



## Eleven Percent of North Americans Use Cannabis, Global Study Says

*"Over the past 50 years international drug treaties have neither prevented the globalization of the illicit production and non-medical use of (illicit) drugs"*

**Sydney, Australia:** An estimated 11 percent of North Americans between the ages of 15 and 64 consume marijuana yearly, according to a research [report](#) published in the January 7th edition of the scientific journal *The Lancet*.

Researchers from the University of Queensland and the University of Melbourne in Australia assessed the global extent



of illicit drug use and its impact on

health. Authors reported that an estimated 10.7 percent of North Americans consume cannabis annually. By contrast, fewer than five percent of the global population were estimated to have used marijuana in the previous year.

Australians reported the

<continued on page 3 >

### U. S. Federal Government Continues Crackdown On Medical Cannabis Providers

*"[We] have ... advised those places where they're trying to regulate marijuana -- which is illegal under the Control Substances Act -- (that) they cannot do that," ONDCP Director Says*

**Washington, DC, USA:** The federal government is continuing to target facilities that dispense cannabis to state-qualified patients, even in cases where such facilities are properly licensed by the state.

<continued on page 3 >

### Non-Psychotropic Cannabinoid Inhibits Colon Cancer Cell Proliferation

**Naples, Italy:** The administration of the non-psychoactive cannabis plant constituent [cannabidiol](#) (CBD) is protective in an experimental model of colon cancer, according to preclinical trial [data](#) published online in the *Journal of Molecular Medicine*.

<continued on page 4 >

### Wider Use Of Cannabis Therapy Could Reduce Prescription Pain Drug Deaths

*"Physicians who treat neuropathic pain with opioids should evaluate their patients for a trial of cannabis and prescribe it when appropriate prior to using opioids"*

**Sacramento, CA, USA:** Physicians who prescribe opioid drugs to patients with neuropathy (nerve pain) ought to consider recommending cannabis as

<continued on page 4 >

### Marijuana Use Not Associated With Residual Cognitive Decline Later In Life

**London, United Kingdom:** Cannabis use [does not appear](#) to have residual adverse effects of cognition or memory, according to trial [data](#) published last week in the *American Journal of Epidemiology*.

<continued on page 5 >



## The Willamette Valley NORML News Report

is an all-volunteer, not-for-profit project to record and broadcast news, announcements and information about cannabis law reform.

The W-V-NORML News Report is produced by the Eugene, OREGON chapter of NORML, the National Organization for the Reform of Marijuana Laws

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Check 'em out on-line! *visit:*

**WillametteValleyNORML.org**

## A Voice for Responsible Marijuana Smokers

Since its founding in 1970, NORML has provided a voice in the public policy debate for those Americans who oppose marijuana prohibition and favor an end to the practice of arresting marijuana smokers. A nonprofit public-interest advocacy group, NORML represents the interests of the tens of millions of Americans who smoke marijuana responsibly. During the 1970s, NORML led the successful efforts to decriminalize minor marijuana offenses in 11 states and significantly lower marijuana penalties in all others.

The oldest and largest marijuana legalization organization in the country, NORML maintains a professional staff in Washington, DC, and a network of volunteer state and local [NORML Chapters](#) across the country. Check 'em out, and find the one nearest you!

**The NORML mission is to move public opinion sufficiently to achieve the repeal of marijuana prohibition so that the responsible use of cannabis by adults is no longer subject to penalty.**

When marijuana is enjoyed responsibly, subjecting users to harsh criminal and civil penalties provides no public benefit and causes terrible injustices. For reasons of public safety, public health, economics and justice, the prohibition laws should be repealed to the extent that they criminalize responsible marijuana use. **NORML, the National Organization for the Reform of Marijuana Laws – is located at 1600 K Street, NW, Suite 501, Washington, DC 20006-2832. Phone (202) 483-5500, Fax: (202) 483-0057 or visit: [www.norml.org](http://www.norml.org)**

Willamette Valley NORML is your local network in the fight to reform state and federal marijuana laws, whether by voter initiative or through the elected legislatures. W-V-NORML will serve as an informational resource to media on marijuana-related stories, providing a perspective to offset the [anti-marijuana propaganda](#) from the government; lobby state and federal legislators in support of reform legislation; publish a regular [newsletter](#); host an informative web site; and serve as the umbrella group for a regional network of citizen-activists committed to ending marijuana prohibition and legalizing marijuana.

Along with their parent organization, W-V-NORML will sponsor public advertising campaigns to better educate the public about marijuana and alternatives to current marijuana policy; provide legal assistance and support to victims of the current laws; and promote relevant research.

W-V-NORML supports the right of adults to use marijuana responsibly, whether for [medical](#) or [personal](#) purposes. All penalties, both civil and criminal, should be eliminated for responsible use. W-V-NORML also advocates the legalization of [hemp](#) (non-psychoactive marijuana) for industrial use. **To find out more, like how you can help, call, write or visit our website. You'll be glad you did!**

<continued from **ELEVEN PERCENT OF NORTH AMERICANS USE CANNABIS, GLOBAL STUDY SAYS**, page 1  
> highest levels of cannabis use, according to the study.

Regarding the impact of illicit drug use on health, researchers wrote, "On the basis of available evidence, most of the disease burden attributable to illicit drugs is concentrated in problem or dependