by The Giving Tree's supply chain tracking system. This linkage will allow for quality controls, such as product recalls, to be implemented.

The various data and information generated will be stored remotely on a secure server that will be backed-up regularly. Access to data and information will be restricted to lab personnel and our access to the raw data will be restricted to principals and high-ranking employees will have limited access. Authorized personnel will be provided with a login and password that enables them to view data and reports. In addition, our information management system will have secure access to the raw data so that customized reports can be prepared as needed from within our system.

The Giving Tree will keep detailed records of all intervention measures utilized. Records will indicate where and when treatments occurred along with the name and quantity of the products used. By knowing which contaminants to analyze for we can focus on developing and maintaining analytical methods that can verify the presence or absence of the given chemicals at concentrations below levels of concern.

While The Giving Tree recognizes the sensitive nature of our information and has designed a system to keep data secure and confidential, we also recognize the need for patients and dispensaries to know about the products they are consuming. For all products that are distributed from our facility, the product safety testing results will be clearly labeled on all of our Packaging. A final The Giving Tree seal will be placed on all of our products so customers know the product has not been tampered with or altered.

Intervention Measures

Even though The Giving Tree's facility and operational design is intended to prevent harmful organisms from entering our facility, we realize at some point in time these problems will occur and intervention will become necessary. Our first priority in intervention is to remediate as many compromised plants as possible. This is accomplished while still upholding our product safety testing standards, and if there is ever a decision or tradeoff between patient health and minimizing plant loss, we will always put patient safety first.

In the event of any type of infestation, The Giving Tree will preferentially use organic methods to control an invading population or disease infestation. While our first solution is always preventative, in the event that pests and diseases do occur, this Section describes:



A. General Procedures for Handling Common Pests, Molds & Diseases

The following list includes general procedures for handling the most common pest molds and diseases discussed previously. The general approach to all intervention methods is to use the least toxic (i.e., most organic) approaches first. More aggressive measures will be taken only after initial approaches have proven unsuccessful. Consideration of the cultivation cycle will also be given when deciding on a mitigation approach so that potentially harmful residues have time to degrade to acceptable levels before products are distributed. Finally, we will seek alternative measures to using organic pesticides, fungicides and insecticides to remediate pests and contaminants, and will continuously develop safer and more effective mitigation measures.

Mold, Wilt, Mildew, Rust

We will use Integrated Pest Management (IPM), an effective and environmentally sensitive approach to pest management. IPM programs use current, comprehensive information on the life cycles of pests and their interaction with the environment. This information, in combination with available organic pest control methods, is used to manage pest damage by the most economical means, and with the least possible hazard. Organic, biological controls such as *Bacillus subtilis* and *Trichoderma*, are also very effective in the eradication of fungal infections. Removal of infected plants is preferred to the use of pesticides which are banned by our policy. Any plant material found with an infection or affliction will be quarantined to the quarantine room. The plants will remain in the quarantine room until cured or destroyed.

Bud Rot

Plants that present bud rot, or the affected flowers, will be sent to hold area for DHSS direct disposal

Pests

Removal of affected plants from production area to designated mitigation area through detection and identification of known pests is a priority. Organically acceptable methods include biological and cultural control methods as well as oil or soap sprays.



Conclusion

The Giving Tree is committed to providing patients with medicines that are of known potency and free of chemical and biological contaminants. This commitment is evidenced by the detailed product safety protocols highlighted in this section. We have put together a comprehensive quality assurance plan that goes far and above any seen in the cannabis industry to-date. The Giving Tree is confident that, among other things, our protocols will allow for high quality medical products that are free of molds, bacteria, pests, heavy metals, and harmful pesticides. Furthermore, we are confident in our ability to transform the data generated from laboratory analyses into useful information, which is easily digestible and relevant. Through this process we will be able to inform the department of Health and regulatory agencies on some of the most provocative issues surrounding the medical cannabis industry today: the establishment of best practices and standards.



INVENTORY CONTROL PLAN

This is the written Inventory Control Plan for The Giving Tree. This plan addresses and meets the application requirements of the Act, the Regulations, and the OMM policies and guidelines.

INTRODUCTION

The tracking and control of inventory is essential to all aspects of our venture, from keeping our products and facility secure to fulfilling our compassionate mission. Proper tracking and inventory control also ensures that The Giving Tree **shall at no point possess more than 150 marijuana plants**, and shall not possess more **than 1,500 ounces of usable marijuana** at any one time. While preventing opportunities for diversion, we seek to provide a steady supply of high-quality marijuana to meet the medical needs of our patients. The goal of inventory control is to create a wholly transparent process of production and distribution so that at any time the condition and quantity of every product, regardless of its production stage, is documented. This will allow us to maintain exceptional quality while avoiding over- or underproduction, and it allow us to prevent or promptly recognize any misallocation or theft.

The goals of our inventory policies and procedures are:

- Ensuring product integrity for our patients,
- Preventing internal or external product diversion,
- Complying with Department regulations, and
- Tracking key statistics related to our patients, products, and business.

There are four components to The Giving Tree's comprehensive inventory control system:

- Well-trained and well-supervised staff;
- State-of-the-art electronic inventory tracking;
- Information security; and
- Rigorous operational protocols of management, oversight, and accountability.

Relevant to inventory control is the overall security of our facility and operations. We have described the security systems for our facility and operations in our Security Plan and will not repeat them here. Prepared marijuana that is not under direct supervision will always be secured in safes or vaults. No production of marijuana or marijuana related products will be done without proper supervision. Consequently, marijuana is never accessible unless there is a staff person who is also immediately responsible for its security. This ensures that there are no security gaps between the components of our inventory control system.

Below is a discussion of the four components of our Inventory Control Plan.



PERSONNEL – ROLES AND RESPONSIBILITIES

A. Inventory Control Agent

The Giving Tree designates **Morgan Mumford and consultant Mr. Maciel** as the designated inventory control specialist (“Inventory Control Agent”) to be the dispensary agent responsible for inventory tracking and control. The Inventory Control Agent will have operational oversight and responsibility for The Giving Tree’s inventory control system. He is responsible for seeing that this Inventory Control Plan is implemented and operates as intended. He also bears responsibility for ensuring that the electronic tracking system is operating properly, that daily opening and closing inventories are performed as required, and that manual inventory results tally with electronic records. Further, he is responsible for performing a full audit of the inventory and inventory records at least once every 30 days and whenever discrepancies are detected.

Mr. Mumford knows the different medical effects of a wide variety of strains, the potential medical benefits of other delivery mechanisms and how to recommend the correct dosages for each patient. He also has experience in maintaining a cleanly and sanitary environment for the medication throughout the sales process. Mr. Maciel has been the Master Grower for numerous cultivation centers and was able to build out and create an efficient, effective and safe commercial growing space. He is knowledgeable about creating an ideal environment for plant growth through proper HVAC work, ducting and ventilation and has an ability to maintain a bug/mold/mildew free grow area. Mr. Mumford is able to properly cure finished products to insure a smooth smoke and prevent mold and mildew and experienced in making different types of concentrates.

Mr. Mumford is very experienced with the cultivation and harvesting process and has shown an ability to improve existing processes. The Giving Tree will use all of Mr. Mumford’s abilities to make our cultivation as safe and efficient as possible, while remaining compliant with all regulations. Mr. Mumford and Mrs. Maciel are welcomed and valuable members of The Giving Tree team.

B. Other Staff

All staff involved in the handling of medical marijuana will be trained in the proper inventory control techniques that go with their jobs, and in the use of our electronic tracking system, MJ Freeway. Because of the importance of inventory tracking to our operations, we also anticipate that other management level positions will be involved in inventory tracking: the IT manager will be responsible for the security and functioning of the data management system and the security manager will be responsible for the initiation of security reviews when inventories do not tally.



All aspects of the production process and sale of medical marijuana, including the inventory processes, occur under video surveillance, ensuring employee accountability even if there is a temporary disruption of the inventory tracking process described document.

INVENTORY CONTROL SYSTEM – CAPABILITIES

The foundation of our inventory tracking system is the state-of-the art MJ Freeway software application. This system has extremely flexible inventory capabilities perfectly suited to the complex challenges we face in high-security inventory tracking. A general overview of how our inventory tracking system will operate is sketched in this section.

MJ Freeway

GramTracker™ Elite software includes: Premium Technical Support, POS System, Patient Validation, Integrating Weighing, Inventory Management, Credit and Debit Card Processing support, Online Ordering, Batch Tracking, State Compliant Labeling, State Compliance Reporting & Integration, Locator Site Integration, Product Menu Population, Wholesale Orders & Tracking, Integrated Test Results, Archive History Function, Multi-Location Support, Patient Rewards, Text & Email Marketing (usage fees apply), Time Clock, and Custom Reporting.

GrowTracker™Elite software includes: Premium Technical Support, Integrated Weighing, Plant Management, Nutrient Tracking, Plant Schedules & Stages, Grow Costing, Employee & Task Scheduling (Q4 2013), Batch Tracking, State Compliant Labeling, State Compliance Reporting & Integration. Quickbooks Integration software includes: Provides .iff export of data stored in MJ Freeway directly to Quickbooks (server Quickbooks only). **OPTIONAL:** All data can be exported out of MJ Freeway via CSV file format and imported where needed. All modules are fully and seamlessly integrated maintaining continuity over all areas of operation.



Thursday, March 20, 2014

Ms. Kathy McGuiness
Owner
First State Compassion Center

Reference: Compliance Letter of Intent

Dear Ms. McGuiness,

MJ Freeway has created a fully integrated Point of Sale (POS), Inventory Control, Cultivation Management and Manufacturing System precisely designed to serve state-approved Marijuana businesses.

We have what we and many others believe to be the most advanced and sophisticated complete software solution for the adult-use marijuana industry. Our confidence in our product is buttressed by ample testimonials from customers.

This letter will confirm MJ Freeway's willingness and intent to enter into a formal agreement with First State Compassion Center to provide software solutions guaranteed to meet published State of Delaware reporting, regulation, and compliance guidelines for marijuana producers, processors and retailers in the event that your application is viewed favorably and you emerge with the requisite authorized license.

We appreciate your confidence in our company and services and wish you well in your efforts to secure a license. MJ Freeway is ready to enter into a services agreement with you immediately thereafter on terms already discussed.

Sincerely yours,

29 Del.C. Ch. 100 Freedom of Information Act

Amy A Poinsett
Chief Executive Officer

MJ Freeway
sales@mjfreeway.com • www.mjfreeway.com • 888-932-6537 x2

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Every medical marijuana plant in our facility will be tagged with a unique (sequen identification number. This number is visibly displayed and also encoded in an electronically readable format (a bar code). The inventory control tags will be cre using a thermal bar code printing technology.

All information and history pertaining to a plant is associated with this number and every package containing marijuana from this plant and every processed product made from this plant bears a similar, unique control number that incorporates or cross-references the number of the plant. This gives us access to the complete manufacturing history of any item that is or ever has been in our facility. This includes information such as:

- Strain, batch, tray number, and birth date of any plant,
- The cloning mother a cutting was taken from,
- Details of its cultivation history (if, for example, there were any problems and how they were remedied),
- The results of all of the quality control tests,
- Its genetic history and medicinal variety,
- The amount of dry yield that can be expected from the plant.

Eventually it will also include such information as:

- The amount actually harvested from the plant, and
- How and why it was disposed of, and on what date.

When the marijuana is harvested, processed, and packaged, this number travels with it, even as each individual product or package is flagged with its own unique identification number. Any plant, cutting, processed product, or container thus bears a control number that makes it possible to determine the complete manufacturing history of the associated item. Our inventory tracking software can use this information to provide at any time an accurate snapshot of current production conditions: how many plants are being cultivated and the stage of each plant in the supply chain process. This, in turn, enables us to predict and control production outcomes, avoiding overproduction, which leads to degradation and security risks, and underproduction, which leaves patients with suboptimal care.

Real-time information about the processing, packaging, sale, return, and disposal of inventory is entered into this system, creating a comprehensive data management system that documents every aspect of our operation:

- Allowing the Dispensary to know what strains and quantities are or soon will be available,
- Creating timely alerts on low inventory, and
- Creating timely warnings of possible overproduction.



It will also keep track of:

- Recalled and returned marijuana,
- Marijuana designated for disposal, and
- Marijuana already disposed of.

At any given time, we will be able to access information on:

- Any plant that was produced at our facility,
- Any plant currently under cultivation,
- The future production forecast,
- The products in transit,
- Current inventory levels at our dispensary,
- The amount of medicinal marijuana sold, and
- What strains and quantities are currently in the possession of registered patients?

To summarize: at any time we can generate an accurate snapshot of current medical marijuana production and holdings, including how many plants are being cultivated, the stage of each plant in the supply chain process, and the number and kind of products ready for sale. Real-time up-dates about the acquisition, sale, delivery, return, and disposal of inventory are entered into this system, providing comprehensive data management documenting every aspect of our operation. This enables us to build routine inventory control and documentation into the production process itself, requiring verified inventory updates at each stage of the production process.

INFORMATION SECURITY

We will limit access to this network by using unique user passwords and by restricting IP addresses and MAC addresses to specific computers. The use of third party email, web, and data servers will be avoided. We will provide training on user procedures. Our IT Director will manage our inventory recordkeeping and software system. All data and information will be secured and encrypted and backed up automatically every night, not only to a private server on site, but also to a secure, off-site server location, thus safeguarding our data against disaster. For data backup we will be using a Mac Time-Capsule on site and encrypted FTP for transfer to secure off-site storage.



OPERATIONAL PROCEDURES

A. General Inventory Guidelines

Appropriate managers will be responsible for performing inventory, upon delivery, of all newly purchased non-marijuana materials (growth supplies, dispensary supplies, and raw materials). They will provide their written inventory results to our accountants for reconciliation with purchase orders.

Inventory of marijuana will be precise, down to 1/10th of a gram for some purposes. We will use precision scales that are calibrated daily. All weights must fall within specific tolerance ranges to ensure there is no inventory shrinkage:

- one gram must weigh 1.03 grams +/- .02 grams
- each 1/8 oz. must weigh 3.55 grams +/- 0.2 grams
- each oz. must weigh 28.55 grams +/- 0.2 grams

The inventory tracking system creates an alert if weights fall outside of specified tolerance ranges.

Inventory of marijuana will cover seedlings, mature plants, packaged marijuana, food products, drying and curing marijuana, and items in quarantine or awaiting disposal. This ensures that all products, byproducts, and discarded items in our operations are accounted for.

Any discrepancies between actual and recorded inventory will trigger an audit of inventory holdings and inventory records by the Inventory Control Agent sufficient to identify the problem. Confirmed inventory shrinkage will trigger a review of security and surveillance data and the implementation of appropriate corrective measures. Law enforcement authorities will be notified immediately if the Inventory Control Agent ascertains that there has indeed been loss, theft, improper diversion, or any other criminal activity.

The records of all inventories will show:

- The time and date of the inventory,
- The inventory results,
- The names and registry identification numbers of the employees performing the inventory, and
- Their signatures.

The electronic record will be maintained in our database for a minimum of five years or as required by then regulations regarding record keeping. A hard-copy printout of the inventory results will be signed by the employee(s) who have performed the



inventory and kept on file (as a paper hard copy or in scanned facsimile) also for at least five years or as required by then regulations regarding record keeping.

B. Tracking and Recordkeeping of Daily Operations

Daily operations are defined by critical transitions: opening for business, harvesting or packaging plants, acquiring, selling, delivering, or disposing of inventory, closing for the day, etc. The inventory tracking system will be designed to enable us to document inventory status/flow for each critical transition event:

- Beginning inventory,
- Acquisitions,
- Harvest,
- Sales,
- Disbursements,
- Deliveries
- Returns,
- Disposals, and
- Closing inventory.

At each step, those involved in handling the inventory must identify themselves to the system with a secure authentication procedure (e.g., a unique employee password or electronically-readable ID). The type of transition event will be indicated and electronic reading of its tracking number identifies the inventory. The system automatically aggregates inventory by the types of transitions through which it passes (all sales, all deliveries, etc.) and by time of day (e.g., the disposition of any and every product at closing time: being harvested, in transit, sold, etc.). Where applicable (e.g., whenever loose inventory is being handled), authorized personnel will determine the weight of the product, entering it into the system. In this way the flow of inventory through our facility is fully documented in real time.

We anticipate that electronic reading eventually will generate all of our data, including weight. This will be done with software that interfaces with digital scales. Furthermore, we aim to make our tracking system self-monitoring so that discrepant, invalid, or missing data would generate an automatic alert.

C. Opening and Closing Inventories

A comprehensive inventory of all medical marijuana, whether it is still growing or already prepared, will be done twice daily: before commencement and after close of daily operations. All marijuana and items containing marijuana are counted, weighed, or both.



These inventory results will be submitted to the Inventory Control Agent for reconciliation with the inventory data generated the previous evening or in the operations of the day after being closed out. Any discrepancies will trigger an inventory audit by the Inventory Control Agent and, if confirmed, a review of electronic security and surveillance data. Law enforcement authorities will be notified immediately if the Inventory Control Agent ascertains that there has indeed been loss, theft, improper diversion, or any other criminal activity.

D. Mandated Monthly Inventories

At intervals not exceeding 30 days, the Inventory Control Agent will conduct and document an audit of the inventory that is accounted for according to generally accepted accounting principles. Any unexplained shrinkage will be documented and trigger a review of electronic security and surveillance data. When The Giving Tree determines where the shrinkage occurred, appropriate corrective measures will be implemented. Law enforcement authorities will be notified immediately if the Inventory Control Agent ascertains that there has indeed been loss, theft, improper diversion, or any other criminal activity.

E. Cultivation

The details of our cultivation procedures may evolve as we move forward, but we initially plan to employ the following procedures for cultivating medical marijuana:

1. Cultivation Targets

The Giving Tree will gear production to anticipated needs and demand. We will use patient self-assessment records to determine which strains, strengths, and dosages are effective for each patient. This helps us ascertain what combinations will be most suitable for patients with specific types of diseases and conditions. Given our patient base, this enables us to forecast demand for each variety we produce and avoid overproduction and wastage.

The Giving Tree will employ a “perpetual harvest” growing method that provides small harvests. Based on projectable plant yields and actual growing conditions, harvest projections will be conducted at regular intervals. Our computerized system will then estimate the dry yield of plants currently under cultivation.

2. Planting

Crop plants are grown from seeds or cuttings. Seeds and cuttings are normally taken from mother plants. Our original stock of mother plants will come from Department-authorized external sources. Mother plants are kept in a separate grow room or area from crop plants. They are recorded in the inventory with their



unique identification numbers as mother plants. These plants remain in inventory as long as they remain useful. Then they are used for making processed marijuana products or destroyed under the direction and approval of DHSS

As soon as a cuttings or seed is planted in the cultivation room to become a crop plant, it receives a unique number that identifies it with its source (mother plant) and birth date. Crop plants are grown in trays, usually of 8 plants each. Each crop plant has a unique tray assignment, batch number, and strain type. The plants remain in cultivation inventory until the whole tray is harvested at once.

3. Harvesting

At maturity, the marijuana is removed from the plants, dried, cured, then weighed and entered into inventory. Trimmings may be separated for use in the processing of marijuana products such as concentrates or designated for disposal. The residual plant stalk (possibly with the trimmings) is destroyed after the Inventory Control Agent verifies that all usable marijuana has been removed. The destruction of the residual plant material will follow the same rules as the destruction of medically unusable marijuana (see below).

4. Recordkeeping

For each batch of marijuana cultivated, the bar coding inventory tracking system will document:

- Batch, strain and amounts of marijuana from each plant
- Patients' card registration numbers
- To whom it was dispensed
- Dates of harvest, storage, and packaging of usable product.

All harvested usable marijuana should be traceable to a specific plant. Every plant should have an accountability of how much marijuana it produced and the end result of that production (distributed to specific patient, stored in retail area, used for testing, destroyed, etc.).

Additionally each document will list:

- Whether the batch originated from seeds or cuttings;
- The origin and strain of the seeds or cuttings planted;
- The number of seeds or cuttings planted;
- The number of female plants grown to maturity;
- Harvest information:
 - Date of harvest,
 - Weight of the usable dry yield,



- The name and registry identification number of the dispensary agent responsible for the harvest;
- Disposal information:
 - Description of and reason for the marijuana being disposed of, including, where applicable, the number of male, failed, contaminated, infested, or otherwise unusable plants,
 - Date of disposal,
 - Method of disposal, and
 - The name and registry identification number of the dispensary agent responsible for the disposal.

A. Packaging and Labeling

1. Packaging with Interim Labeling

Marijuana and trimmings are placed in tamper-evident containers, each with its own unique control number that incorporates or cross-references the control number(s) of the marijuana. The Inventory Control Agent re-weighs the marijuana to verify the weight. The verified weight is entered into the inventory tracking database and the containers are labeled with the:

- Control numbers,
- Strain,
- Weight, and
- Harvest date.

Packaged marijuana is then placed in storage safes awaiting further processing or sale.

2. Labeling for External Dispensing

Before marijuana that is intended for external distribution can be dispensed, labeling will be updated to include specific information about the transaction, as required by the Department:

- When the dispensary provides medical marijuana to a qualifying patient or a designated caregiver the label records:
 - Name of the compassion center (The Giving Tree)
 - The dispensary's registry identification number,
 - The amount, strain, control and batch number of medical marijuana,
 - The statement “this product is for medical use only, not for resale”;
 - A statement that the medical marijuana is free of contaminants;
 - Details indicating the levels of active ingredients in the marijuana, as confirmed by testing.



- A batch identified by number or barcode and traceable through inventory controls
- The following statement:

DEPARTMENT OF HEALTH SERVICES'
WARNING: Marijuana use can be addictive and can impair an individual's ability to drive a motor vehicle or operate heavy machinery. Marijuana smoke contains carcinogens and can lead to an increased risk for cancer, tachycardia, hypertension, heart attack, and lung infection. KEEP MARIJUANA OUT OF REACH OF CHILDREN AND ANY UNAUTHORIZED INDIVIDUAL

- Whether the medical marijuana was cultivated by the dispensary (The Companionate Care Center is the only source for growing and dispensing Medical Marijuana per the regulations.),
- The date of manufacture or harvest, and date of sale,
- The registry identification number of the qualifying patient.

Written instructions that the marijuana shall remain in this container at all times except while being consumed or prepared for consumption will be issued with the dispensed marijuana.

B. Processing

Our goal is to utilize every aspect of the physical plant to produce different forms of medicine for our patients. We may therefore use marijuana trimmings, by-products, and marijuana that are not suitable for medicinal use without further processing for the production of other medicinal products. This is done by extracting the medicinally active ingredients and using the extract to create concentrates or infuse other products.

Some of the products we may produce are detailed in our Operation Plan.

C. Dispensing to Patients

1. Providing Medical Marijuana to Patients or Caregivers

Before marijuana is dispensed to a designated caregiver or qualifying patient, a dispensary agent will access the registry verification system and determine for the registered qualifying patient for whom the marijuana is intended and any registered designated caregiver transporting the marijuana to the patient, that:



- The registry identification card presented to the registered nonprofit medical marijuana dispensary is valid,
- Each person presenting a registry identification card is the person identified on the registry identification card presented to the nonprofit medical marijuana dispensary agent,
- The amount to be dispensed would not cause the registered qualifying patient to **exceed the limit on obtaining no more than three ounces of marijuana during any fourteen-day period and in possession of no more than six ounces at any given time.**

After making these required determinations, but before dispensing marijuana to a qualifying patient or designated caregiver on a registered qualifying patient's behalf, the dispensary agent will enter the following information into the verification system:

- How much marijuana is being dispensed to the registered qualifying patient,
- Whether it was dispensed directly to the registered qualifying patient or to the registered qualifying patient's registered designated caregiver,
- The date and time the marijuana was dispensed, and
- The registry identification card number of the nonprofit medical marijuana dispensary and of the nonprofit medical marijuana dispensary agent who dispensed the marijuana.

The dispensary agent will enter the same information into our own inventory-tracking database along with the control numbers of the products purchased.

D. Deliveries

The Giving Tree plans to offer delivery service as a convenience to its patients as allowable by the Department and the regulations. Our Security Consultants have devised a specific delivery system for The Giving Tree. Please see our Security Plan.

Whenever patients do not physically receive their medicine at the dispensary, the “trip-ticket” associated with the purchase remains open until delivery is confirmed and the confirmation number is entered into the point-of-sale record along with the time of the delivery and the name and identification number of the delivery agent.

E. Quality Assurance/Control and Chemical Analysis of Active Ingredients

As part of its quality control plan, The Giving Tree will employ rigorous methods to prevent pest infestation and adulteration of plants with mold, bacteria, or other contaminants.

We will routinely screen for contaminants and pests and immediately quarantine any affected batches. Grow rooms and processing rooms will be hygienic facilities.



Employees will adhere to sanitation standards for medical laboratories. Employee handling plants will be clean-scrubbed and dressed in appropriate attire. Precise climate control will minimize the risk of plant disease or insect infestation. Creating an environmentally friendly and user-safe product means avoiding the use of chemical fertilizers and pesticides. Using preventive measures and growing conditions can best achieve this:

- Limiting amount of human traffic and equipment brought into the facility that can be used as vehicles for pests and contaminants;
- Isolation of compromised plants and quarantining them in designated mitigation area;
- Abidance with Giving Trees clean room policies
- Adherence to site cleanliness and sanitary practices;
- Environmental control to minimize introduction and growth of pests through a closed growing environment;
- Production of products free of heavy metals;
- Separation of cultivation areas to prevent cross-contamination;
- Systematic pruning to prevent accumulation of decaying plant matter that could provide favorable growth conditions for pests;
- Introduction of predator species that naturally prey on unwanted pests; and
- Selecting pest resistant strains.

There are also remediation methods that can avoid the need for harsh pesticides:

- Remediation methods that include eradicating mold, bacteria, pests and diseases;
- Ultraviolet disinfection to control biological contaminants; and
- Alternative methods of remediation including CO₂ overdose and Radionics.

In short, we will be using non-pesticide methods of pest control such as natural predators, organic miticides, and CO₂ enrichment. We will keep strict records of the cultivation history of every batch, including any pest or disease control measures taken.

Every batch of medical marijuana is tested for pests, molds, and other contaminants. We will also analyze its cannabinoid profile and determine its potency. Any medical marijuana found to be unusable, whether because of compromised quality, excess THC, or any other reason; will be segregated for disposal, where this is possible, for alternate use in processing marijuana-infused products.

The dispensary will maintain these quality control records in its secure database for five years and make them available for review by the Department on request. We will also provide the Department on request with samples of the dispensary's medical marijuana inventory sufficient in quantities to enable the Department to conduct its own analyses.



F. Return and Recall

Marijuana may be returned to our facility for several reasons once approved by the Department:

- It is no longer needed by the patient or the patient's registration has expired or been revoked,
- It is found to be defective by the patient, or
- It has been recalled by the dispensary due to quality concerns with the associated batch.

Product No Longer Needed or No Longer Licit.

If marijuana is returned because it is no longer needed or the patient's registration expires or is revoked, then pending verification that it was in fact dispensed by our facility, the patient will receive a receipt indicating the type, date, and amount of returned marijuana.

Product Returned as Unsatisfactory.

The Giving Tree believes that a customer-friendly return policy is essential to all aspects of our operation. We would like to be made aware as soon as possible of any product safety issues that have escaped our screening process so that we can promptly analyze and correct the problem. An unaccepting attitude toward product returns will only discourage reporting of quality concerns and encourage diversion for monetary gain. We will serve our mission better by supporting the return of products that patients find unsatisfactory. Our goal is to develop a policy that neither discourages nor incentivizes returns.

Any products returned for quality reasons are weighed and sent for inspection and analysis. If evidence of pests, contamination, or other defects is found, the inventory tracking system will identify all products derived from the same plant or batch (regardless whether they are still in our dispensary or have been dispensed to patients, caregivers, or other dispensaries), allowing us to do wider testing and remediate, protect, or dispose of inventory as needed and recall products when necessary.

Patients will be informed of our return policies and rules both verbally and in writing. We will make sure patients understand that

- To return products, they must first make, in advance, an appointment specifically for this purpose,
- Marijuana damaged by improper storage by the patient may be returned, but shall not be replaced,



- The marijuana must have in fact been purchased at our facility and have be most recent purchase made by the patient or by the patient’s designated car on the patient’s behalf.

We will also make sure they understand that under no circumstances may they exceed their 14-day limit of 3 ounces per person. Most importantly, we strictly enforce a fraudulent return policy by informing patients that attempting to return marijuana that was not in fact purchased at our dispensary will result in a denial of further purchasing privileges at our dispensary.

G. Disposal and Destruction

Marijuana may be destroyed under the following circumstances:

- If it goes unused, as when a variety is produced in a quantity that exceeds actual patient demand, and it is also not wanted by other dispensaries,
- If it is found by internal quality control assessments to be infected or contaminated or fails to meet other quality control standards,
- If it is recalled due to batch-related quality control concerns,
- If it is returned by a qualified patient or primary caregiver because
 - It was found to be defective,
 - If it is no longer needed by the qualifying registered patient,
 - The patient’s qualifying registration expires or is revoked, or

Procedures for Destroying Marijuana.

The Giving Tree will work with DHSS to develop policies and procedures for the lawful destruction of marijuana. Our first choice is to turn medically unusable marijuana over to DHSS for destruction. We would arrange for them to take possession of it on certain specially or regularly arranged days.

Our second choice is to process defective medical marijuana and plant by-products in-house by degrading then into a wholly unusable form: grinding and soiling medical marijuana waste with non-consumable solid wastes. In this form, medical marijuana waste can be disposed of at a State approved waste facility.

Whenever marijuana is turned over to DHSS for destruction, an inventory record is generated indicating:

- The control numbers associated with the marijuana turned over for destruction,
- The reason it was turned over for destruction,
- The names and signatures of the DHSS officials receiving the marijuana,
- The amount turned over, and
- The date and time it was turned over.



The Inventory Control Agent must be present for the inventory transfer and must, along with at least one other employee acting as witness, sign a printed record of inventory transfer, which will be kept as a hard copy or electronically as a scanned facsimile for not less than five years.

Whenever marijuana is destroyed on site an inventory record is generated indicating:

- The control numbers associated with the marijuana destroyed,
- The reason it was destroyed,
- The manner in which it was destroyed,
- The amount destroyed,
- The date and time it was destroyed, and
- Those present during the destruction.

The Inventory Control Agent must be present for all on-site destruction and must, along with at least one other employee acting as witness, sign a printed record of disposal, which will be kept as a hard copy or electronically as a scanned facsimile for not less than five years.

CONCLUSION

We have described the critical components of our Inventory Control System. We have identified the staffing positions involved in the oversight and execution of all aspects of inventory control and the key elements in the quality control of our human resources: training, oversight, and accountability. We have detailed the technical capabilities and security safeguards of our electronic tracking and data management systems. For any job responsibility the performance of which involves handling marijuana, we have described how inventory-tracking procedures are integrated into its execution. Our operational procedures are therefore fully transparent and accountable. The reliability of this system of built-in controls is checked twice daily by comprehensive inventories, and all of these production operations and control procedures occur under secure video surveillance.

However, we have not yet said anything about the most important oversight of all, which is the oversight of the State of Delaware over our business operations. The Giving Tree understands that we are responsible for facilitating this oversight by documenting or being able to document on demand proof that we are in full compliance with the laws of the State of Delaware and the rules and regulations of the Department and any other applicable Agencies.

We believe the Inventory Control Plan described here meets or exceeds the legal and regulatory requirements of the State and all relevant Agencies, including the reporting requirements. The system of operational procedures we have described generates real-time records of all production activities. These records are immediately cached in our secure databases. Their reliability is verified by a comprehensive inventory performed



twice daily. The results of these inventories are added to our secure data cache and reconciled with the operationally generated data. Audits and security reviews are documented in the system. This database is comprehensive. It will be fully auditable and searchable. Data will be preserved for five years and made available to State authorities at any time



**GROWING STRATEGY:
EMPLOYEE CULTIVATION
HANDBOOK SUPPLEMENT**



To ensure that our inventory tracking procedures are effectively implemented, we | it is essential for all our staff to have an understanding of the process that is being tracked. Therefore, we are developing an Employee Cultivation Handbook Supplement that provides an overview of the cultivation and production process. We attach below a draft version of the Employee Handbook: Overview of the Growing Process for Employees.

OVERVIEW OF THE GROWING PROCESS

(CONFIDENTIAL)

Cultivation Management

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Ø See Appendix H – Delaware Water Quality Report

Cultivation Process

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² These drawings are for illustration purposes only and may not reflect the final process used for our cultivation. We will comply with Department's Rules. Composting permitted under such rules.



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Breeding Process

STEP : A1

* Seeds & Cloning Mother will also be packaged and sold.

⊠ = Starting Point → = Possible Flows ≫ = Supply Chain Flows



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Cloning Process

STEP : A2

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Vegetation Process

STEP : A3

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Flowering Process **STEP : A4**

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Harvesting & Drying Process

STEP : A5

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Trimming Process

STEP : A6

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Curing Process

STEP : A7

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Culvitation's Packaging Process

STEP : A8

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Distrubution Process

STEP : A9

 = Starting Point  = Possible Flows  = Supply Chain Flows



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Extraction Process

STEP : B

 - Starting Point  - Possible Flows  - Supply Chain Flows



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**OUTREACH PLANS:
PATIENT EDUCATION PLAN**



OUTREACH

The Giving Tree is committed to strong public engagement and outreach to the community. Our community outreach has three goals: (i) to establish a process by which the community can express itself regarding the project; (ii) to inform the community about medical cannabis issues; and (iii) to ensure that our approach genuinely reflects the community's needs. To reach our goals, we anticipate doing one or more of the following, depending on input at various stages of the project:

- Identifying a broad cross-section of community-based organizations and community leaders, including those representing indigent and traditionally underserved and underrepresented residents, to learn how residents and stakeholders can best receive useful information that enables them to participate meaningfully.
- Identifying and visiting civic, senior, and veteran organizations, health care support groups, and community meetings to introduce our nonprofit organization, our mission, and our vision for the patient care center. We believe this type of outreach establishes our legitimacy with the community and our vested interest in its welfare. We will listen receptively and respond to any concerns about the project.

We are committed to engaging our patient and residential communities on an ongoing basis. We will partner with local community organizations to solicit volunteers for these positions.

1. Affordability of Medical Marijuana

The Giving Tree has multiple initiatives to increase the availability of medical marijuana on an affordable basis to patients enrolled in Medicaid or Social Security Disability Insurance.

a. Qualified refund plan

If and when the federal government allows for the explicit use of Medicaid or Social Security Disability Insurance, The Giving Tree will distribute information on procedures for obtaining medical marijuana using supplemental income. As directed by DHSS.

The Giving Tree will then offer a refund on a portion of the medical marijuana purchased for qualifying patients on Medicaid or Social Security Disability Insurance.

b. Discounted Medicine Program

For patients that are receiving Medicaid or Social Security Disability Insurance, The Giving Tree will be offering discounted medical marijuana offerings.



- Patients must be able to prove that they are receiving Medicaid or S Security Disability Insurance verified by DHSS. Patients must notify writing to The Giving Tree of any changes in their supplemental coverage to remain qualified for the Discounted Medicine Program.

Outreach Strategies

We will create public awareness in several ways:

1. *Public Education*

We can create public awareness of our dispensary through our community outreach and education programs. By offering free workshops and seminars to potential patients and other healthcare providers on topics related to medical cannabis and the conditions for which it is typically recommended, as well as on legal issues surrounding medical cannabis, we make the existence of our organization known and attract members by positioning ourselves in the public mind as ambassadors of a socially responsible provider.

2. *Developing Provider Alliances*

An important element of our patient-centered approach is the help we will offer patients in finding providers and services to handle other aspects of their care and in coordinating their care across their many different providers. To be able to do this, we must first build alliances with these other providers and organizations. However, alliances are two-way streets and will result in our getting referrals from them as well. A key part of this outreach initiative will be educating alliance partners on the benefits and legalities of medical cannabis, and on the processes involved in referring people for medical cannabis use. Hosting educational forums for other providers will therefore be a critical element in our business approach. Building strong alliances with other health care providers, community health clinics, hospices, community service organization, patient advocacy groups, support groups, AIDS organizations, senior homes, and referral networks will create a strong and lasting source of patient referrals. At the same time, it will give us greater resources to fulfill our own patient-centered mission, which includes helping patients find appropriate providers for services we do not offer and helping them coordinate their care across providers. Being known in the patient community as a wellness center with especially strong networking and referral resources will itself be a draw to patients with complex medical conditions.

3. *Industry Leadership and Sponsorships*



We will keep our corporate “brand” visible through sponsorships of community and industry causes and through industry activism that reflects a community-focused public health agenda and its emphasis on compassion and social justice.

4. *Public Relations*

Carefully managed messaging and coverage in local media can be a very effective means to create public awareness.

5. *Word of Mouth*

In the medical cannabis industry, satisfied patients and their word of mouth is perhaps the most powerful generator of customer satisfaction. Many dispensaries report that “friend” is the most common answer reported on new patient intake forms when patients are asked to indicate how they heard about a dispensary. We do not intend to enlist or to offer any special incentives to do this. We will not need to. The high quality of supportive patient-centered care we offer as part of our basic mission will be incentive enough. We intend to operate as a “community center” for those suffering from serious medical conditions— what the literature on patient-centered care sometimes refers to as a “medical home-away-from-home” where patients can interact supportively with one another.

Community and Economic Development

1. *Commitment to Local Hiring and Spending*

We are committed to making our project a source of economic stimulus for Delaware. From initial build-out of the facility to the implementation of our community development initiatives, we intend to contract, buy, and hire locally, taking advantage of local recruitment resources to offer employment to displaced local workers who are willing to be retrained.

We believe that Phase I day-to-day operations will add full-time employment opportunities to the local economy. The dispensary will contribute directly to the revitalization of its immediate neighborhood.

As part of our community development mission, we are committed to maximizing the benefits our dispensary will have on the state economy. In making ongoing capital investments in new horticultural technologies and green energy sources we will create a stream of new one-time stimulus effects.



In implementing our Community Benefits programs, we will also attempt to ensure that Delaware reaps the benefits of direct expenditures and their multiplied effect. We will seek to employ local residents. Whenever possible we will use our local human resources and local vendors to implement our charitable programs.

2. *Indigent/Compassion Care Program*

In order to bring patient-centered care to underserved populations and effectively address the health disparities affecting them, The Giving Tree will have to support, as a fundamental part of its charitable mission, aggressive community outreach services that overcome each of these barriers:

- Providing free patient education services in a variety of formats, media, and languages;
- Providing free or sliding-scale products and services to indigent or low-income patients;
- Hiring a diverse staff and training them to be comfortable with diversity and competent in minority patients' languages and cultures; and

Finally, by building alliances with other health-related organizations in Delaware, such as community health clinics, community service organizations, patient groups, and providers, we can share our strength, coordinate initiatives, and have a collective impact on public health for which Delaware can be proud.

We anticipate that our compassion care program will require further refinement, but we are committed to making our program be the model program in the country.

3. *Community Benefits Plan*

The Giving Tree believes that it can and should have a critical role in the delivery of medical marijuana healthcare in Delaware. As a nonprofit, we also believe that we have an important fiduciary obligation to be a “good neighbor” and provide benefits to our community as part of our healthcare mission. Therefore, we view our Community Benefits Plan as a blueprint for how we plan to accomplish our Mission.

In developing our Community Benefits Plan, the following core principles that will guide us:

- The Giving Tree's Board of Directors commits to make public a Community Benefits Mission Statement, putting forth our formal



commitment to provide resources to and support the implementation of a regular Community Benefits Plan.

- We will support its Community Benefits Plan at the highest level of our organization. Our Board and senior management will be responsible for overseeing the development and implementation of the Community Benefits Plan, including designating the programs or activities to be included in the plan, allocating the resources, and ensuring its regular evaluation.
- We will ensure regular involvement of the community, including that of the representatives of the targeted underserved populations, in the planning and implementation of the Community Benefits Plan.
- To develop our Mission Statement and Community Benefits Plan, we will conduct a Community Health Needs Assessment, a comprehensive review of unmet health needs of the community by analyzing community input, available public health data and an inventory of existing programs.
- We will include in our Community Benefits Plan the Target Populations we wish to support, specific programs or activities that attend to the needs identified in the Community Health Needs Assessment and, measurable short and long-term goals for each program or activity.

The Giving Tree plans to include in its Community Benefits Plan, a grant program. We anticipate awarding funding annually through our grant program. While we recognize that our program will require refinement, we anticipate awarding grants to organizations with a 501(c) 3 status.

4. *Good Neighbor*

The Giving Tree seeks to be an asset and a beneficial resource for the surrounding community. As a good neighbor, we will seek neighborhood and other necessary input through every phase of our operation, beginning with the build out and construction phase. We will meet with representatives from the Building Department, Fire Marshal's Office, Parking & Traffic Enforcement, Public Works Agency, and the Police Department to evaluate and abate any potential public safety/nuisance violations.

We also believe that being a good neighbor requires that we work to improve the neighborhood. Some of the public improvements we plan to address are:

- Access Improvements



- Landscape Improvements
- Sidewalk Improvements
- Lighting Improvements
- Code Compliance

Finally, we will take all efforts to mitigate noise, odor, and pollution/waste, and will address nuisances, including limiting foot and car traffic.



PATIENT AND EDUCATION SUPPORT PLAN

This is the written Patient and Education Support Plan for The Giving Tree (“We”, “Our”, “Applicant”). This plan addresses and meets the application requirements of to the Act, the Regulations, and the OMM policies and guidelines.

INTRODUCTION

A. Overview

The Giving Tree’s staff and leadership are committed to providing patients accurate information regarding the health effects of medical marijuana. We believe that patient education and support are essential to achieving overall patient wellness. With our well-designed and well-delivered education and support program, each qualifying patient and caregiver will participate in our orientation process and receive a copy of our Patient Handbook.

1. *Orientation*

Each qualifying patient and their registered caregiver will be required to go through an orientation with one of our trained professional staff members. The orientation includes:

- Meeting with one of our professionals to register for the program;
- Obtaining registry
- Signing a medical records release form for the recommending physician;
- Describing products and services available; and
- Receiving a new Patient Handbook.

2. *The new Patient Handbook includes:*

- Patient Guidelines to Stay Safe and Health
- Patients’ Rights
- Medical Marijuana Law Overview
- Services
- Guide to Using Marijuana
- Sativa vs. Indica
- Applications For Cannabis and Cannabinoids



- Ailment Specific Strains
- Substance Use Prevention
- References and Resources

B. Research and Medicinal Effects Tracking

Research and medicinal effects tracking are critical components of our educational approach. As part of our education plan, we are developing a tool kit for our patients and caregivers to document pain, cachexia or wasting syndrome, nausea, seizures, muscle spasms, or agitation. The tool kit will include:

- A log book that patients will need to maintain track the use and effects of specific medical marijuana strains and products;
- Forms to rate the scale of pain, cachexia or wasting syndrome, nausea, seizures, muscles spasms, and agitation; and
- Guidelines for the patient's self-assessment or, if applicable, assessment of our patients by the caregiver.

The goal of our research is two-fold. First, we want to ensure that our role in providing medical marijuana is consistent with accepted medical practices, keeping in mind that our staff should not give medical advice. Second, we want to make sure that we can capture and use patient data from our self-assessment tools that will allow us and our patients to prepare and participate in clinical surveys and reports to refine and further document the effects of medical marijuana.

Through our self-assessment tools and partnerships with leading wellness and medical research facilities in the area, we also plan to provide our patients opportunities to participate in ongoing medical studies and clinical research trials regarding pain, cachexia or wasting syndrome, nausea, seizures, muscle spasms, or agitation. Public information regarding such studies and trials will be invaluable helping us develop a greater understanding of marijuana strains and form effects on debilitating illnesses.

C. Substance Abuse and Misuse

There has been progress over the past decade in substance abuse reduction. The Giving Tree recognizes the need to provide a safe environment that helps patients avoid substance abuse and misuse. Our staff will be trained to recognize the signs and symptoms of substance abuse, including tolerance, dependency, and withdrawal. In our workshops, clinics, and materials, we will emphasize personal responsibility



for individual behavior. We also will provide information about the differing strengths of medical marijuana strains and products and the potential drug-to-drug interactions, including interactions with alcohol, prescription drugs, non-prescription drugs, and supplements. Each patient and caregiver will receive a list of substance treatment facilities and counselors located near the center. Finally, working with our medical director, patient education about the potential abuse of medical marijuana will be integrated in all patient visits, materials, and outreach.

D. Affordability of Medical Marijuana

Work to increase the availability of affordable medical-grade marijuana to registered, qualifying patients enrolled in Medicaid or Social Security Disability Insurance as described in our Outreach Plan.



REQUIRED TRAINING: PATIENT HANDBOOK

PATIENT WELCOME

Welcome to our compassion center. Our goal is to provide you with a holistic approach to your wellness. In this Patient Handbook, we have included information about your visit, our guidelines, the medical marijuana law, and how to use medical marijuana. Please feel free to ask any staff member for clarification on handbook.

A. Patient Guidelines to Stay Safe and Health

- Be a courteous and respectful neighbor
- You must be at least 18 years old with a valid registry identification card to enter
- Your identification must be ready at the door when you check in
- Do not use or consume marijuana in transportation or public place
- No cell phone calls or cameras are allowed in the building
- You may not sell or distribute your marijuana medication to anyone including another patient.
- Place your medicine out of sight in a safe place before leaving the facility
- Respect staff, other patients/caregivers, and neighbors
- Report suspicious behavior to us

**FAILURE TO COMPLY WITH THESE GUIDELINES
WILL RESULT IN TERMINATION OF PATIENT CARE SERVICE**

B. Patients' Rights

- You have the right to be treated with respect and professionalism.
- You have the right to accurate and easily understood information about the laws and local regulations.
- You have the right to accurately labeled and weighed quality medication and accurate information about the medication being provided.
- You have the right to obtain your medication in a safe and friendly environment.



- You have the right to safe and effective medicine handled in appropriate sanitary conditions.
- You have the right to considerate, respectful, and non-discriminatory care.
- You have the right to know if your referring physician has a personal or professional relationship with us.

MEDICAL MARIJUANA LAW OVERVIEW

With the passing of The Delaware Medical Marijuana Act (“the Act”), Title 16, Chapter 49A, which took effect on July 1, 2011, Delaware joined the list of now 20 states that have removed state level criminal penalties from the medical use of marijuana for the health and welfare of its citizens. The purpose of the law is to protect patients with debilitating medical conditions, as well as their physicians and providers, from arrest and prosecution, criminal and other penalties, and property forfeiture if such patients engage in the medical use of marijuana.

A. What the Law Does

3. *Protects Patients and Caregivers*

The Act says that anyone who follows the requirements can't be penalized for the medical use of marijuana. The Act prohibits certain discriminatory practices involving discrimination against medical marijuana patients.

Protects Physicians

The Act states that, if a physician complies with the procedures specified in the Act, she or he shall not be subject to arrest, prosecution or penalty in any manner or denied any right or privilege, including but not limited to civil penalty or disciplinary action by the state, based solely on providing written certifications or for otherwise stating that, in the physician's professional opinion, a patient is likely to receive therapeutic or palliative benefit from the medical use of marijuana to treat or alleviate the patient's debilitating medical condition or symptoms associated with the debilitating medical condition, but nothing in this chapter prevents a professional licensing board from sanctioning a physician for failing to properly evaluate a patient's medical condition or otherwise violating the standard of care for evaluating medical conditions.

4. *Requires a Doctor's Certificate*



A patient seeking medical marijuana must without exception obtain a doctor certification granting use of medical marijuana in compliance with the Act.

B. What Medical Marijuana Law Does NOT Do

- Authorize a person to undertake any task under the influence of marijuana that constitutes negligence or professional malpractice. Authorize possessing or using medical marijuana on a school bus, on the grounds of a preschool, primary school, or high school, or in a correctional facility.
- Authorize smoking marijuana on public transportation or in a public place.
- Authorize operating, navigating, or being in actual physical control of a motor vehicle, aircraft, or motorboat while under the influence of marijuana. A registered qualifying patient will not be considered to be under the influence of marijuana solely because of the presence of marijuana in the person's system that appears in a concentration insufficient to cause impairment.
- Require a government medical assistance program or private health insurer to reimburse for costs associated with the medical use of marijuana.
- Require an owner of private property to allow the use of marijuana on that property.
- Require an employer to allow the ingestion of marijuana in the workplace.
- Prevent a nursing care or other residential or inpatient healthcare facility from adopting reasonable restrictions on the provision, storage and use of marijuana by residents or patients.

C. What Doctors Can NOT Do

- Assist patients in obtaining marijuana by doing more than that required by the Act.
- Recommend marijuana without a justifiable medical cause.



Patient Services

Education is a critical component of the care we offer. As part of our education and program services, we may offer workshops, support groups, classes and other programs. The services may include a wide variety of classes and programs including:

- C Peer Counseling
- C Massage Therapy
- C Art and Music Therapy
- C Wellness Strategies
- C Oncology Issues
- C Guided meditation
- C Counseling Services
- C Ongoing support groups
- C Acupuncture
- C Educational seminar/support group
- C Group and individual yoga instruction
- C Homeopathy
- C Individual counseling
- C Medication interaction counseling
- C Resource services



GUIDE TO USING MARIJUANA

The Federal government classifies cannabis as a schedule 1 drug; a classification that implies that cannabis has no legitimate medical use. This classification should be changed because cannabis is recommended by a multitude of physicians for the treatment of many medical conditions. Furthermore THC (the primary active compound in cannabis) is FDA approved and is called dronabinol. Dronabinol is marketed using the trade name Marinol.

There are many methods of using cannabis for the treatment of medical conditions. The following information is intended to inform medical cannabis patients about the various options available to them.

Please note: We are aware the Department may not allow all of these methods of ingestion; the following is for educational purposes only.

A. Smoking

Smoking marijuana produces the most immediate effects and permits the most refined control of your dosage. Smoking any material is not good for the lungs, but the amount of marijuana you need to smoke is so small that you need not be overly concerned. It is better to smoke the flowers rather than the leaves as this also reduces the amount you will need to smoke.

1. *Popularity of Smoking*

- Rapid onset: Smoking delivers active compounds quickly into the bloodstream and to receptor sites via the lungs.
- Simplicity: Compared to other dosage methods, smoking cannabis is simple, requiring very little preparation time. Before smoking cannabis, the patient must simply separate the buds into individual flowers and remove any stems. Doing so ensures an even burn and less need for flame application (less unwanted fumes=better-tasting, more healthful smoke). To make this easy, use a handheld herb grinder or a pair of scissors and a shot glass.
- Easy dosage determination: smoked cannabis is effective almost immediately, allowing the user to titrate the dose one puff at a time. This allows the user to get just the right dose by gradually increasing the dose until effective.

2. *Methods of smoking*



a. Joint:

(a.k.a. “marijuana cigarette” or “reefer”) Convenience of joints is key, and joints burn for multiple puffs worth of cannabis after only being lit once and are easily transportable. Joints also taste pleasant to most patients, and they don’t require breakable, expensive, or conspicuous equipment. A huge plus is efficient delivery of cannabinoids. This is perhaps due to a joint’s lack of a filter or long piping before the mouth, to which sticky cannabinoids adhere easily, reducing the amount of medicine that actually reaches the patient’s body. It is a skill to roll a good joint, however, novices uninterested in learning how to do so should buy a joint-rolling machine or pre-rolled joints. Before rolling a joint, the patient should break the bud(s) into small, uniform pieces about the size of the individual bud flowers or slightly smaller. Stems should be removed from the flowers to avoid foul, acrid smoke and possible holes poked in the rolling paper. To roll a joint, practice, practice, practice...or ask an expert at The Giving Tree for help. Some joint smokers prefer unbleached rolling papers, hemp rolling papers, or clear, cellulose-based papers, which may taste better and contain fewer impurities than traditional, bleached-white rolling papers. **Patients should note that, while still remarkably safe, joints are one of the less-healthy methods of dosage because they burn paper and glue along with cannabis, exposing users to impurities not presented by some other alternative dosage methods. Another downside is waste: Some smoke is inevitably lost between inhalations, and there is usually leftover cannabis in the “roach”, or the small, undesirable leftover part of a burned joint. However, joints’ efficient delivery of cannabinoids—relative to other smoking methods— may compensate for such waste.

b. Dry “Hand” Pipes

Hand Pipes: These come in a (possibly overwhelming) variety of shapes, sizes, and materials, but the basic mechanics are universal. To smoke a cannabis pipe: pack prepared buds into the bowl; and hold a flame directly over the medicine while simultaneously inhaling through the mouthpiece.

c. Water Pipes

Mechanically, these are nearly identical to hand pipes, but use a chamber of water to filter and cool the smoke before it is inhaled. There are two main types: bong and bubbler, classified by either a large or a small filling chamber, respectively, in which the smoke collects. The main proven advantage over dry pipes or joints is comfort; smoke is cooled and free of hot ashes and particles. *BEWARE: large “hits” of smoke will cause light-



headedness and an inclination to blacking out, and waterpipes make accidentally taking a bigger-than-expected hit a possibility. Waterpipes thought of by many smokers to be a safer alternative to dry pipes or joints because the water filters tar out of the smoke. Unfortunately, as one test points out, water filtration removes THC and other desirable active compounds more so than tar. This means “in order to obtain the same effective dose of THC, a smoker would end up taking in at least 30% more tars from a waterpipe than from an unfiltered joint” . However, water filtration may remove water-soluble toxic gases such as carbon monoxide, which is linked to heart disease, and aldehydes, which promote cancer [3], so more research is required to determine whether waterpipes are beneficial or counterproductive.

**A problem with all pipe smoking is that you must suck on one side of the pipe, pulling air and, along with the flame—lighter fluid fumes—over the cannabis, through the pipe, and into your lungs to light the cannabis on fire. Grind your bud to minimize the need for a starting flame. To avoid lighter fluid fumes, some patients light their pipe with an organic, beeswax- covered hemp wick, or a magnifying glass under bright sunlight.

First time smoking? Use discretion, The Giving Tree’s cannabis will be highly potent! Don’t be alarmed though; this is good news for the patient because it allows him or her to burn less plant material to get an effective dose than with lower-potency cannabis. This also means that, if the patient is new to smoking, it may only take one substantial inhalation to get an effective dose. Start with a small hit. Inhale deeply, exhale immediately (it is a myth that holding in the smoke will be more effective), and WAIT for several minutes to feel the effects of the hit before taking the next so as to minimize the dose.

In summary, if a patient wants the quickest relief possible (easy preparation, plus onset in seconds, and understands and accepts the possible risks inherent to smoking his or her medicine, a pipe is the utensil of choice.

Our growing process and drying process are designed to prevent problems associated with fungi that would affect the safety of our medicine. Buds will be inspected upon trimming and after drying for the presence of mold, and samples will be sent to a laboratory for testing.

B. Vaporizing

Cannabis vaporizers are designed to let users inhale active cannabinoids while avoiding harmful smoke toxins. They do so by heating cannabis to a temperature that is just below the point of combustion where smoke is produced. At this point, THC and other medically active cannabinoids are emitted with little or none of the carcinogenic tars and noxious gases found in smoke. Many medical marijuana patients who find smoked marijuana highly irritating report effective relief inhaling through vaporizers. Also, vaporizers are very efficient so they can save money in the long term.



C. Tincture

To prepare a tincture, use 5 parts fresh marijuana to 1 part vodka. If you are using dried marijuana, as is usually the case, use 10 parts marijuana to 1 part vodka. An easy way to do this if you don't have measuring equipment, is to fill whatever container you are using (glass is preferable as you don't want to leech any residues from metal containers) to thirds full with marijuana, then fill the container with vodka and let stand for a week or more. Afterward, strain the solution. If you use a larger portion of marijuana, the resulting tincture will be more potent.

D. Compress

Follow the recipe as for tea. Make as much as you need to thoroughly soak the cloth you intend to use. Apply to pain and leave on ½ hour.

E. Marinol

Marinol is a synthetic petrochemical analog of THC, one of the active elements found in marijuana. Some patients find that it helps relieve nausea yet takes a long time to work. Do not smoke this product. It has the potential for overdose. Use only under the supervision of a doctor.

Dosage, Potency and Tolerance

A. Dosage

Smoking cannabis effects can be felt almost instantly. Tinctures are slightly slower to take effect than inhalation methods; they start to take effect in five minutes or less liver when cannabis is eaten. The Giving Tree shall only provide its members with cannabis for smoking purposes ,but encourages members to be mindful of dosage.

B. Potency

All of the varieties that we will offer are high, medium and low potency*. This is The Giving Tree policy for several reasons. One reason is high potency will save caretakers money by allowing them to use less medicine. Another reason is highly potent varieties are healthier for those who choose to smoke their medicine, because less plant material must be smoked to get the same dose of active compounds. Although the state is not allowing edibles at this time, we would like to work with DHSS and provide valuable research and information for a future discussion.

*Each variety we offer is of different potency and has unique medicinal effects.



C. Tolerance

Proper dosage is difficult to gauge as there are many variables at play with THC that makes it slightly more or less psychoactive and can be administered using tinctures, smoking, vaporizing, etc. The effect of each method and the rate of onset when using each method.

Heavy cannabis use will, over time, result in lowered sensitivity to the drug. However, most patients lose side effects over time, not medicinal efficacy. To avoid gaining tolerance to cannabis, patients should try different varieties of cannabis and different intake methods.

Side Effects of Using Marijuana

Marijuana is one of the safest medicines available: it is impossible to consume enough to produce a toxic effect in the body. However, if you are unfamiliar with it, there are some effects, which you should be aware of so that you can use it more effectively.

A. Uneasiness

Marijuana usually has a soothing and comforting effect on the mind. Sometimes, however, people do experience feelings of anxiety. If this happens to you, there are several things you can do. Try to stay in environments where you feel naturally comfortable. If you feel anxious, sit or lie down, breathe deeply, and relax. If you have loved ones with you, hold each other for a while. If you have a pet, hold or stroke it. Eating will often quickly reduce the feeling of anxiety. Then, the next time you use it, try reducing your dosage. Because of our social training, you may have feelings of guilt. Know that you have a right to your medicine.

B. Hunger & Thirst

Many patients use marijuana to stimulate appetite. If you are not using marijuana for this purpose, drink water or juice. If you wish to eat, eat good nourishing food rather than sweets.

C. Redness in the Eyes

This will not hurt you. If you must go out in public and are concerned about others' reaction to the redness, wear sunglasses or use eye drops.

D. Drowsiness

If marijuana makes you sleepy, take a nap if you can and wish to. As with all medicines that can produce drowsiness, don't drive or operate heavy machinery.



E. Sleeplessness

If you find that you can't sleep for a while after using marijuana, try reducing your dosage and avoid using it for about two hours or so before you want to

F. Short-term Memory Loss

Sometimes people find it difficult to remember things while medicated, carry on a complicated conversation, keep track of details, or perform complex tasks. If this happens to you, schedule your time so that you don't have to do these things when using your medicine.

G. Giddiness

Many people find that things, which normally don't seem funny, become quite amusing when they use marijuana. Most people enjoy this effect. If you must deal with situations where humor would be inappropriate in your judgment, schedule your time so that you don't have to deal with them when you are taking your medicine.³

SATIVA VS. INDICA

The efficacy of cannabis is directly related to strain selection, therefore we recommend care be taken in selecting appropriate strains to meet your needs. We are beginning to identify particular varieties that are effective for sleep, pain, appetite, and energy; as well as for specific conditions.

Cannabis potency varies with strains. In terms of medicinal dosage, the idea is to smoke as little as possible in order to reduce respiratory irritations from excessive inhalation of burnt plant matter. Patients are highly encouraged to use vaporizers, or ingest cannabis medicine to reduce any potential risks from smoking. Patients need less high potency cannabis to reach desired effects. Any patients who find they need increasingly larger doses to reach desired effects should reduce, or stop intake for a time, or change the variety of cannabis normally used. This helps patients return to a minimized effective dosage level.

Generally, the sativa plant is the taller and lankier variety, reaching heights of over 5-6 meters. It is characterized by narrow serrated leaves and loose spear-like flower clusters that can be extremely resinous. Primarily, the effects of sativas are on the mind and emotions. In this regard, they tend to be more stimulating, uplifting, energizing, and creativity enhancing. These benefits can be particularly helpful for the psychological component of many illnesses. Sativas are generally better for daytime use.

³ Excerpt from Americans for Safe Access



Indica plants are normally shorter and stockier plants, reaching 1-2 meters in height, with wide, deeply serrated leaves and compact and dense flower clusters. The effects of indicas are predominantly physical, although the relief of certain physical symptoms can have emotional results as well. These effects can be characterized as relaxing, sedating, and pain-reducing. Indicas are generally best for later in the day and before bed.

Strain crosses, or hybrids, are the result of cross-pollination of various strains. The characteristics, and hence the effects, of one strain will usually be dominant. For example, indica-dominant crosses are good for pain relief, with the sativa component helping with energy and activity levels. Sativa-dominant crosses are good for stimulating appetite, with the indica component helping to reduce body pain and increase relaxation.⁴ The Giving Tree is committed to providing numerous strains for the various ailments, as well as aiming to provide specific ones with low THC (psychoactive properties) and high CBD (medicinal properties).

⁴ Highland Springs Wellness Center

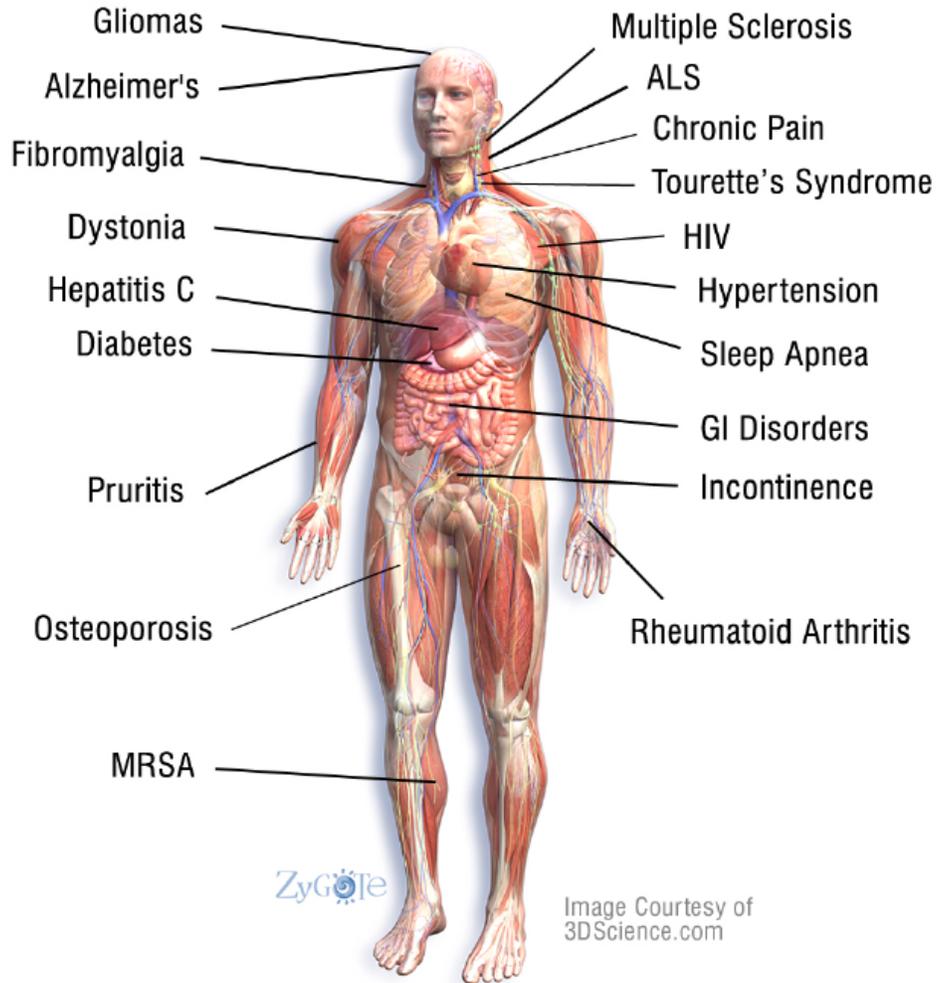


Sativa	Indica
Reduces depression Relieves headaches and migraines Energizes and stimulates Reduces awareness of pain Increases focus and creativity Reduces nausea Stimulates appetite Supports immune system	Reduces pain Relaxes muscle spasms Stimulates appetite Reduces inflammation Aids sleep Relieves headaches and migraines Reduces intra-ocular pressure Anti-convulsant



APPLICATIONS FOR CANNABIS AND CANNABINOID

Emerging Clinical Applications for Cannabis and Cannabinoids: A Review of the Recent Scientific Literature Fourth Edition





The Safety Profile of Medical Cannabis

Cannabinoids have a remarkable safety record, particularly when compared to other therapeutically active substances. Most significantly, the consumption of marijuana – regardless of quantity or potency -- cannot induce a fatal overdose. According to a 1995 review prepared for the World Health Organization, “There are no recorded cases of overdose fatalities attributed to cannabis, and the estimated lethal dose for humans extrapolated from animal studies is so high that it cannot be achieved by ... users.”

In 2008, investigators at McGill University Health Centre and McGill University in Montreal and the University of British Columbia in Vancouver reviewed 23 clinical investigations of medical cannabinoid drugs (typically oral THC or liquid cannabis extracts) and eight observational studies conducted between 1966 and 2007. Investigators "did not find a higher incidence rate of serious adverse events associated with medical cannabinoid use" compared to non-using controls over these four decades.

That said, cannabis should not necessarily be viewed as a ‘harmless’ substance. Its active constituents may produce a variety of physiological and euphoric effects. As a result, there may be some populations that are susceptible to increased risks from the use of cannabis, such as adolescents, pregnant or nursing mothers, and patients who have a family history of mental illness.

Patients with hepatitis C, decreased lung function (such as chronic obstructive pulmonary disease), or who have a history of heart disease or stroke may also be at a greater risk of experiencing adverse side effects from marijuana. As with any medication, patients should consult thoroughly with their physician before deciding whether the medical use of cannabis is safe and appropriate....

As states continue to approve legislation enabling the physician-supervised use of medical marijuana, more patients with varying disease types are exploring the use of therapeutic cannabis. Many of these patients and their physicians are now discussing this issue for the first time and are seeking guidance on whether the therapeutic use of cannabis may or may not be advisable. This report seeks to provide this guidance by summarizing the most recently published scientific research (2000-2010) on the therapeutic use of cannabis and cannabinoids for 19 clinical indications:

- Alzheimer's disease
- Amyotrophic lateral sclerosis
- Chronic pain
- Diabetes mellitus
- Dystonia



- Fibromyalgia
- Gastrointestinal disorders
- Gliomas/other cancers
- Hepatitis C
- Human Immunodeficiency Virus
- Hypertension
- Incontinence
- Methicillin-resistant Staphylococcus aureus (MRSA)
- Multiple sclerosis
- Osteoporosis
- Pruritus
- Rheumatoid arthritis
- Sleep apnea
- Tourette's syndrome

In some of these cases, modern science is now affirming longtime anecdotal reports of medical cannabis users (e.g., the use of cannabis to alleviate GI disorders). In other cases, this research is highlighting entirely new potential clinical utilities for cannabinoids (e.g., the use of cannabinoids to modify the progression of diabetes.)⁵

Ø Please See [Appendix C](#) for Ailment Specific Strain

SUBSTANCE ABUSE PREVENTION

The Giving Tree recognizes the need to provide a safe environment that helps patients avoid substance abuse and misuse. Personal responsibility is critical to participating in our programs.

In 2009, approximately 28.5 million Americans age 12 and older had abused marijuana at least once in the year prior to being surveyed. Source: National Survey on Drug Use and Health (Substance Abuse and Mental Health Administration Web Site). By the time they graduate from high school, about 42 percent of teens will have tried marijuana, according to the NIDA.

⁵ The National Organization for Reform of Marijuana Laws, February 2011 (excerpt, pages 1-10).



According to the federal government, long-term marijuana use can lead to psychological addiction. It estimates that 9 percent of people who use marijuana will become dependent on it. The number goes up to about 1 in 6 in those who start using young (their teens) and to 25-50 percent among daily users.

We offer workshops, clinics, and materials about the potential medical marijuana abuse will be integrated in all patient visits, materials, and outreach. Our staff also is trained to recognize possible signs of drug abuse.

Medical marijuana certification

The Giving Tree shall include the following subjects in its educational training program:

- The effect medical marijuana use has on the body and behavior, especially as to driving ability, and that driving under the influence of marijuana is prohibited;
- Procedures for the proper handling and dispensing of medical marijuana to qualified patients and caregivers;
- Methods of recognizing and communicating with underage qualifying patients and caregivers;
- Prevention techniques involving effective identification and carding procedures;
- Explanation of the Department's Law and Federal law relating to marijuana and ensuring compliance;
- Security and theft prevention.

Ø Please see [Appendix D](#) for our HIPPA Overview.



REFERENCES AND RESOURCES

A. Marijuana Medical Research

- Challenges of marijuana research, *Brain* 2006 129(5):1081-1083.
<http://brain.oxfordjournals.org/cgi/content/full/129/5/1081>
- A Collection of Articles That Address Research on Marijuana – National Institute on Drug Abuse (NIDA)
http://www.drugabuse.gov/NIDA_Notes/NN0058.html
- Marijuana and Medicine: Assessing the Science Base (1999) – Institute of Medicine
http://www.nap.edu/catalog.php?record_id=6376
- Marijuana Research and Dissemination Update - March 2004 – NIDA
<http://www.nida.nih.gov/PDF/MJProgressRep04.pdf>

B. Marijuana Fact Sheets

- Cannabis myths: how harmful is cannabis? – UK DrugScope
<http://www.drugscope.org.uk/resources/mediaguide/cannabismyths.htm>
- Marijuana: Facts for Teens – National Institute on Drug Abuse (NIDA)
<http://www.drugabuse.gov/MarijBroch/Marijteens.html>
- Marijuana: Facts Parents Need to Know – NIDA
<http://www.drugabuse.gov/MarijBroch/MarijparentsN.html>
- NIDA Research Report: Marijuana Abuse
<http://www.drugabuse.gov/ResearchReports/Marijuana/default.html>

C. Opposing Viewpoints

- (CON) Marijuana Myths & Facts: The Truth Behind 10 Popular Misperceptions – ONDCP
http://www.whitehousedrugpolicy.gov/publications/marijuana_myths_facts/index.html
- (PRO) Myths and Facts About Marijuana – Drug Policy Alliance Network
<http://www.drugpolicy.org/marijuana/factsmyths/>
- Medical Marijuana – ProCon.org
<http://medicalmarijuana.procon.org/>



D. Information on the Web

- Americans for Safe Access
www.safeaccessnow.org
- Science-based information about the effects of marijuana on your brain and body.
<http://www.marijuana-info.org/>
- Medline Plus: Marijuana – National Library of Medicine (NLM) & National Institutes of Health (NIH). Authoritative information, including: news, NIH resources, overviews, diagnosis and symptoms, treatment, related issues, clinical trials, research, dictionaries/glossaries, directories, organizations and statistics.
<http://www.nlm.nih.gov/medlineplus/marijuana.html>
- Marijuana: NIDA for Teens Web: The Science Behind Drug Abuse. Factual information for teens on the use and consequences of marijuana.
http://teens.drugabuse.gov/facts/facts_mj1.asp
- Marijuana: Parents. The Anti-Drug – The National Youth Anti-Drug Media Campaign. Site for parents with information relating to teen use, talking to your teen, academic success, mental health, and more.
http://www.theantidrug.com/drug_info/drug-info-truth-about-marijuana.asp



QUALIFYING PATIENTS FAQs

The Department has put together frequently asked questions regarding qualifying patients under the Medical Marijuana Program. While this is a developing program, we will provide updated answers as the Department makes them available to the public. The Medical Program Qualifying Patients FAQs will be attached to the Patient Handbook.

The Giving Tree will make available all Department FAQ once available.



PRICING

We figure 1/8th as our most common sale

1 gram \$12- \$15

1/8oz \$45-\$55 depending on strain can go as high as \$60-70

1/4oz \$85-\$100 depending on strain

1/2oz \$155 - \$190 dos

Pricing reflects plant yield, and ties into how fast the plants grow in vegetative state, length of veg time etc. Granddaddy, OG are notorious slower, Blue dream and Trainwreck are fast.

Also Selling:

Volcano Vaporizer

VOLCANO CLASSIC Vaporization System with SOLID VALVE Set \$592.90

VOLCANO DIGIT Vaporization System with SOLID VALVE Set \$735.90

PLENTY Vaporizer Complete Set \$383.90

Glass pipe

\$38 (cost \$33) Flat spoon 3 hole

Rolling papers \$15 case of 25 pack our cost

FINANCIAL HARDSHIP

The Giving Tree provides reduced cost and/or free medical marijuana to Veterans, recipients of Medicaid, recipients of Supplemental Security Income, and individuals whose income does not exceed 300% of the federal poverty level, adjusted for family size (“Financial Hardship Program”). The Company does not give away any medical marijuana except as provided in accordance with its Financial Hardship Program. In order to participate in the Company’s Financial Hardship Program, a patient will complete a Financial Hardship Application Form. In addition, the patient will be required to provide the Company a copy of his/her most recent tax return and documentation to prove that the patient is a Veteran and/or Medicaid beneficiary and/or entitled to receive Supplemental Security Income.

If the patient satisfies multiple categories (e. g., is a Veteran and also is a Medicaid beneficiary), the patient will be entitled to receive the marijuana product, item and/or service at the lowest price offered by the Company. The Giving Tree will offer 45% off current retail value of any medical marijuana that the Company dispenses. The Giving Tree estimates that 25% of total sales will qualify for this discount.



**RECORDS RETENTION INFORMATION:
PATIENT RECORDKEEPING PLAN**



QUALIFYING PATIENT RECORDKEEPING PLAN

This is the written Qualifying Patient Recordkeeping Plan for The Giving Tree-Compassion Care of Delaware (“We”, “Us”, “Our”, “Applicant”). This plan addresses and meets the application requirements of the Act, the Regulations, and the OMM policies and guidelines.

INTRODUCTION

Our patients’ records are an indispensable component of The Giving Tree’s delivery of competent, quality care. These records are vital to an integrated understanding of the patient’s needs. They provide the history and details of physician recommendations, patient assessments and concerns, required verifications, patient education and support, and staff-patient communications. Based on the documented history of a patient’s treatment response, well-kept records help us assess specific strain effectiveness for his or her condition as well as treatment alternatives.

We have selected MJ Freeway as our recordkeeping software system. We believe that this software provides critical quality assurance that allows us to effectively administer patient records, provide superior comparative analysis of patient information, and make it easier to track the medicinal effects of marijuana for individual patients. This software, customized to our needs, protects patient privacy, assures compliance with applicable Department and federal rules and regulations, and allows us to control and limit staff access to patient records.

We have a designated Dr. Brian Costleigh as our medical advisory agent at The Giving Tree. Dr. Costleigh has particular skills related to the various marijuana strains, their active medical use of marijuana constituents (spectrum of cannabinoids), and the healing effects that they impart. He has knowledge of the vast array of diseases, syndromes, disorders, and ailments that medical marijuana use benefits. She can explain in detail the different types of medical marijuana ingestion, the pros and cons of each type of ingestion, and which types are best for different diseases, syndromes, disorders, and ailments. His background lies in human anatomy, physiology, and pathologies medicines) that can be applied to compounding with medical marijuana

His objective is to help maintain integrity in the operation of Delaware's first medical marijuana dispensary and to ensure that our patients will be served with the utmost respect and care by knowledgeable, compassionate patients. His expertise along with our accurate records and patient verification **help ensure our patients are receiving the exact type and amount of medicine necessary.**



We have also developed a Patient Recordkeeping Handbook that will be given to a member of our team. A copy of this initial Handbook is included below. The standards we value the most that have guided us in preparing our policies and procedures are:

- Regular training of staff to maintain their familiarity with current regulations, technology, and dispensary practices.
- Compliance with federal laws such as HIPAA to protect patients against misuse of information identifiable to them.
- Accurate and complete patient records that can be interpreted by knowledgeable, authorized third parties.
- Standardization of abbreviations, acronyms, and symbols throughout the record for consistency and record integrity.
- Development of a Recordkeeping Handbook, detailing the policies and procedures, to be provided to staff. The Handbook will be updated and revised to ensure on-going regulatory compliance.
- Ongoing quality improvement strategies, including audits that will help us continually improve patient safety and satisfaction.



PATIENT RECORDKEEPING HANDBOOK



PATIENT RECORDKEEPING HANDBOOK

The Giving Tree's Patient Recordkeeping Handbook is issued to provide basic information procedures for managing our patient health records. These policies and procedures have been developed to comply with the requirements for a Qualifying Patient Recordkeeping Plan set forth in the Act, the Regulations, and the OMM policies and guidelines.

A. General Guidelines

Patient records must include history of purchases, denials of sale, and product deliveries. Records must be maintained in an auditable form and kept confidential. Each patient record must be authentic, accurate, and objective. Each patient who obtains medical marijuana from us should have an individual record that includes all original patient files. Entries on any patient record must:

- a. Be recorded only by authorized dispensary agents designated in this Handbook;
- b. Be dated and signed by the authorized dispensary agent;
- c. Include the dispensary agent's registry identification number;
- d. Be written legibly and clearly, without alterations, if the record is manual; and
- e. Contain the authorized dispensary agent's electronic signature, as discussed below, if the file is electronic.

All chart abbreviations will be standardized and provided by our team. For terms not standardized, please spell out such terms in full to avoid confusion.

Every patient record will include, at a minimum, the following information:

- a. The qualifying patient's registry identification number;
- b. The qualifying patient's date of birth; and
- c. Name and registry identification number of the qualifying patient's designated caregiver (if applicable).

No one whose record does not include this information may obtain medical marijuana from our Dispensary.

Every entry into a patient record must show the date of the entry, the name and registry identification number of the authorized dispensary agent, and the authorized agent's manual or electronic signature. For electronic files, the date and time must and will be automatically recorded by our system's internal clock. *No one is allowed to sign on a dispensary agent's behalf, even for electronic signatures. Only the dispensary agent whose signature the electronic code represents may make use of his or her electronic signature.*



B. Records Maintenance

1. Dispensing Marijuana.

Records of dispensed marijuana, which may be traced according to patient MMP registry identification numbers to protect confidentiality and compassion center's security protocols, shall be maintained. Compliance with the legislative patient possession limit of no more than three ounces dispersed in any fourteen-day period and in possession of no more than six ounces at any given time shall be enforced by maintaining internal, confidential records that include at least the following information:

- a. How much marijuana is being dispensed to the registered qualifying patient for each transaction (no more than 3 ounces & patient cannot have more than 6 ounces on them at any time);
- b. Whether it was dispensed directly to the registered qualifying patient or to the designated caregiver;
- c. The date and time the marijuana was dispensed; and
- d. The barcode tracking number of the marijuana being dispensed that is traceable to a specific compassion center harvested plant.

2. Inventory accountability records.

Documentation of all inventory audits and reviews shall include at least the following data:

- a. Date the inventory audit or review was conducted;
- b. Summary of the inventory findings;
- c. Name, signature and title of individual who conducted the inventory

3. Product testing results.

All product testing results which show potency of the cannabinoids and lack of contaminants in the various strains shall be recorded and maintained by an authorized dispensary agent according to the our recordkeeping handbook. These records shall include:

- a. The batch number of marijuana being tested,
- b. The amount of marijuana being tested,
- c. The test being performed,
- d. Where the test is performed,
- e. The results of the test, and
- f. The name, title, and signature of the authorized agent performing the test



4. Facility inspection records.
All maintenance inspections and tests conducted, their corresponding 1 and corrective action taken shall be maintained and shall include:
 - a. The date of the action
 - b. Summary of the action(s) performed; and
 - c. Name, signature, and title of authorized agent who performed the action

5. Tracking logs of transporting marijuana
Tracking logs will be maintained for the transportation of marijuana on behalf of The Giving Tree. A document will accompany an authorized agent when transporting marijuana on behalf of the registered compassion center. This document shall contain at least the following:
 - a. The amount of marijuana being transported;
 - b. The date the marijuana is being transported;
 - c. The barcodes tracking the transported marijuana to the compassion center inventory control system;
 - d. The registry identification number of the registered compassion center and a contact telephone number to verify that the marijuana is being transported on behalf of the registered compassion center;
 - e. The registry identification number of the registered compassion center agent that is transporting the marijuana; and
 - f. The reason for the transportation of the marijuana.

6. Security Inspections.
Records of inspections and reviews of security devices, including video monitoring, results of inspections and reviews, and any corrective action taken shall be maintained by The Giving Tree. This shall include any servicing, upgrades or modification to the security system or devices. Records of all such inspections and actions shall include:
 - a. The date of the action
 - b. Summary of the action(s) performed; and
 - c. Name, signature, and title of the authorized agent who performed the action

7. Alarm activations or breaches of security
Any alarm activation or other event that requires response by public safety personnel shall be recorded. This requirement includes unauthorized breaches of security, even if alarm activation did not occur. The record will include at a minimum:
 - a. The event;
 - b. The action taken in response to the event;
 - c. Any changes to the physical nature of the compassion center (e.g. security upgrades, replacements, etc.)
 - d. Any changes to the operating procedures as a result of the event.



8. All video footage of the facility, inside and out, will be digitally recorded and retained.

9. Agent/personnel records.

A record shall be made and maintained for any instances in which any of the board members is convicted, fined, censured, or had a registration or license suspended or revoked in any administrative or judicial proceeding.

The Giving Tree shall maintain at least the following records related to all agents of the compassion center. A personnel record shall be maintained for a period of at least six months after termination of the individual's affiliation with the compassion center. The record shall include:

- a. An application for employment or to volunteer;
- b. A record of any disciplinary action taken; and
- c. Documentation of all required training. Documentation shall include a signed statement from the individual indicating the date, time and place of said training and topics discussed, including the name and title of agent

10. Financial records and audits for accountability.

A record of the source of any funds that will be used to open or maintain the compassion center, including the name, address, and date of birth of any person or entity having 5% or more ownership in the Giving Tree shall be recorded and maintained.

C. Privacy, Confidentiality, and Information Security

Under the Act, the Regulations, and HIPAA, and for a period of time consistent with the OMM retention schedule records must be provided to the Department for review upon request. All patient records must comply with federal, state, and local privacy laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). As discussed more fully in the HIPAA compliance summary section below, our system will be HIPAA compliant. We will review and modify our privacy and security measures to remain compliant. Below are our privacy, confidentiality, and security requirements for patient recordkeeping:

1. *Access to Patient Records.* The Department's rules and regulations limit access to patient records to a designated dispensary agent. It is The Giving Tree's policy that only a principal officer, board member, or employee dispensary agent responsible for performing tasks directly related to patient intake, patient care, or patient administration shall have access to patient records. If your job requires you to perform such direct patient intake, care, or administration, you will be authorized to access any restricted area of our electronic recordkeeping system.



Dispensary agents without direct patient responsibilities will not be provide access.

Patients generally will not be given access to information in their medical records unless they specifically request it. This includes access for purposes of transferring such records to another dispensary. Written record releases must be signed by a patient or designated caregiver for any patient records sent or copied for pick up by any person outside of the patient or designated caregiver. Patients must pay the cost of copying their records for all transfers to another dispensary. The cost per page is 10 cents.

2. *Confidentiality.* All staff with access to patient information in the performance of their duties will be informed of patient confidentiality responsibilities and requirements. Patient records are confidential regardless of the medium. The privacy of patient information must be preserved and not discussed with unauthorized persons. Every employee with access to patient records in any medium is responsible for the proper handling of the patient records. Each employee is accountable for safeguarding patient confidentiality and privacy, and failure to do so may result in disciplinary or other adverse action up to, and including, termination. *Patient privacy training is required as part of any annual staff training requirements.*
3. *Security.* Security measures for authorizing access to the patient's health record are discussed briefly below. A more detailed description of information security, including recordkeeping, is set forth in The Giving Tree's Security Plan. Only the Executive Director or designee dispensary agent can approve the physical or electronic removal of original health records from the dispensary.

All qualifying patient records must be protected from loss, damage, or unauthorized use. Any patient records in file areas and other areas where patient records are temporarily stored (treatment areas, record review areas, quality assurance areas, release of information area, etc.) must be locked when responsible staff is not present to protect the security of the area. This will prohibit unauthorized access to patient records.

All patient-identifiable waste paper or discarded materials from any department must be shredded or disposed of in accordance with approved disposal policies and procedures. Locked containers or shredders must be provided in employee work areas for disposal of sensitive patient information. Also, precautions must be taken by staff to ensure that unauthorized individuals cannot see patient records on computer screens.

Finally, all electronic patient records must be secured and backed up on a regular basis to prevent information loss due to fire, flood, or other disasters. Patient records will be stored on a database, encrypted at the OS level. Generally,



recordkeeping must observe accepted standards of “best practices” in the industry. Key features of any backup system will include:

- a. Remote location of redundant servers
- b. Comprehensive online/email reports
- c. Secure records via multiple layers of encryption.
- d. Fully scalable, unlimited storage space
- e. Automatic backup management

D. Record Retention and Purging

All patient records will be retained for at least the minimum amount of time of the Department’s medical marijuana retention requirements, as may be amended from time to time. Currently, all patient records will be maintained for at least six years after the date of the last request from the patient or the patient’s designated caregiver for medical marijuana. All inactive patient records will be archived and stored electronically and purged in accordance with federal, state, or local law.

E. Record Review and Quality Assurance

Staff is required to perform audits on patient records on not less than a quarterly basis for quality assurance purposes. Staff designated by the Executive Director shall develop the audit requirements. Audit results will be shared with staff along with any required improvement directives.

F. Recordkeeping Practices

Staff must make sure that each entry made in the qualifying patient’s record is factual, objective, and clear. You also should make sure that you use appropriate language and a professional tone when making any written or electronic comments. In addition, please use quotation marks to indicate when you are using a patient’s own words to document complaints and comments. Finally, please do not include disparaging or subjective comments about anyone in a patient’s record.

G. Qualifying Patient Verification

Before a dispensary agent dispenses medical marijuana to a qualifying patient or a designated caregiver, you must comply with the verifications provisions set forth in the Act, the Regulations, and HIPAA, and OMM. Such compliance shall be documented in the patient’s record. The Department’s verification process requires dispensary agents to:

1. Verify the qualifying patient’s or the designated caregiver’s identity;



2. Offer any appropriate patient education or support materials;
3. Enter the qualifying patient's or designated caregiver's registry identification number shown on the qualifying patient's or designated caregiver's registry identification card into the medical marijuana electronic verification system;
4. Verify the validity of the qualifying patient's or designated caregiver's registry identification card;
5. Verify that the amount of medical marijuana the qualifying patient or designated caregiver is requesting is in compliance with the legislative patient possession limit of **no more than three ounces dispersed in any fourteen day period** and **in possession of no more than six ounces at any given time** which shall be enforced by maintaining internal, confidential records.
6. Enter the following information into the medical marijuana electronic verification system for the qualifying patient or, when applicable, the qualifying patient and his or her designated caregiver:
 - a) The amount of medical marijuana dispensed
 - b) Whether the medical marijuana was dispensed to the qualifying patient or to the qualifying patient's designated caregiver
 - c) The date and time the medical marijuana was dispensed
 - d) Dispensary agent's registry identification number
 - e) The dispensary's registry identification number
 - f) The barcode tracking number of the marijuana being dispensed that is traceable to a specific compassion center harvested plant.

Our electronic system and written file format both will require verification that each authorized dispensary agent has complied with the Department's qualifying patient verification procedures.

H. Documentation

1. *Patient Contact.* Authorized dispensary agents must document each professional contact with patients in that patient's individual medical record. Documentation must include:
 - a. Date of the contact
 - b. Whether the contact was with the patient or a designated caregiver (if with a caregiver, the name and registry identification number of the caregiver must be indicated)
 - c. Reason for the contact
 - d. Documentation of any patient education and support materials provided to the patient or the patient's designated caregiver



- e. Outcome of the contact
 - f. Name and registry identification number of the authorized dispensary a
2. *Education Materials.* The patient's record must always include a description of any education or support materials provided to patient, when they were received, and a receipt, verified electronically or in writing by the dispensary agent or by the patient or caregiver's signature on a standard form.
 3. *Sale of Medical Marijuana.* The patient's record must always include documentation of any sale of medical marijuana, indicating:
 - a. Date of the sale
 - b. The type of product (for example, whether it is dried leaves or a marijuana-infused edible food product)
 - c. The strain, amount, and inventory control tracking number
 - d. Whether it was sold to the patient or the patient's designated caregiver
 4. *Purchase Denials.* The patient's record must always include documentation of any denials of the sale of medical marijuana, indicating:
 - a. Date of the requests
 - b. Name and registry identification number of the individual who requested the medical marijuana (if, for example, it was not the patient, but a designated caregiver, this must be explicitly indicated)
 - c. The Dispensary's reasons for refusing the request
 5. *Physical Delivery.* The patient's record must always include documentation of any physical delivery of purchased marijuana to the patient or caregiver, indicating whether the medical marijuana was:
 - a. Dispensed on site directly to the purchaser; or
 - b. Scheduled for delivery, indicating further by what method, when, and whether delivery was successful, supplying the delivery confirmation number, or a copy of the delivery failure report.

I. Additional Recordkeeping

This Handbook will be supplemented with health record and treatment plan recordkeeping requirements that will apply to every patient.

J. Staff Training

Every dispensary agent expected to have contact with, or access to, patient records will be trained on internal policies and procedures regarding recordkeeping, including



security, privacy, and HIPAA-compliance, as well as the Department's recordk requirements. Training will help us preserve patient confidentiality, strengthen assurance, and ensure that we are complying with all federal, state, and local recordkeeping requirements.



FORM SAMPLES



**AUTHORIZATION FOR RELEASE OF
PATIENT HEALTH INFORMATION**

Patient Name:

Medical Record No. or SSN _____ Date of Birth:

I, the undersigned, hereby authorize:

Name of doctor or facility

to provide verbal information to _____ regarding the recommendation for use of medical marijuana for the purpose of ensuring that I meet the requirements for membership.

This information is intended for use by the above named recipient only.

This authorization will expire exactly one year from the date below. I have the right to receive a copy of this authorization. I may revoke this authorization at any time in writing.

Patient Signature: _____

Date: _____



Patient Rules and Agreement Sample.

THE GIVING TREE-COMPASSION CARE OF DELAWARE

Please carefully read this document before initialing and signing it.

By signing this Agreement and meeting other requirements (described below),
_____ will become a patient of The Giving Tree- Compassion Care of Delaware, a non-profit formed under Delaware Nonprofit Corporation law.

Patient qualifications

To be a member, you must meet the following requirements at all times:

- Be a Delaware resident
- Meet age requirements

IMPORTANT: By signing this Agreement, you are certifying that you meet these requirements. You understand that you must notify the **compassion center IMMEDIATELY** if at any time you no longer meet these requirements and your membership will automatically be terminated.

We require that you show us proof of a Delaware residency, your valid state or city medical marijuana identification card (if you have one), and original (not a copy) doctor's recommendation (or if you are a caregiver, you must provide a letter from a Qualified Patient designating you as his or her caregiver as well as a copy of that patient's medical marijuana identification card, if he or she has one, and his or her doctor's recommendation) before you can be admitted as a member. We will track the expiration date on your card and will remind you in advance when the expiration date approaches. You must always have a valid, non-expired card or recommendation on file to remain a member. We will verify that your doctor is currently licensed to practice medicine in Delaware and we will contact your doctor to verify the validity of the recommendation (you will need to sign the attached release for this purpose).

IMPORTANT: If you are joining as a caregiver, and not as a patient, you understand and agree that the medicine grown by the compassion center is for use by Qualified Patients only.

Initials

Communication

You may receive email communications from us. These communications may contain important information such as changes in delivery schedules, etc. You are responsible for reading the emails we send to you and for notifying us of a change in your email address or other contact information. If you wish to contact the **compassion center management**, you may use the contact information at the end of this Agreement.

Initials

Confidentiality

Management will keep all information regarding our members confidential except as otherwise required under the law.

Patients are required to keep information about other patients of The Giving Tree confidential.



No re-sale or transfer of medicine

The medicine grown by the members of the compassion center is grown only for the use of the members. No member may sell or transfer in any way any medicine to a non-patient. Any member that does this will be immediately terminated.

Initials

Use for medical purposes only; federal law

By signing this Agreement, you understand that the medicine you receive as a patient of the compassion center is for medical purposes only.

You understand that under federal law, the manufacture, distribution, or possession of marijuana is a criminal offense. While the Delaware Attorney General's Office recommends individuals involved with the manufacture, distribution, or possession of medical marijuana not be arrested, there are no guarantees regarding the effect of federal law on the center and its members.

Liability and risk

You agree to hold the center and the other patients harmless for any injury or damages resulting from events not caused by the intentional misconduct or gross negligence of the center.

The consumption of fresh produce always carries with it an inherent risk of negative health consequences. One example of this is the aspergillus fungus which can grow on marijuana and has been known to threaten the health of persons with suppressed immune systems. If you believe you may be vulnerable to such risks, it is your responsibility to alert center management which will work with you to identify methods for reducing your risk. You understand, however, that there is no way to completely eliminate the risk associated with consuming fresh produce and you hold the center and the other patients of The Giving Tree harmless for any damages or injury that may result from such consumption.

Initials

Governing law

This Agreement shall be governed by and construed and enforced in accordance with the internal laws of the State of Delaware.

Initials

Invalidity of provisions

In the case any one or more of the provisions contained in this Agreement is for any reason held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provision of this Agreement and such invalid, illegal and unenforceable provision shall be reformed and construed so that it will be valid, legal, and enforceable to the maximum extent permitted by law.



No waiver

Any party's failure to enforce any provision or provisions of this Agreement shall not in any way be construed as a waiver of any such provision or provisions, nor prevent that party thereafter from enforcing each and every other provision of this Agreement. The rights granted both parties herein are cumulative and shall not constitute a waiver of any party's right to assert all other legal remedies available to it under the circumstances.

Initials

I have read and agree to all of the above.

Signed: _____ Date: _____

Name: _____

Address: _____

Email address: _____

Home phone: _____

Work phone: _____

Cell phone: _____

Emergency contact name: _____

Emergency contact phone number: _____

For staff use:

Circle one: Patient Caregiver

- Copy of proof of residency on file
- Copy of doctor recommendation on file
- Copy of card on file Expiration date: _____
- Doctor License verified
- Doctor recommendation verified



Patient Forms:

Please submit **ONLY** fields shown on this form. Do **NOT** send any other personal information about patients.

Reporting Month	Enter month reporting	
Business Licensee Name	Enter business licensee name	
Business Licensee /Application Number	Enter business license/application number	
<p>INSTRUCTIONS: Provide the required information for patients that have designated you as their Primary Center. Do NOT submit any additional patient information. For patients that do not have a license number yet, put "Pending." If a patient is authorized for more than 6 plants, maintain, but do not submit, supporting documentation for additional plants. The list is due by the fifth business day of the month and Licensees must report their patient list as of the last day of the prior month (the reporting month). For example, by Sept 5, licensees are required to submit their patient list as of Aug 31. Licensees must submit the Patient Status Change Form (Form 1040), when required, within 72 hours to the MMED.</p>		
Patient ID Number	Patient Card Expiration Date	Primary Center Designation Date
Enter patient ID number from registry card	Enter patient card expiration date	Enter effective date of primary center designation



Total Patient Count	enter total number of patients	↘
Total Plant Count		

Employee Form:

Business Licensee Name	Enter business licensee name		
Business Licensee / Application Number	Enter business licensee/application number	Reporting Month	Enter month reporting
<p>INSTRUCTIONS: Provide the required information for all employees, including non-employee owners, who work at your facility. If an employee does not yet have a license number, put "Pending." The list is due by the fifth business day of the month and licensees must report their employee list as of the last day of the prior month (the reporting month). For example, on Sept 5, licensees are required to submit their employee list as of Aug 31. Licensees must submit the Employee Status Change Form (Form 1030), when required, within 10 business days to the MMED.</p>			
Employee License #	Employee Last Name	Employee First Name	
Enter employee Medical Marijuana Key or Support license #.	Enter Employee Last Name	Enter Employee First Name	



6. CERTIFICATION AND STATEMENT OF COMPLIANCE



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

CERTIFICATION SHEET

As the official representative for the proposer, I certify on behalf of the agency that:

- a. They are a regular dealer in the services being procured.
- b. They have the ability to fulfill all requirements specified for development within this RFP.
- c. They have independently determined their prices.
- d. They are accurately representing their type of business and affiliations.
- e. They will secure a Delaware Business License.
- f. They have acknowledged that no contingency fees have been paid to obtain award of this contract.
- g. The Prices in this offer have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other contractor or with any competitor;
- h. Unless otherwise required by Law, the prices which have been quoted in this offer have not been knowingly disclosed by the contractor and prior to the award in the case of a negotiated procurement, directly or indirectly to any other contractor or to any competitor; and
- i. No attempt has been made or will be made by the contractor in part to other persons or firm to submit or not to submit an offer for the purpose of restricting competition.
- j. They have not employed or retained any company or person (other than a full-time bona fide employee working solely for the contractor) to solicit or



secure this contract, and they have not paid or agreed to pay any company or person (other than a full-time bona fide employee working solely for the contractor) any fee, commission percentage or brokerage fee contingent upon or resulting from the award of this contract.

- k. They (check one) operate an individual; a Partnership a non-profit (501 C-3) organization; a not-for-profit organization; or for profit corporation, incorporated under the laws of the State of Delaware.
- l. The referenced offerer has neither directly or indirectly entered into any agreement, participated in any collusion or otherwise taken any action in restraint of free competitive bidding in connection with this bid submitted this date to Delaware Health and Social Services.
- m. The referenced bidder agrees that the signed delivery of this bid represents the bidder's acceptance of the terms and conditions of this invitation to bid including all Specifications and special provisions.
- n. They (check one): are; are not owned or controlled by a parent company. If owned or controlled by a parent company, enter name and address of parent company:

Violations and Penalties:

Each contract entered into by an agency for professional services shall contain a prohibition against contingency fees as follows:

- 1. The firm offering professional services swears that it has not employed or retained any company or person working primarily for the firm offering professional services, to solicit or secure this agreement by improperly influencing the agency or any of its employees in the professional service procurement process.
- 2. The firm offering the professional services has not paid or agreed to pay any person, company, corporation, individual or firm other than a bona fide employee working primarily for the firm offering professional services, any fee, commission, percentage, gift, or any other consideration contingent upon or resulting from the award or making of this agreement; and



Certification Page 3 of 3

3. For the violation of this provision, the agency shall have the right to terminate the agreement without liability and at its discretion, to deduct from the contract price, or otherwise recover the full amount of such fee, commission, percentage, gift or consideration.

The following conditions are understood and agreed to:

- a. No charges, other than those specified in the cost proposal, are to be levied upon the State as a result of a contract.
- b. The State will have exclusive ownership of all products of this contract unless mutually agreed to in writing at the time a binding contract is executed.

March 21, 2014
Date

29 Del.C. Ch. 100 Freedom of Informa

[Redacted Signature] Executive Director
Signature & Title of Official Representative

Kathleen K. McGuiness
Type Name of Official Representative



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

STATEMENTS OF COMPLIANCE FORM

As the official representative for the contractor, I certify on behalf of the agency that The Giving Tree - Compassion Care of Delaware (Company Name) will comply with all Federal and Delaware laws and regulations pertaining to equal employment opportunity and affirmative action. In addition, compliance will be assured in regard to Federal and Delaware laws and regulations relating to confidentiality and individual and family privacy in the collection and reporting of data.

29 Del.C. Ch. 100 Freedom of Information Act

Authorized Signature: _____

Title: Executive Director

Date: March 21, 2014



**DELAWARE HEALTH AND SOCIAL SERVICES
REQUEST FOR PROPOSAL**

BIDDERS SIGNATURE FORM

NAME OF BIDDER: The Giving Tree: Compassion Care of Delaware
SIGNATURE OF AUTHORIZED PERSON: [Redacted]
TYPE IN NAME OF AUTHORIZED PERSON: Kathleen Mc Guinness
TITLE OF AUTHORIZED PERSON: Executive Director
STREET NAME AND NUMBER: PO Box 1584
CITY, STATE, & ZIP CODE: Rehoboth, DE 19971
CONTACT PERSON: Kathy Mc Guinness
TELEPHONE NUMBER: [Redacted]
FAX NUMBER: [Redacted]
DATE: 03/21/2014
BIDDER'S FEDERAL EMPLOYERS IDENTIFICATION NUMBER: [Redacted]

THE FOLLOWING MUST BE COMPLETED BY THE VENDOR:

AS CONSIDERATION FOR THE AWARD AND EXECUTION BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES OF THIS CONTRACT, THE (COMPANY NAME) The Giving Tree of Delaware HEREBY GRANTS, CONVEYS, SELLS, ASSIGNS, AND TRANSFERS TO THE STATE OF DELAWARE ALL OF ITS RIGHTS, TITLE AND INTEREST IN AND TO ALL KNOWN OR UNKNOWN CAUSES OF ACTION IT PRESENTLY HAS OR MAY NOW HEREAFTER ACQUIRE UNDER THE ANTITRUST LAWS OF THE UNITED STATES AND THE STATE OF DELAWARE, RELATING THE PARTICULAR GOODS OR SERVICES PURCHASED OR ACQUIRED BY THE DELAWARE HEALTH AND SOCIAL SERVICES DEPARTMENT, PURSUANT TO THIS CONTRACT.



Appendix A: Products

This Attachment lists the products and we intend to offer our patient members.

1. Products

A. Cannabis

This is finished, dried, manicured, cured Product that will be sold in .5g increments. Over time, The Giving Tree plans to add cannabis in pre-rolled options for patients whose desired method of consumption is through smoking. We plan to begin with a select few strains including:

- Grand Daddy Purple
- Trainwreck
- Blue dream
- Purple Kush
- Cannatonic
- OG Kush
- Romulan

Eventually moving to 25-50 medicinal varieties of cannabis, including but not limited to:

- Blue Dream
- Big Bud
- Blueberry
- Bubblegum
- Bull Rider
- Catatonic
- Chocolope
- Durban Poison
- Fro-g
- Grand Daddy Purple
- Grape Ape
- Hindu Skunk
- Jack Herer
- Jack the Ripper
- Jilly Bean
- LA Confidential
- Lemon Haze
- Mango
- Maui Wowie
- Mendo Purps
- MK Ultra Purple Pheno
- Northern Lights
- Odyssey
- OG Kush
- Purple Kush
- Romulan
- Sour Bubble
- Sour Grapes
- Super Silver Haze
- Vortex
- White Widow
- XJ 1



Appendix B: Services

Offering peripheral services is becoming more and more common for cannabis dispensaries, and we believe it will become an industry standard. Some of the alternative/complementary therapies and peripheral support services that are commonly offered and that The Giving Tree will look into offering are:

- Art and music therapy
- Classes on pain management, wellness strategies, and oncology issues
- Condition-based support groups (e.g., women's cancer support group, chronic pain support, HIV/AIDS support group)
- Counseling services focusing on proper medication practices and avoiding substance misuse
- Educational seminar/support group for those new to medical cannabis
- Group and individual yoga instruction
- Guided meditation
- Homeopathy
- Individual counseling
- Integrative health counseling
- Medication interaction counseling
- Peer counseling
- Reiki
- Resource services (referrals for a wide variety of essential life, social and economic services)
- Therapeutic massage

While we cannot, offer all of these extra peripheral services, we intend to open our doors in Phase II offering those we think are most important to the wellness and needs of medical cannabis patients:

Many of these services will be available to members in later stages of the center. The retention of all services will be dependent on patient demand. Should we realize a more popular service we may phase out the less popular ones and explore other options for our patients? Furthermore, we expect to complete our Community Needs Analysis during Phase I of our operations. Based on patient and community input and the recommendation of our Community Needs Advisory Board, we will then implement further peripheral services (consideration not limited to those on the above list). As revenues grow and we expand our facility capacity in Phase II and beyond, more services will be phased in according to the priorities established by our Community Needs Analysis.



Appendix C: Ailment Specific Strains

Below is information about the purported effectiveness of various strains of marijuana for certain health effects.⁶

Afghanica	Nausea, pain
Afghanie x Haze	PMS
AK-47	Pain, nausea, depression, insomnia, headache
Alien Train Wreck	Asthma
Apollo 13	Back pain
Auntie Em	Crohn's Disease, MS
Aurora B	Nausea, joint pain, arthritis
Berry-Bolt	Insomnia, joint pain
Big Bang	Used to sedate and relieve stress & anxiety amongst sufferers of severe anxiety, etc.
Big Kahuna	Herniated disc pain, arthritis
Black on Blue Widow	HIV, back pain
Black Vietnamese	Nausea, muscle spasms, pain
Blue Fruit	Crohn's Disease, muscle spasms
Blue Moonshine	Anxiety, depression, insomnia
Blue Satellite x Jack Herer	Depression, nausea
Blue Satellite	Pain, nausea, insomnia, anxiety, muscle tension
Blueberry	Nausea, insomnia, pain
Bog Sour Bubble	Pain, anxiety
Bonzo Bud	Body pain, migraine
Budacolumbia	Nausea
Burmaberry	Migraine, depression
Burmese kush	Anxiety, depression
C99 x Great White Shark	Anxiety
Cali-O	Nausea
Catalyst	PMS
Cinderella 99	Nausea
CIT	Pain, nausea, insomnia
Citral	Insomnia
Cripple Creek	Ankylosing Spondilitis, Hepatitis C, Degenerative Disc Disease, IBS, Interstitial Cystitis, Chronic Rotator Cuff Disease
Deep Chunk	Joint pain, insomnia
Dynamite	Asthma, Crohn's Disease, Hepatitis C
NYC Sour Diesel	Edema, epilepsy, fibromyalgia, radiculopathy
El Nino	Nausea, insomnia
Fieldale Haze	Anxiety, back pain
Fig Widow	Back pain, psychosis

⁶ Michigan Medical Marijuana Association



Firecracker	Anxiety, depression, nausea
G13 x HP	Nausea, joint pain, insomnia
G-13	Depression, pain, ADD, ADHD
Grapefruit	Arthritis, Hepatitis C, pain, nausea
Green Queen	Epilepsy, neck/spine pain
Green Spirit x Timewarp x Herijuana	RLS, insomnia, migraine, joint pain
Green Spirit	Nausea, headache, body pain
Herijuana x Trainwreck	Diabetic neuropathy, joint pain, insomnia, MS
Herijuana	Pain, nausea, insomnia
Ice Princess x Bubblegum	Migraine
Jack Herer	Anxiety, fibromyalgia
Juicy Fruit	Insomnia, joint pain, anxiety
Kali Mist	Nausea, depression
Kal-X	Body pain
Killer Queen	Depression, back pain
Krinkle x Kush x Freezeland	MS muscle spasms
Leda Uno	Insomnia
Legends Ultimate Indica x Herijuana	Muscle spasms, pain
Legends Ultimate Indica	Insomnia, IBS
Lemon Chemo	Insomnia, back pain, migraine
Lemon Haze	RLS, chronic fatigue
Lifesaver	Nausea, headache, pain, insomnia
Lollipop	Cachexia, degenerative bone/disc disease, edema, general pain, general seizures, glaucoma, migraine, MS, nausea, Post-Traumatic Stress Disorder
Lowryder	Nausea, pain, headache
LSD	Nausea, anxiety, depression, headache
M-39	Depression
Magic Crystal	Migraine, PMS, depression, SADS, mania, nausea
Mango x Northern Lights # 5	Pain, nausea, insomnia, anxiety
Mango	Back pain, nausea
Masterkush	Nausea
Medicine Woman	Diabetic neuropathy, general pain, general seizures, glaucoma, Hepatitis C, muscle spasms, nausea, radiculopathy
Misty	Hepatitis C, back pain, insomnia, nausea
Motarebel Oguana Kush	Nerve Pain, muscle spasms, back pain, headache, insomnia
Mountainberry	Insomnia, migraine, pain
Northern Lights # 1	Arthritis
Northern Lights # 2	Nausea, insomnia
Northern Lights x Jamaican	Arthritis
Northern Lights x Cinderella 99	Depression
Northern Lights x Shiva	Body pain, back pain, toothache
Northern Lights	Anxiety, radiculopathy, insomnia



Northernberry	Pain
Oregon 90	Insomnia, joint pain, RLS, pain, nausea
Original Mystic	Epilepsy
OG kush purple	
Phaght Betty	Cachexia, degenerative bone/disc disease, Post-Traumatic Stress Disorder
Queen Bee	Neck/spine pain
Sensi Star	Migraine
Shiskaberry x Dutch Treat	Migraine, anxiety, insomnia, nausea
Shiskaberry x Plant	Anxiety, nausea
Skunk # 1	Nausea
Snow White	PMS
Sour cream	Insomnia, joint pain, nausea
Stardust 13	Pain, nausea, insomnia
Strawberry Cough	Back pain, depression
Super Impact x AK-47	Pain, insomnia
Super Impact	Nausea, insomnia, muscle pain, depression, anxiety, SADS, mania
Super Silver Haze	Nausea, depression
Super Thai	Depression
Sweet Blu	Degenerative bone/disc disease, diabetic neuropathy, edema, fibromyalgia, muscle spasms, nausea, neck/spine pain
Sweet Tooth # 3	Depression
Trainwreck x Herijuana	Nausea
Trainwreck	Anxiety, arthritis, diabetic neuropathy, depression
TW x LUI	Arthritis, nausea
TX	Arthritis, asthma, general pain, general seizures, glaucoma, MS
Ultra Green	Insomnia
Wakeford	Anxiety, nausea, insomnia
White Rhino - aka Medicine Man	Body pain, back pain, joint pain, insomnia
White Russian	Pain, nausea
White Widow x Big Bud	Depression
White Widow	Cachexia, Hepatitis C, Post-Traumatic Stress Disorder



Appendix D: HIPAA Overview

K. HIPAA Compliance Summary

HIPAA required the Secretary of the U.S. Department of Health and Human Services (HHS) to develop regulations protecting the privacy and security of certain health information. To fulfill this requirement, HHS published what are commonly known as the HIPAA Privacy Rule and the HIPAA Security Rule.⁷

1. HIPAA Privacy Rule

The Standards for Privacy Rule establishes, for the first time, a set of national standards for the protection of certain health information. HHS issued the Privacy Rule to implement this requirement of HIPAA.

The Privacy Rule standards address the use and disclosure of individuals' health information—called “protected health information” by organizations subject to the Privacy Rule — called “covered entities,” as well as standards for individuals' privacy rights to understand and control how their health information is used. Within HHS, the Office for Civil Rights (“OCR”) has responsibility for implementing and enforcing the Privacy Rule with respect to voluntary compliance activities and civil money penalties.

A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well-being.

- a. Protected Health Information. The Privacy Rule protects all “individually identifiable health information” held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information “protected health information (PHI).” “Individually identifiable health information” is information, including demographic data, that relates to:
 - a. The individual's past, present or future physical or mental health or condition,
 - b. The provision of health care to the individual, or

⁷ This is an excerpt of key elements of the HIPAA rules including who is covered, what information is protected, and how protected health information can be used and disclosed. Because it is an overview of the Privacy Rule, it does not address every detail of each provision. www.hhs.gov/ocr/privacy/hipaa/ If there is a conflict between this summary, our policies and procedures, and the statute, the statute will govern our policies and procedures regarding HIPAA compliance.



- c. The past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a basis to believe it can be used to identify the individual. Individual identifiable health information includes many common identifiers (name, address, birth date, Social Security Number).

The Privacy Rule excludes from protected health information employment records that a covered entity maintains in its capacity as an employer and education and certain other records subject to, or defined in, the Family Educational Rights and Privacy Act, 20 U.S.C. §1232g.

- b. **General Principle for Uses and Disclosures.** A major purpose of the Privacy Rule is to define and limit the circumstances in which an individual's protected health information may be used or disclosed by covered entities. A covered entity may not use or disclose protected health information, except either: (1) as the Privacy Rule permits or requires; or (2) as the individual who is the subject of the information (or the individual's personal representative) authorizes in writing. A covered entity must disclose protected health information in only two situations: (a) to individuals (or their personal representatives) specifically when they request access to, or an accounting of disclosures of, their protected health information; and (b) to HHS when it is undertaking a compliance investigation or review or enforcement action.
- c. **Permitted Uses and Disclosures.** A covered entity is permitted, but not required, to use and disclose protected health information, without an individual's authorization, for the following purposes or situations: (1) To the Individual (unless required for access or accounting of disclosures); (2) Treatment, Payment, and Health Care Operations; (3) Opportunity to Agree or Object; (4) Incident to an otherwise permitted use and disclosure; (5) Public Interest and Benefit Activities; and (6) Limited Data Set for the purposes of research, public health or health care operations. Covered entities may rely on professional ethics and best judgments in deciding which of these permissive uses and disclosures to make.
- d. **Authorized Uses and Disclosures.** A covered entity must obtain the individual's written authorization for any use or disclosure of protected health information that is not for treatment, payment or health care operations or otherwise permitted or required by the Privacy Rule. A covered entity may not condition treatment, payment, enrollment, or benefits eligibility on an individual granting an authorization, except in limited circumstances. An authorization must be written in specific terms. It may allow use and disclosure of protected health information by the covered entity seeking the authorization, or by a third party. Examples of disclosures that would require an individual's authorization include disclosures to a life insurer for coverage purposes, disclosures to an employer of the results of a pre-employment physical or lab test, or disclosures to a pharmaceutical firm for their own marketing purposes.



- a. All authorizations must be in plain language, and contain specific information regarding the information to be disclosed or used, the person(s) disclosing the information, the person(s) receiving the information, expiration, right to revoke in writing, a
- e. Marketing. Marketing is any communication about a product or service that encourages recipients to purchase or use the product or service. The Privacy Rule carves out the following health-related activities from this definition of marketing:
 - a. Communications to describe health-related products or services, or payment for them, provided by or included in a benefit plan of the covered entity making the communication;
 - b. Communications about participating providers in a provider or health plan network, replacement of or enhancements to a health plan, and health-related products or services available only to a health plan's enrollees that add value to, but are not part of, the benefits plan;
 - c. Communications for treatment of the individual; and
 - d. Communications for case management or care coordination for the individual, or to direct or recommend alternative treatments, therapies, health care providers, or care settings to the individual.

Marketing also is an arrangement between a covered entity and any other entity whereby the covered entity discloses protected health information, in exchange for direct or indirect remuneration, for the other entity to communicate about its own products or services encouraging the use or purchase of those products or services. A covered entity must obtain an authorization to use or disclose protected health information for marketing, except for face-to-face marketing communications between a covered entity and an individual, and for a covered entity's provision of promotional gifts of nominal value. No authorization is needed, however, to make a communication that falls within one of the exceptions to the marketing definition. An authorization for marketing that involves the covered entity's receipt of direct or indirect remuneration from a third party must reveal that fact.

- f. Limiting Uses and Disclosures to the Minimum Necessary. A central aspect of the Privacy Rule is the principle of "minimum necessary" use and disclosure. A covered entity must make reasonable efforts to use, disclose, and request only the minimum amount of protected health information needed to accomplish the intended purpose of the use, disclosure, or request. A covered entity must develop and implement policies and procedures to reasonably limit uses and disclosures to the minimum necessary. When the minimum necessary standard applies to a use or disclosure, a covered entity may not use, disclose, or request the entire medical record for a particular purpose, unless it can specifically justify the whole record as the amount reasonably needed for the purpose.
- g. Access and Uses. For internal uses, a covered entity must develop and implement policies and procedures that restrict access and uses of protected health information based on the specific roles of the members of their workforce. These policies and



procedures must identify the persons, or classes of persons, in the workforce who need access to protected health information to carry out their duties, the protected health information to which access is needed, and any conditions which they need the information to do their jobs.

- h. **Disclosures and Requests for Disclosures.** Covered entities must establish and implement policies and procedures (which may be standard protocols) for *routine, recurring disclosures, or requests for disclosures*, that limits the protected health information disclosed to that which is the minimum amount reasonably necessary to achieve the purpose of the disclosure. Individual review of each disclosure is not required. For non-routine, non-recurring disclosures, or requests for disclosures that it makes, covered entities must develop criteria designed to limit disclosures to the information reasonably necessary to accomplish the purpose of the disclosure and review each of these requests individually in accordance with the established criteria.
- i. **Access.** Except in certain circumstances, individuals have the right to review and obtain a copy of their protected health information in a covered entity's designated record set. The "designated record set" is that group of records maintained by or for a covered entity that is used, in whole or part, to make decisions about individuals, or that is a provider's medical and billing records about individuals or a health plan's enrollment, payment, claims adjudication, and case or medical management record systems.

2. *HIPAA Security Rule*

The Security Standards for the Security Rule establish a national set of security standards for protecting certain health information that is held or transferred in electronic form. The Security Rule operationalizes the protections contained in the Privacy Rule by addressing the technical and non-technical safeguards that organizations called "covered entities" must put in place to secure individuals' "electronic protected health information" (e-PHI). Within HHS, OCR has responsibility for enforcing the Privacy and Security Rules with voluntary compliance activities and civil money penalties.

Prior to HIPAA, no generally accepted set of security standards or general requirements for protecting health information existed in the health care industry. At the same time, new technologies were evolving, and the health care industry began to move away from paper processes and rely more heavily on the use of electronic information systems to pay claims, answer eligibility questions, provide health information and conduct a host of other administrative and clinically based functions.

Today, providers are using clinical applications such as computerized physician order entry systems, electronic health records, and radiology, pharmacy, and laboratory systems. Health plans are providing access to claims and care management, as well as member self-service applications. While this means that the medical workforce can be more mobile and efficient (i.e., physicians can check patient records and test results from



wherever they are), the rise in the adoption rate of these technologies increases the potential security risks.

A major goal of the Security Rule is to protect the privacy of individuals' health information while allowing covered entities to adopt new technologies to improve the quality and efficiency of patient care. Entities regulated by the Privacy and Security Rules are obligated to comply with all of their applicable requirements and should not rely on this summary as a source of legal information or advice.

- a. **Whom does the Security Rule cover?** The Security Rule applies to health plans, health care clearinghouses, and to any health care provider who transmits health information in electronic form in connection with a transaction for which the Secretary of HHS has adopted standards under HIPAA (the "covered entities"). The HITECH Act of 2009 expanded the responsibilities of business associates under the Privacy and Security Rules. HHS is developing regulations to implement and clarify these changes.
- b. **Electronic Protected Health Information.** The HIPAA Privacy Rule protects the privacy of individually identifiable health information, PHI. The Security Rule protects a subset of information covered by the Privacy Rule, which is all individually identifiable health information a covered entity creates, receives, maintains or transmits in electronic form. The Security Rule does not apply to PHI transmitted orally or in writing.
- c. **General Rules**
 - The Security Rule requires covered entities to maintain reasonable and appropriate administrative, technical, and physical safeguards for protecting e-PHI. Specifically, covered entities must:
 1. Ensure the confidentiality, integrity, and availability of all e-PHI they create, receive, maintain or transmit;
 2. Identify and protect against reasonably anticipated threats to the security or integrity of the information;
 3. Protect against reasonably anticipated, impermissible uses or disclosures; and
 4. Ensure compliance by their workforce.

The Security Rule defines "confidentiality" to mean that e-PHI is not available or disclosed to unauthorized persons. The Security Rule's confidentiality requirements support the Privacy Rule's prohibitions against improper uses and disclosures of PHI. The Security rule also promotes the two additional goals of maintaining the integrity and availability of e-PHI. Under the Security Rule, "integrity" means that e-PHI is not altered or destroyed in an unauthorized manner. "Availability" means that e-PHI is accessible and usable on demand by an authorized person.



HHS recognizes that covered entities range from the smallest provider to the largest, multi-state health plan. Therefore the Security Rule is flexible and scalable to allow covered entities to analyze their own needs and implement solutions appropriate for their specific environments. What is appropriate for a particular covered entity will depend on the nature of the covered entity's business, as well as the covered entity's size and resources. Therefore, when a covered entity is deciding which security measures to use, the Rule does not dictate those measures but requires the covered entity to consider:

- a. Its size, complexity, and capabilities,
- b. Its technical, hardware, and software infrastructure,
- c. The costs of security measures, and
- d. The likelihood and possible impact of potential risks to e-PHI.

Covered entities must review and modify their security measures to continue protecting e-PHI in a changing environment.

- d. **Administrative Safeguards.** A covered entity must identify and analyze potential risks to e-PHI, and it must implement security measures that reduce risks and vulnerabilities to a reasonable and appropriate level. A covered entity must designate a security official who is responsible for developing and implementing its security policies and procedures.
 - a. **Information Access Management.** Consistent with the Privacy Rule standard limiting uses and disclosures of PHI to the "minimum necessary," the Security Rule requires a covered entity to implement policies and procedures for authorizing access to e-PHI only when such access is appropriate based on the user or recipient's role (role-based access).
 - b. **Workforce Training and Management.** A covered entity must provide for appropriate authorization and supervision of workforce members who work with e-PHI. A covered entity must train all workforce members regarding its security policies and procedures, and must have and apply appropriate sanctions against workforce members who violate its policies and procedures.
 - c. **Evaluation.** A covered entity must perform a periodic assessment of how well its security policies and procedures meet the requirements of the Security Rule.
- e. **Physical Safeguards.** A covered entity must limit physical access to its facilities while ensuring that authorized access is allowed. A covered entity must implement policies and procedures to specify proper use of and access to workstations and electronic media. A covered entity also must have in place policies and procedures



regarding the transfer, removal, disposal, and re-use of electronic media to ensure appropriate protection of e-PHI.

f. **Technical Safeguards**

- a. **Access Control.** A covered entity must implement technical policies and procedures that allow only authorized persons to access e-PHI.
- b. **Audit Controls.** A covered entity must implement hardware, software, and/or procedural mechanisms to record and examine access and other activity in information systems that contain or use e-PHI.
- c. **Integrity Controls.** A covered entity must implement policies and procedures to ensure that e-PHI is not improperly altered or destroyed. Electronic measures must be put in place to confirm that e-PHI has not been improperly altered or destroyed.
- d. **Transmission Security.** A covered entity must implement technical security measures that guard against unauthorized access to e-PHI that is being transmitted over an electronic network.



Appendix E: Full Resumes



KATHLEEN MCGUINNESS

Ms. McGuinness is the founding president of Rehoboth Beach Main Street and has sat on numerous boards and committees. She is also the founder, Chair and annual fundraising chair of the successful operation of The Rehoboth Fireworks every July 4th in downtown Rehoboth. Ms. McGuinness has been a Rehoboth Beach city commissioner for 12 years, she spearheaded and fought for several projects and funding including the multimillion streetscape infrastructure upgrade and beautification project, the traffic circle, the Boardwalk renovation to name a few. She chaired the Personnel committee for 10 of those years, as well as the Bandstand/Convention Hall Special events and sat on several others.

She has proven she can start and run a non-profit, a successful business and believes in teamwork to manage any hurdles that may arise. As a Pharmacist, she has years of compounding experience under sterile and non-sterile conditions making, creams, ointments, troches, lip balm, suppositories.

She has extensive care giving, empathetic skills. Ms. McGuinness is Black Belt in Tae Kwon Do, an avid Cross-fitter and enjoy tennis, golf and snowboarding when possible. She has the will, the drive and the belief that medicinal marijuana can, if cultivated and prepared properly provide a world of relief to those who fit the criteria, noting we are born with cannabinoid receptors in our brain. She is eager to work hard to ensure a professional, wellness approach to this project ensuring a sound product under strict guidelines and high-level security.

Delaware Pharmacist Society

Former Representative for DE to NCPA's 3rd Party committee

Bachelors of Science in Biology pre-med Florida Institute of Technology

9 Months DNA research and DNA Fingerprinting with Gel electrophoresis FIT 1990

Bachelor of Science in Pharmacy- Northeastern University 1993

Cannabis Career Institute Graduate 2013

Licenses

DE Pharmacist and Certified Immunizer

Licensed Realtor DE since 2002

Consultant Pharmacist Seaside Endoscopy

Per Diem Pharmacist Safeway Rehoboth Beach and Dover

Accomplishments

1997 DE Bowl of Hygeia Recipient for Outstanding Community Service



Fireworks founder and Committee Chair 1997- present
1999 DE BPW Businesswomen of the Year
Owned and operated Rehoboth Pharmacy 1994-2002
12 years City of Rehoboth Beach Delaware City Commissioner
2001 State of Delaware “Tourism Person of the Year”,
City RB Chair Personnel Committee 2000-2009
City RB Chair Bandstand Special Events 2002-2008
Founding President of National Award winner Rehoboth Beach Main Street.
Past treasurer and past secretary of RBMS
Community: sit and have sat on numerous boards, committees, liaison to both, and non-profits.
Vote for Pete Schwarzkopf Treasurer election 1 and re-election 1
FBI Citizens Academy (Baltimore Division) Graduate 2009
Delaware Medical Reserve Corp Volunteer 2008-present

References

Dr Blair Jones, DDS 29 Del.C. Ch. 100 Freedom of Informal
Representative Pete Schwartzkopf 14th district 29 Del.C. Ch. 100 Freedom of Informal
Former Rehoboth City Manager Greg Feresse 29 Del.C. Ch. 100 Freedom of Informal
County Councilman George Cole 29 Del.C. Ch. 100 Freedom of Informal



STEPHANIE BARTAL LUBITZ, CPA

Ms. Lubitz has over 20 years of experience in varying accounting fields. She has provided both operational and programmatic support to the varying companies and organizations listed below. She has directed financial audits and provided recommendations for procedural improvements in both in house and consulting positions. Ms. Lubitz has prepared financial statements for all types of entities and has knowledge of healthcare, bio-technology, and non-profit auditing and accounting systems. Ms. Lubitz will provide The Giving Tree with valuable financial procedures to stay compliant with all rules and regulations and be accurate in all aspects of our recordkeeping.

PROFESSIONAL EXPERIENCE:

GREENSPRING CONSULTING, LLC (November 2009 to present)

Integrity Consulting, LLC

Director of Finance

Internal accounting and consulting on various projects with secured secret level clearance.

Providing both operational and programmatic support to the organization.

Direct financial audits and provide recommendations for procedural improvements.

Oversee daily operations of the accounting department.

Monitor and analyze monthly operating results against budget.

Assessment of options for health insurance, deferred compensation and credit facilities.

Implementation of strong internal control processes.

Texas Healthcare Realty, LLC

Director of Finance

Preparation of financial statements for all entities

Assist in HUD audits and preparation of audit work papers

Preparation of all tax returns (40 entities) in multiple states

Century 21 Downtown

Accounting Assistance



Generation and execution of the financial statements for 2010 and 2011
Preparation of the tax returns for all five entities
Assist with IRS audit and preparation

SC&H Group, LLC

Senior Manager (November 2007 – November 2009)

Managed engagement teams on healthcare, technology, biotechnology, non-profit and small business clients, which includes providing consulting, audit, review, and compilation services. Responsible for marketing and strategic planning for all healthcare clients and prospects. Introduced existing clients to other firm service lines and was able to close cross-sell engagements.

Research of technical issues on engagements, documented issues, and presented relevant guidance to client personnel.

Responsible for management of 10-15 manager, senior, staff and intern level employees. Career coach and mentor for professionals from senior to manager level.

Smart & Associates, LLP

Senior Manager (January 2004 – November 2007)

Managed engagements teams and overseeing attest services ensuring compliance with accounting, governmental and auditing standards. Experience includes agreed upon procedure audits, projections, Sarbanes Oxley, A-133 audits.

Experience in vast array of industries including healthcare, real estate, non-profit and small business.

Overseeing of 10-12 staff at various levels in the firm's Accounting and Auditing department.

Prepared RFP's and attended all proposal meetings with potential clients.

Established goals and procedures for the Baltimore office.

Trained staff members on work paper techniques, professional standards

Assisted in the hiring, recruiting, and training of new staff.

American Express Tax & Business Services

(Formerly Wolpoff & Company, LLP)

Staff Accountant to Manager (September 1994 - December 2003)

Provided audit, review and compilation services for various healthcare, not-for-profit and small business clients.

Experience included attest work with Not-for-Profits, HUD facilities and Continuing Care Retirement Communities (CCRC's).

Prepared and reviewed various cost reports including: Medicare, Medicaid including the following states: Maryland, Delaware, Pennsylvania, Florida and DC.

Projections, Z-score analysis, consulting for start-ups.

Volunteered time monthly at the UMBC Incubator to all emerging business and start-up companies

Tax return preparation.

Medical Management Sciences

Staff Accountant (May 1991 – January 1993)



VOLUNTEER EXPERIENCE

The Junior League of Baltimore, Inc.

President and CEO

- The Junior League of Baltimore (JLB) is an organization of 400 women committed to promoting voluntarism, developing the potential of women and improving communities through the effective action and leadership of trained volunteers. Its purpose is exclusively educational and charitable.
- Served as chief executive officer with \$450,000 budget with responsibility for policy administration, financial and property management, strategic planning and organizational continuity. Presided at meetings of the JLB including Board of Directors, Management Committee, Community Resource Board, Audit Committee and the Personnel Committee meetings. Execution of all contracts, letters of agreement, and letters of intent on behalf of the JLB. Performed annual update of bylaws and operational policies.
- Managed over a staff of 6 employees.
- Served as JLB's spokesperson on television, stage and other events.
- Managed volunteers responsible for 35,000 hours of volunteer service in Baltimore donated by JLB members.
- Prior leadership positions included President Elect, graduated from Leadership Baltimore County class 2008-2009; Financial Director of the JLB Capital Campaign, interviewed banks for financing, assisted in raising \$1.2 million in the capital campaign and tracking of pledge payments; Finance Vice President, responsible for strategic planning and oversee public relations activities for all fundraisers; Board Treasurer, oversees the budget and auditing process; Chair of JLB Thrift Store, led a 20-member committee to raise \$252,000 for the JLB mission; Co-chair of Fundraiser, led a 25-member committee to organize a 3-day fundraiser include gala, house tour and offsite lectures.

EDUCATION:

LOYOLA UNIVERSITY MARYLAND

Bachelor of Business Administration, Degree in Accounting, May 1991

Masters of Science in Finance, January 2000

Certified Public Accountant, May 1993

AWARDS: Mary Goodwillie Award for exceptional community service (2007)

Baltimore SmartCEO "Top 50 CPA's in Baltimore" (July 2005)

Awarded American Express TBS Honor Award (Year 2000)



KATHRYN GREER THOMPSON

Ms. Thompson has particular skills related to the various marijuana strains, their active medical use of marijuana constituents (spectrum of cannabinoids), and the healing effects that they impart. She has knowledge of the vast array of diseases, syndromes, disorders, and ailments that medical marijuana use benefits. She can explain in detail the different types of medical marijuana ingestion, the pros and cons of each type of ingestion, and which types are best for different diseases, syndromes, disorders, and ailments. Her background lies in human anatomy, physiology, and pathologies. Ms. Thompson also has knowledge of herbal compounding (making herbal medicines) that can be applied to compounding with medical marijuana and of medicinal herbs, supplements, and nutrition (including whole/natural foods and organic foods).

Her objective is to help maintain integrity in the operation of Delaware's first medical marijuana dispensary and to ensure that our patients will be served with the utmost respect and care by knowledgeable, compassionate members.

Qualification information:

Address

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted Address]

Date of Birth

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted Date of Birth]

Criminal Background Check last one completed February 2013



STEVE MCGUINNESS

MR. MCGUINNESS HAS BEEN A PROMINENT MEMBER OF THE COMMUNITY FOR MANY YEARS, AND COMMITMENT AND SERVICE TO A WIDE RANGE OF ASSOCIATIONS AND COMMITTEES WILL PROVIDE A VALUABLE VOICE FOR THE GIVING TREE.

Born in ^{29 Del.C. Ch. 100 Freedom of Information Act} [REDACTED].
^{29 Del.} [REDACTED] yrs. old

Resident of DE for over 30 years

Member of The Pilots Association for the Bay and River Delaware

Possess a US Coast Guard license as Chief Mate

Former member of Architectural Review Committee Henlopen Acres

Former Commissioner Henlopen Acres

Meals on Wheels driver for three years

Former Board Member of Rehoboth Beach Homeowners Assoc.

Happily married to a Beautiful young lady with three lovely children (and two dogs)



KENNETH R. MORRIS

Mr. Morris has almost 20 years of experience in the legal field. He has knowledge in the area of commercial litigation and appeals, with an emphasis in complex commercial litigation, breach of contract, employment law disputes, insurance disputes, intellectual property issues, and construction law. He will provide a varying array of knowledge to The Giving Tree across numerous relevant legal fields.

In addition to appearing in state and federal court, Mr. Morris has represented numerous clients in arbitration and mediation in Colorado and California. Among other cases:

In a five-day bench trial in Denver District Court, Mr. Morris and his co-counsel won a substantial verdict for their client, a large design/build firm, under Colorado's Mechanic's Lien Trust Fund Statute, C.R.S. § 38-22-127.

Mr. Morris represented homebuyers in a protracted fraud and construction defect case, ultimately securing a substantial settlement from the sellers and their broker.

Mr. Morris secured a sizeable settlement in negligence and inverse condemnation action against a local municipality and an uphill neighbor after a landslide caused significant damage to his client's property.

Mr. Morris successfully defended a general contractor against breach of contract and construction defect claims. All claims against the general contractor were dismissed, and the client received a settlement payment in his favor.

In a three-day arbitration arising out of the sale of a company, Mr. Morris successfully defended the seller's estate against claims of fraud and negligence, and won a six-figure arbitration award in his client's favor.

In a protracted property access dispute involving multiple parties, Mr. Morris negotiated a global settlement which provided for an access easement for his client's land-locked parcel, permitting him to develop his property.

In a dispute over pension rights for California public employees, Mr. Morris drafted the appellate briefs which reversed the trial court's denial of his clients' claims and established important precedent regarding the pension rights of public employees.

Mr. Morris has successfully represented a number of clients seeking to reverse their insurance carriers' decision to deny coverage for medical claims.

Mr. Morris has also advised various municipalities in Colorado and California on a variety of matters ranging from pension matters to contracts to building codes.

Education

Mr. Morris received his Juris Doctorate in 1995 from the Boalt Hall School of Law at the University of California, Berkeley. While there, he served as an advisor for the Moot Court and Appellate Advocacy Programs, and also was an Associate Editor for the Ecology Law Quarterly and a Law Clerk for the Berkeley Community Law Center.



In June 1992, Mr. Morris received a Masters of Theological Studies from the Divinity School at Duke University in Durham, North Carolina. He graduated summa cum laude, and his thesis, entitled Theological Sources of William Penn's Concept of Religious Tolerance, was published in the Journal of Church and State.

In June 1988, Mr. Morris received a Master's Degree in Christian Ethics from New College Berkeley, in Berkeley, California. His thesis, entitled Puritan Roots of American Universalism, was published in the Scottish Journal of Theology.

In June 1983, Mr. Morris received a Bachelor of Arts in Russian from Carleton College in Northfield, Minnesota. Following graduation, Mr. Morris spent a semester studying at Leningrad State University in St. Petersburg, Russia. Mr. Morris also spent two summers (1982, 1983) honing his Russian language skills at the Summer Slavic Workshop at Indiana University in Bloomington, Indiana.

Bar and Professional Activities

Mr. Morris was admitted to the California Bar in December 1995. He is also admitted to practice before the United States District Court for the Northern and Central Districts of California.

Mr. Morris has been a licensed member of the Colorado Bar since January 2005, and is also admitted to practice before the United States District Court for the District of Colorado and the United States Court of Appeals for the Tenth Circuit.

Mr. Morris was a litigation associate at the San Francisco office of Latham & Watkins LLP for four years following law school, and then practiced general commercial litigation in Marin County, California, as a member at Raghianti Freitas LLP from June 2000 through December 2004. Prior to joining Garlin Driscoll LLC as "Of Counsel" in March 2008, Mr. Morris was "Of Counsel" at Jester & Gibson, LLP in Denver, Colorado.



GEORGE M. YAKSIC

29 Del.C. Ch. 100 Freedom of Information Act

Cell: 29 Del.C. Ch. 100 Freedom of Information Act

Home: 29 Del.C. Ch. 100 Freedom of Information Act

e-mail: 29 Del.C. Ch. 100 Freedom of Information Act

Mr. Yaksic along with his legal background also has over ten years of experience and increasing responsibility and expertise in Hotel and Property Management plus Rentals and Sales in the local Beach Resort environment. He has a Delaware Teaching Certification (Birth to Eight Years Old), Ten years of solid Project Management & Training experience on long and short-term projects with staffs ranging from 15 to 150. He's diverse background and proven customer experience skills make Mr. Yaskic the ideal BudTender for The Giving Tree.

EDUCATION

ANTIOCH SCHOOL OF LAW WASHINGTON, D.C DOCTOR OF JURISPRUDENCE

Antioch School of Law was an ABA accredited twelve month clinical law school that operated as a teaching law firm and satellite office of the Legal Services Corporation in Washington, D.C. Students, closely supervised by faculty and staff, represented indigent clients before courts and Federal and city agencies and performed internships at Federal and city agencies while pursuing traditional legal studies. See attached transcript for a complete listing of legal coursework.

Internships: Office of the Federal Register; U.S. Department of Transportation; U.S. Consumer Product Safety Commission; District of Columbia Rental Accommodations Commission; Lorton Correctional Complex.

Publications: The Federal Employment Discrimination Complaint Process; An Overview, Urban Law Institute, Washington, D.C.; Prisoners' Rights and Remedies: A Practical Handbook for Prisoner Representation, Urban Law Institute, Washington, D.C.

EXPERIENCE

U.S. Senate Select Committee on Indian Affairs, Professional Staff Member.



Revision and codification of Title 25, U.S. Code; Drafting of legislation and amendments regarding land transfer, mineral rights, trust information protection; Preparation of reports and negotiation of legislative support.

KAF Associates, Research Associate/Consultant. Analysis of data and preparation of reports for representation of Native American tribes, businesses and organizations.

Publication: Native American and Alaska Native Participation in Federal Domestic Assistance Programs: Legislative, Regulatory and Administrative Barriers.

Hyatt Legal Services. Managing Attorney. Supervision of staff attorneys and support staff; docket control, court and client relations. Areas of practice included: domestic relations, adult and juvenile criminal defense; bankruptcy, probate and civil litigation.

Litigation Support Consultant/Project Manager. Marketing, design, implementation, enhancement, management and quality control of computer support projects for large scale litigation. Document abstracting, mark-up and digesting, resulting in creation, maintenance and user training of litigation databases. Subject matter included: Superfund sites, nuclear plant construction, rail transportation, and product liability. Employers included: Control Data Corporation, Quorum Systems, Aspen Systems Corporation, and Acumenics Research and Technology.

AFFILIATIONS

U.S. Federal District Court; U.S. Bankruptcy Court; Maryland Circuit and District Courts; Maryland State Bar Association; Prince George’s County Bar Association and Public Defender Program; American Bar Association; American Trial Lawyers Association.

QUALIFICATIONS

Over ten years of experience and increasing responsibility and expertise in Hotel and Property Management plus Rentals and Sales in the local Beach Resort environment. . Delaware Teaching Certification (Birth to Eight Years Old) Ten years of solid Project Management & Training experience on long and short-term projects with staffs ranging from 15 to 150. Law Degree (Private Practice and Federal Legislative Experience).

Experience 2010 Rehoboth Inn Rehoboth Beach, DE

Guest Services Agent/Night Audit

Responsible for all aspects of guest services; cash handling and credit card reconciliation; night audit and security.

2009-2010 U.S. Census Bureau Rehoboth Beach, DE
Enumerator/Group Homes Validation/Recruiting Assistant/Quality Assurance Enumerator

2009-2010 Bootlegger Rehoboth Beach, DE
Sales Associate



Responsible for sales, inventory. Handled liquidation when store closed.

2007-2008 Atlantic Inn Millsboro, DE

General Manager

Responsible for all aspects of management of an eighty-two room hotel. Report to management company regarding rates and occupancy statistics, housekeeping and maintenance matters, and customer service issues. Develop annual budgets and occupancy forecasts. Train staff and monitor performance.

2002-2007 Sleep Inn & Suites Lewes, DE

General Manager

Responsible for all aspects of management of an eighty-room hotel in the coastal Delaware resort area. Report to and interface with management company and franchise representatives regarding rates and occupancy statistics, housekeeping and maintenance matters, and customer service issues.

1996-2002 Star of the Sea Condominium Rehoboth Beach, DE

Resident Manager

On Site manager of year-round oceanfront condominium with 100 residential and five commercial units. Coordinated over 1000 weekly summer rental bookings annually. Oversight of housekeeping, maintenance and office staffs. Preparation of reports to Homeowners Association regarding budgetary, occupancy and facility matters.

Litigation Support Consultant Washington, D.C.

Project Manager and consultant responsible for marketing, design, implementation, management and quality control of computer support projects for large-scale litigation. Supervised the creation and maintenance of databases for public and private sector clientele. Employers included: Aspen Systems Corporation, Acumenics Research & Technology, and Control Data Corporation

Education Denison University Granville, Ohio B.A. with Honors

Majors: Education and English - Secondary School Teaching Certification

Antioch School of Law Washington, D.C. Doctor of Jurisprudence

Certifications Delaware General Teaching Certification (Praxis I ;Praxis II (Education of Young Children-Birth to Eight Years Old)

Choice Hotels International General Manager Core Training

FBI Fingerprint Training

Destination Delaware Training

Delaware Alcoholic Beverage Commission Server Training

Member of Maryland & U.S. District Court Bars (Inactive)

Delaware Real Estate License (Inactive)

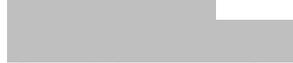


GARY MACIEL

Gary Maciel has been growing marijuana for over 40 years. An expert in energy efficiency and master of innovation, his ability to customize grow spaces is unrivaled. Gary currently oversees medical marijuana grow operations all over the United States. He frequently lectures at Cannabis Career Institute seminars about advanced grow techniques. Ideal for the home closet grower or warehouse operations, Gary's advice will help increase current yields or develop a strategy to diversify our yield. Gary is a long standing faculty member of Cannabis Career Institute. Mr. Maciel's experience and expertise in the field of medical marijuana is unmatched and The Giving Tree welcomes him to our team.

Indoor and Outdoor Growing

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Grow/Dispensary Consultant



BRYAN E KEENAN

Mr. Keenan is a respected attorney with a range of expertise that will be a valuable addition to The Giving Tree. Mr. Keenan has authored numerous writings ranging from professional liability to economics. He has served as Adjunct Professor of Law at Widener Law School and is prominent member of the community serving as a member of the Wilmington Tax Group (Treasurer 2001-2002; President 2002-2003) and the Estate Planning Council of Delaware, Inc. (Director 2005-) as well as numerous sections of the Delaware State Bar Association. The Giving Tree will rely on Mr. Keenan's expertise to stay compliant with all regulations put forth.

DIRECTOR GORDON, FOURNARIS & MAMMARELLA, P.A.

P: 29 Del.C. Ch. 100 Freedom of Information [REDACTED] F: 29 Del.C. Ch. 100 Freedom of Information [REDACTED]

Email: 29 Del.C. Ch. 100 Freedom of Information Act [REDACTED]

BRYAN E. KEENAN is a Director of the Wilmington, Delaware, law firm of Gordon, Fournaris & Mammarella, P.A., where his main areas of practice are taxation, business transactions and business law. His practice encompasses wealth transfer vehicles, including family limited partnerships, limited liability companies, charitable trusts and private foundations. Bryan received his B.A. degree, cum laude, and his J.D. degree from Syracuse University, and his LL.M. degree in Taxation from Temple University. Bryan is a member of the Business Law, Law Practice Management, Real Property and Probate, and Taxation Sections of the American Bar Association and the Corporation Law, Estates and Trusts, Taxation and Employment Law Sections of the Delaware State Bar Association. Bryan is admitted to practice in the state courts of Delaware and Pennsylvania, the United States District Court of Delaware, the United States Court of Claims and the United States Tax Court.



AIMEE FULCHINO

Ms. Fulchino has extensive experience as business owner, board member and CPA. In her accounting career, Ms. Fulchino worked with a wide variety of healthcare entities including hospitals, rehabilitation centers, assisted living facilities, dialysis centers, skilled nursing facilities, hospice care and home health facilities. She worked as an auditor at a KPMG, one of the top four accounting firms in the U.S, and obtained her CPA license in 1996. After working several years in public accounting, Ms. Fulchino worked at Integrated Health Services, Inc. as the Director of SEC and Financial Reporting where she gain a vast knowledge of accounting procedures and financial reporting. After leaving the accounting field, Ms. Fulchino volunteered for several nonprofits providing leadership, accounting and philanthropic support. She is a Board Member for the Family Tree where she has served for over 4 years in this capacity. In 2011, Ms. Fulchino opened a fitness center where she provides part-time managerial, marketing and accounting support.

PROFESSIONAL EXPERIENCE:

Barre.

Owner and CFO (2011 – present)

Built, developed and inspired a team charged with serving over 2000 customers.

Responsible for revenue growth, marketing and strategic planning.

Serve as marketing spokesperson for television and other news media outlets.

Family Tree

Board Member (2009 - present)

Support of a large non-profit organization in the areas of marketing, accounting and philanthropy.

Integrated Health Services, Inc.

Director of SEC and Financial Reporting (1998 – 2002)

Responsible for all aspects of the financial and Securities and Exchange Commission reporting.

Oversee technical accounting research related to new and proposed accounting standards.

Assists with the implementation, maintenance and review of internal controls and corporate policies and procedures.

KPMG, LLP

Senior Auditor (2005 – 1998)

Lead client audit engagements including planning, executing and directing financial audits.

Supervised, trained and mentored staff associates and interns on audit process.

Researched and analyzed financial statements and audit related issues.



Acquired a working knowledge of the client's business.
Proactively interacted with key client's management to gather information, resolve and make recommendations for business and process improvements.

EDUCATION:

LOYOLA UNIVERSITY MARYLAND

Bachelor of Business Administration, Degree in Accounting, May 1995

Masters of Science in Finance, 1996

GEOFFREY K. DAVID

29 Del.C. Ch. 100 Freedom of Information Act

[REDACTED]

Geoffrey K. David/Security Consultant

29 Del.C. Ch. 100 Freedom of Information Act

[REDACTED]

Education

High School Graduate – Montgomery Blair HS 1980 (Silver Spring, Md.)

Montgomery Jr. College – 1980-1981

Delaware Technical College – 1982-1984 (Criminal Justice – No degree, approx. 110 credits)

Delaware State Police Academy – 1985 Graduate

Numerous training courses in the area of law enforcement, sensitivity in the workplace training, supervisory training, accident reconstruction training (11 weeks total), and verbal judo training in how to talk to people.

Employment

City of Rehoboth Beach – 1984 (Seasonal Officer for the summer)

City of Lewes Police Department – 1984-1986 (Police Officer)

Delaware River and Bay Authority – 1986-1989 (Police Officer)

City of Milford Police Department – 1989-2011 (Retired in March 2011, undercover narcotics investigations for three years with DEA Task Force, shift supervisor for 9 yrs., canine officer for 3 ½ yrs., numerous investigations which included major crimes). Training in accident reconstruction and use of mapping equipment for scene diagrams as well as plotting scenes and using a prism.

Self-Employed – (2007 to Current) Lawn Care Business, J&K Lawncare, consist of about 35-40 lawn cutting accounts, cutting only, always refer customers to Lawns Unlimited for fertilization programs.

Surfing Crab Restaurant – May 2011-Sept 2013, server, completed daily POS paperwork and balanced monies at the end of each night and completed paperwork for owner.

** Very good with computers, invoicing, organization skills, currently use Quick Books Pro 2013 for invoicing for my lawn business.



References:

- Gary Bailey Milford Police Department** [Redacted] 29 Del.C. Ch. 100 Freedom of Information
- Craig Farren State of Delaware** [Redacted] 29 Del.C. Ch. 100 Freedom of Information
- Shane Young Milford Police Department** [Redacted] 29 Del.C. Ch. 100 Freedom of Information
- Keith Hudson Chief Milford Police Department** [Redacted] 29 Del.C. Ch. 100 Freedom of Information
- Richard Carmean Milford City Manager** [Redacted] 29 Del.C. Ch. 100 Freedom of Information

MICHELE CAREY

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted]

29 Del.C. Ch. 100 Freedom of Information Act

[Redacted] cell

EDUCATION

- Graduated Padua Academy 1980
- Graduated Widner University 1984

WORK HISTORY

1998-present – independent contractor horticulture and landscape architect

Sept 2009- present All Saints Episcopal Church Administrative Assistant—weekly bulletin for 3 services/2 churches/monthly newsletters/special mailings

1990-2004 -Ocean Travel - Travel agent specialist coordinate and secure trips/packages/airfare/accommodations

COMMUNITY OUTREACH/AFFILIATIONS

- Landscape West Rehoboth West side New Beginnings property
- Landscape The Community Resource Center
- Youth Group Leader 2010- present All Saints and St Georges churches
- Led a mission trip to Mexico summer 2013- 50 kids- led summer camp
- Counselor at Vacation Bible School 2011,2012,2013 All Saints
- Volunteer at Cape Henlopen Food Basket (admin/clerical)
- Active member of the St Georges Episcopal Church Women’s Group

REFERENCES FURNISHED UPON REQUEST.



MORGAN MUMFORD/ EXPERT GROWER

29 Del.C. Ch. 100 Freedom of Information Act

[REDACTED]

Dob [REDACTED]

My name is Morgan Mumford I am a native Delawarean. I own and operate a woodworking business called Mumford furniture.

In the early 2000 prop 90 passed in California I took a job working for caregivers of medical marijuana patients in Northern California. They had obtained the permit to grow for a number of patients it was my job to set up their facility. I built greenhouses designed and installed an irrigation system installed solar power and inverter. I built the infrastructure that was the backbone for setting up a self-sustaining organic medical marijuana farm. They recognized my talents for taking on a challenge and getting the job done so that things function very efficiently. When things were up and running I worked on the farm as a caretaker to the plants making sure that they got the right nutrients processing organic fertilizer to feed the plants maintaining, pruning, harvesting, trimming, drying, and curing the medical marijuana plants.



DAVID T. HEANEY / SECURITY CONSULTANT

David T. Heaney

29 Del.C. Ch. 100 Freedom of Information Act

25 years of experience in delivering architectural design and construction services. Expertise in custom design/build solutions for the commercial healthcare & residential markets. Recognized nationally for excellence in design and construction.

Founder & President,

Healthcare Facilities Solutions, Inc., Wilmington, Delaware Rockland Design-Build, Inc., Wilmington, Delaware

Responsible for management of all aspects of operations including design, construction, project management, quality assurance, estimation & business development.

Specializing in design of commercial medical facilities and high-end residential projects that consist of renovations and new construction of commercial properties and residential homes.

Project Engineer/Manager, Williams Service Group Stone Mountain, Georgia

Responsible for start-up & management of multi-million dollar engineering & construction projects. Average project size was \$20,000,000.

Engineer in Training, State of Delaware Department of Transportation, Newark, Delaware

Responsible for supervision and inspections of multiple highway construction projects.

Engineer in Training, Orth Rodgers & Associates, Philadelphia, Pennsylvania

Assisted professional engineers in designing and surveying multiple construction projects.

1992 - 1996

1990 - 1991

1987 - 1989

David Heaney Resume (Continued)

Education:

Awards & Press:

Bachelor of Science Civil Engineering University of Delaware, Newark, Delaware

Rockland has been recognized nationally as one of the best design/build firms in the country as well as one of the top 50 remodelers in the country. Heaney has been published both nationally and locally regarding design and construction expertise.



ART WHEELER/ SUBCONTRACTOR SECURITY

Delaware Camera Systems

Arthur E Wheeler III – President

29 Del.C. Ch. 100 Freedom of Information Act



DOB

29 Del.C. Ch. 100 Freedom of Information Act

Delaware Camera Systems, LLC was founded in September of 2002 to provide affordable state of the art camera technologies to businesses and consumers. We decided (my devoted wife and me), to start this business based on technologies that were always interests of mine and mature them into a successful business that would serve the needs of the community. Video recording and computer technology have always been an hobbies of mine, couple this with my ability to work with my hands, and previous business experience, and it became clear to us in what industry we needed to direct our focus.

As of December 2013, we are currently growing and servicing our customer base of over 200+ sites and over 1000 cameras installed. Our goal was always to keep our finger on the pulse of the latest technologies and how to deliver these technologies at an affordable cost. Over the past twelve years we have grown our offerings to include access control. Access control dovetailed perfectly into our business model as these access systems became network based and a need for our clientele to secure particular areas from the general public and staff that did not need full access to their facilities. Our customers also enjoyed the benefit of knowing the status of their businesses as well as the movements of their employees through a simple web based portal.

Keeping with the philosophy of “If you enjoy what you do, you never go to work”, we started to design and install home theater systems for consumers. This side of our business provide us a revenue stream that was not dedicated to the commercial market and allowed us to harness the training and skills I obtained while in the employ of Toshiba America and Pioneer Electronics. This segment represents about 10% of our total revenue, however I believe it to be a key component of our next venture...



Smart Homes.

Preceding Delaware Camera Systems, LLC. I worked for several technology based over the past 30 Years below is a brief summary:

Lanier (June 2009 – September 2012) Territory Sales Manager – Maintained and grew the Philadelphia market and was recognized multiple times as a Sales Leader.

American Cellular (January 2006 – June 2009) Independent Cellular Sales Agent - Sold business to business cellular products.

Sprint/Nextel (January 2000 – January 2006) - Sales Manager for southern Philadelphia Market. Managed a staff of eight salespeople who sold business to business cellular products.

Toshiba America Consumer Products (January 1990 – January 2000) – Territory Representative for the Baltimore/Washington Market. Sold business to business consumer electronics, managed advertising funding for my dealers in this market as well as creating purchasing programs for my customers to obtain my quotas.

Pioneer Electronics (January 1988 – January 1990) Field Representative – Visited retail locations and trained floor sales people on the features and benefits of our products over the competitions. Covered an area from DC to Maine.

Education:

University of Delaware 1983-1985 Business Major

Brandywine High School - Class President (Senior Year)



ANGELA DAVID/RECEPTIONIST /ADMINISTRATOR

DOB:

29 Del.C. Ch. 100 Freedom of Inform

Address:

29 Del.C. Ch. 100 Freedom of Information Act

Phone:

29 Del.C. Ch. 100 Freedom of Information

Angela David is the owner of Fancy Ang Designs has experience in marketing, graphic design, computer skills and social media, and will be able to use her skills to help The Giving Tree reach out to the local community and beyond.

University of Delaware Bachelors Elementary Education 2013

Major in Elementary Ed with a concentration in Special Education and a Minor in Disabilities Studies

Dean's List

Kappa Delta Pi, International Honor Society in Education

Member of UD's Student Council for Children with Special Needs 2011-2014

Undergraduate Volunteer Tutor for English as a Second Language Student, 2009

Volunteered as a student tutor for the Boys and Girls Club of Delaware 2012

Owner and Designer, *Fancy Ang Designs*

Currently substitute teaching in Milford School District and private nanny

-Social media, graphic design, and marketing consultant/ administrator



Appendix F: Equipment List And Pricing



Price Break Down

Grow Equipment

	Item	Price	Quantity	Total Price	Specific Brand/Model	Where to Buy
Veg Room	Ballast: 1000 Watt Metal Halide	\$110.00		\$0.00		Online/Hydro
	Ballast: 1000 Watt Metal Halide *Top of the Line*	\$250.00	6	\$1,500.00	Hydrofarm Phantom	Online/Hydro
	Bulb: 1000 Watt Metal Halide	\$30.00		\$0.00		Online/Hydro
	Bulb: 1000W Metal Halide *Top of the Line*	\$75.00	6	\$450.00	Hortilux	Online/Hydro
	Reflector	\$150.00	6	\$900.00		Online/Hydro
	Light Rackets *Pair of 2*	\$15.00	6	\$90.00		Online/Hydro
	Carbon Air Filter	\$250.00	1	\$250.00	Can/Phresh	Online/Hydro
	8" Inline Duct Fans	\$110.00		\$0.00	Active Air/Hurricane/Value Line	Online/Hydro
	12" Inline Duct Fans	\$170.00	1	\$170.00	Active Air/Hurricane/Value Line	Online/Hydro
	16" Oscillating Wall Mount Fan	\$50.00	8	\$400.00		Online/Hydro
	25ft 8" Ducting	\$25.00	3	\$75.00		Online/Hydro
	Duct Clamps *pair of 2*	\$12.00	8	\$96.00		Online/Hydro
	Propagation	5 gallon buckets	\$4.00	1	\$4.00	
Fluorescent Cloning Light		\$100.00	2	\$200.00		Online/Hydro
Cloning Trays		\$2.00	10	\$20.00		Online/Hydro
Cloning Domes		\$5.00	10	\$50.00		Online/Hydro
Heating Pad		\$75.00	2	\$150.00		Online/Hydro
Heating Sensor		\$25.00	1	\$25.00		Online/Hydro

Grow Equipment Continued

Flower	Ballast: 1000W High Pressure Sodium	\$110.00		\$0.00		Online/Hydro
	Ballast: 1000 Watt High Pressure Sodium *Top of the Line*	\$250.00	24	\$6,000.00	Hydrofarm Phantom	Online/Hydro
	Bulb: 1000 Watt High Pressure Sodium	\$25.00		\$0.00		Online/Hydro
	Bulb: 1000 Watt High Pressure Sodium *Top of the Line*	\$75.00	24	\$1,800.00	Hortilux	Online/Hydro
	Reflector	\$150.00		\$0.00		Online/Hydro
	Reflector *Top of the Line*	\$250.00	24	\$6,000.00		Online/Hydro
	Light Rackets	\$15.00	24	\$360.00		Online/Hydro
	Carbon Air Filter	\$250.00	4	\$1,000.00	Can/Phresh	Online/Hydro
	8" Inline Duct Fans	\$110.00	4	\$440.00	Active Air/Hurricane/Value Line	Online/Hydro
	12" Inline Duct Fans	\$150.00		\$0.00		Online/Hydro
	16" Oscillating Wall Mount Fan	\$110.00	10	\$1,100.00		Online/Hydro
	25ft 8" Ducting	\$25.00	4	\$100.00		Online/Hydro
	Duct Clamps *pair of 2*	\$12.00	28	\$336.00		Online/Hydro
	3/4" PVC 10'	\$2.00	20	\$40.00		Home Depot
	3/4" PVC Cross	\$2.00	50	\$100.00		Home Depot
3/4" PVC T *pack of 10*	\$3.00	10	\$30.00		Home Depot	
Harvesting	Pruning scissors	\$15.00	8	\$120.00		Online/Hydro
	Shears	\$30.00	1	\$30.00		Home Depot
	Drying Racks	\$45.00	1	\$45.00		Online/Hydro
	Dehumidifier	\$150.00	1	\$150.00		Online/HVAC



Grow Equipment Continued

Watering	RO Water Filtration System	\$400.00	1	\$400.00	Online/Hydro
	Shut Off Valve For Water System	\$10.00	3	\$30.00	Online/Hydro
	Tubing/Hose for Water System	\$10.00	1	\$10.00	Online/Hydro
	100 Gallon Reservoir	\$100.00	3	\$300.00	Home Depot
	30 Gallon Reservoir	\$50.00	1	\$50.00	Home Depot
	Hose	\$50.00	1	\$50.00	Home Depot
	Hose Wheel	\$30.00	1	\$30.00	Home Depot
	Water pump	\$150.00	1	\$150.00	Home Depot
	Wand	\$15.00	1	\$15.00	Home Depot
	Air Pump	\$100.00	1	\$100.00	Online/Hydro
	Air Stone	\$10.00	3	\$30.00	Online/Hydro
	Air Tubing *25ft*	\$20.00	1	\$20.00	Online/Hydro
	Measuring Cups	\$10.00	2	\$20.00	General Supply
	5 gallon buckets	\$4.00	5	\$20.00	General Supply
Cleaning	Mop and Bucket	\$75.00	1	\$75.00	General Supply
				\$0.00	
	Shop Vac	\$175.00	1	\$175.00	General Supply
	Paper Towels	\$5.00	10	\$50.00	General Supply
	Handheld Squeegee *pack*	\$10.00	1	\$10.00	General Supply
Misc.	Squeegee *pack*	\$25.00	1	\$25.00	General Supply
	Sprayer	\$20.00	1	\$20.00	General Supply
	Handheld Sprayer	\$5.00	2	\$10.00	General Supply
	10 Gallon Pots	\$4.00	150	\$600.00	Online/Hydro
	Nursery Pots	\$0.50	150	\$75.00	Online/Hydro
	Power Washer	\$125.00	1	\$125.00	General Supply
	Labels	\$25.00	1	\$25.00	General Supply
	Temp/Humidity sensors	\$15.00	5	\$75.00	General Supply
	Green LED Headlamp	\$20.00	2	\$40.00	Online/Hydro
	Digital Timer	\$20.00	5	\$100.00	Online/Hydro
Scooter	\$50.00	1	\$50.00	Online/Hydro	
Total:				\$24,711.00	



Environmental Control and Grow Infrastructure

Item	Price	Quantity	Total Price	Where to Buy
CO2 Regulator	\$125.00	2	\$250.00	Online/Hydrostore
Environmental Controller	\$750.00	1	\$750.00	Online/Hydrostore
CO2 Line	\$50.00	1	\$50.00	Online/Hydrostore
Flatte White Paint	\$50.00	0	\$0.00	General Supply Store
Air Conditioner	\$3,000.00	4	\$12,000.00	Local HVAC
Heater	\$500.00	2	\$1,000.00	Local HVAC
Air Conditioner/Heater	\$5,000.00	0	\$0.00	Local HVAC
Humidifier	\$400.00	0	\$0.00	Local HVAC
Dehumidifier	\$400.00	2	\$800.00	Local HVAC
HVAC	\$5,000.00	1	\$5,000.00	Local HVAC
Electrical	\$10,000.00		\$0.00	Local Electrician
Total:			\$19,850.00	

Curing Supplies

Item	Price	Quantity	Total Price	Where to Buy
Hangers	\$5.00	10	\$50.00	General Supply Store
Fish Scale	\$40.00	1	\$40.00	Online
Scale	\$100.00	1	\$100.00	Online
Buckets	\$4.00	20	\$80.00	General Supply Store
Trays	\$4.00	10	\$40.00	Online/Hydrostore
Labels	\$20.00	1	\$20.00	General Supply Store
Total:			\$330.00	

Grow Supplies *REACCURING COSTS*

Item	Price	Quantity	Total Price	Where to Buy
House and Garden Coco A+B 5 gallon	\$160.00	1	\$160.00	Online/Hydrostore
House and Garden Nitrogen Boost	\$50.00	1	\$50.00	Online/Hydrostore
Botanicare Cal Mag+ 5 gallons	\$130.00	1	\$130.00	Online/Hydrostore
SuperThrive 1 gallon	\$130.00	1	\$130.00	Online/Hydrostore
Cloning Solution 1 gallon	\$60.00	1	\$60.00	Online/Hydrostore
Cloning Gel 250 mL	\$35.00	1	\$35.00	Online/Hydrostore
pH Meter	\$125.00	1	\$125.00	Online/Hydrostore
Ph. Up	\$50.00	1	\$50.00	Online/Hydrostore
pH Down	\$50.00	1	\$50.00	Online/Hydrostore
pH 7.0 Calibration Solution	\$25.00	1	\$25.00	Online/Hydrostore
pH 4.0 Calibration Solution	\$25.00	1	\$25.00	Online/Hydrostore
1.5" by 1.5" Grodan Rockwool Cubes	\$8.00	10	\$80.00	Online/Hydrostore
Trellis Netting 30'x5'	\$12.00	10	\$120.00	Online/Hydrostore
Botanicare Cocogro	\$13.50	50	\$675.00	Online/Hydrostore
Organic Pesticides			\$0.00	Online/Hydrostore
Organic Pesticides			\$0.00	Online/Hydrostore
Organic Pesticides			\$0.00	Online/Hydrostore
Organic Pesticides			\$0.00	Online/Hydrostore
Bleach	\$3.00	2	\$6.00	General Supply Store
Hooks	\$5.00	5	\$25.00	General Supply Store
Zip Ties	\$10.00	5	\$50.00	General Supply Store
Tape	\$10.00	5	\$50.00	General Supply Store
Razor Blades	\$7.00	5	\$35.00	General Supply Store
Rubbing Alcohol	\$5.00	5	\$25.00	General Supply Store
Disposable Gloves	\$13.00	5	\$65.00	General Supply Store
Permanent Markers	\$1.00	5	\$5.00	General Supply Store
Sponges	\$5.00	5	\$25.00	General Supply Store
Glass Cleaner *gallon*	\$15.00	1	\$15.00	General Supply Store
Total:			\$2,016.00	

Final Cost Break Down

Grow Equipment	\$24,711.00
Environmental Control and Grow Infrastructure	\$19,850.00
Curing Supplies	\$330.00
Grow Supplies	\$2,016.00
Total	\$46,907.00



Appendix G: Financial Pro forma





FIRST STATE COMPASSIONATE C
PRO FORMA INCOME STATEN

29 Del.C. Ch. 100 Freedom of Information Act

		FIRST STATE COMPASSIONATE C	
		PRO FORMA INCOME STATEN	

YEAR 1 of 2

PROJECTION BASED ON ASSUMPTIONS



FIRST STATE COMPASSIONA
PRO FORMA INCOME STATEMENT

29 Del.C. Ch. 100 Freedom of Information Act



FIRST STATE COMPASSIC PRO FORMA CAS											
Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
29 Del.C. Ch. 100 Freedom of Information Act											



FIRST STATE COMPASSI PERFORMA CAS												
Month 13	Month 14	Month 15	Month 16	Month 17	Month 18	Month 19	Month 20	Month 21	Month 22	Month 23	Month 24	
29 Del.C. Ch. 100 Freedom of Information Act												



APPENDIX H - Delaware Annual Water Quality Report



Annual Drinking Water Quality Report
Town of Henlopen Acres
104 Tidewaters, Henlopen Acres, Delaware
PWS ID # DE 0000251
May 30, 2013

We're pleased to present to you this year's Annual Water Quality Report. This report is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. Our water source is **groundwater. Our wells draw from the Columbia aquifer.**

The Division of Public Health in conjunction with the Department of Natural Resources and Environmental Control has conducted a source water assessment. If you are interested in reviewing the assessment, please contact **Town Hall @ 302-227-1120**. Or go on-line @ <http://www.wr.udel.edu/swaphome/swassessments.html>. Overall, Henlopen Acres has a high susceptibility to nutrients, a high susceptibility to pathogens, a high susceptibility to petroleum hydrocarbons, a high susceptibility to pesticides, a low susceptibility to PCBs, a low susceptibility to other organic compounds, a low susceptibility to metals and, a low susceptibility to other inorganic compounds.

If you have any questions about this report or concerning your water utility, please contact **Sonny McClure @ 302-227-1120**. We want our valued customers to be informed about their water utility. If you want to learn more, please attend any of our regularly scheduled meetings. They are held quarterly on: **July 12, 2013, October 11, 2013, January 10, 2014, and April 11, 2014 @ 10:00 A.M at the Town Hall, 104 Tidewaters.**

Public Health, Office of Drinking Water and Henlopen Acres Water Department routinely monitor for constituents in your drinking water according to Federal and State laws. This table shows the results of our monitoring for the period of January 1st to December 31st, **2012**.

In this table you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms we've provided the following definitions:

Non-Detects (ND) - laboratory analysis indicates that the constituent is not present.

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in \$10,000. Or 1 drop in 13 gallons.

Parts per billion (ppb) or Micrograms per liter - one part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000. Or 1 drop in 13,000 gallons.

Parts per trillion (ppt) or Nanograms per liter (nanograms/l) - one part per trillion corresponds to one minute in 2,000,000 years, or a single penny in \$10,000,000,000.

Action Level - the concentration of a contaminant which if exceeded, triggers treatment or other requirements which a water system must follow.



Maximum Contaminant Level (MCL) - The “Maximum Allowed” (MCL) is the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as possible using the best available treatment technology.

Maximum Contaminant Level Goal (MCLG) - The “Goal” (MCLG) is the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

Maximum Residual Disinfectant Level (MRDL) –The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal (MRDLG) – The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

TEST RESULTS						
Contaminant	Violation Y/N	Level Detected	Unit Measurement	MCLG or MRDLG	MCL or MRDL	Likely Source of Contamination
Microbiological Contaminants						
Chlorine (Cl ₂)	N	0.16-0.53	ppm	4	4	Water additive used to control microbes
Inorganic Contaminants						
11. Barium	N	0.0414 *(2008)	ppm	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
14. Chromium	N	1.9 *(2008)	ppb	100	100	Discharge from steel and pulp mills; erosion of natural deposits
15. Copper (0 sites exceeded the AL for Copper)	N	0.585 *(2010) 90 th percentile	ppm	1.3	AL=1.3	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives
17. Fluoride	N	0.44-1.6	ppm	0.8-1.2	2	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories
20. Nitrate (as Nitrogen)	N	1.3-1.5	ppm	10	10	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
Nickel	N	1 *(2008)	ppb		100	Naturally Occurring
Synthetic Organic Contaminants including Pesticides and Herbicides						
31. Chlordane	N	0.76	ppb	0	2	Residue of banned termiticide
45. Heptachlor epoxide	N	30	ppt	0	200	Breakdown of heptachlor
Volatile Organic Contaminants						
68. Haloacetic Acids (HAA)	N	0.718 *(2010)	ppb	n/a	60	By-product of drinking water disinfection
76. THM (Total trihalomethanes)	N	2.001 *(2010)	ppb	n/a	80	By-product of drinking water chlorination



Contaminant	Violation Y/N	Level Detected	Unit Measurement	MCLG or MRDLG	MCL or MRDL	Likely Source of Con
Unregulated Inorganic Contaminants						
81. Sodium (Na)	N	23.1	ppm	0	N/A	
82. Alkalinity (Alk)	N	22	ppm		N/A	
83. pH	N	6.9	ppm		6.5 – 8.5	
84. Chloride (Cl)	N	42.3-46.3 (average 44.5)	ppm		250	
85. Hardness	N	13.1 *(2009)	ppm		N/A	
86. Total Dissolved Solids (TDS)	N	158 *(2010)	ppm		500	
91. Sulfate	N	27.4-30.3 *(2011) (average 28.7)	ppm		250	
Bromoform	N	0.920 *(2009)	ppb			
Chlorodibromomethane	N	0.920 *(2009)	ppb			

*The state allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of our data, though representative, are more than one year old.

All other contaminants were non-detects in compliance with the Safe Drinking Water Act.

Lead-If present, elevated lead levels can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Henlopen Acres Water Department is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at www.epa.gov/safewater/lead.

As you can see by the table, our system had no violations. We're proud that your drinking water meets or exceeds all Federal and State requirements. We have learned through our monitoring and testing that some constituents have been detected. The EPA has determined that level in your water is below the MCL.

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity. In order to insure tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations established limits for contaminants in bottled water, which must provide the same protection for public health.



Contaminants that may be present in source water include:

- 1) Microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock operation, and wildlife.
- 2) Inorganic contaminants, such as salts and metals can be naturally occurring or result from urban storm water runoff, industrial or domestic wastewater discharge, oil and gas production, mining, or farming.
- 3) Pesticides and herbicides, which may come from a variety of sources, such as agricultural, urban storm water runoff, and residential uses.
- 4) Organic chemical contaminants, including synthetic and volatile organic chemicals, which are byproducts of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff, and septic systems.
- 5) Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

All drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated constituents, a person would have to drink 2 liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

Thank you for allowing us to continue providing your family with clean, quality water this year. In order to maintain a safe and dependable water supply we sometimes need to make improvements that will benefit all of our customers. These improvements are sometimes reflected as rate structure adjustments. Thank you for understanding.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791).

We at the Henlopen Acres Water Department work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future.



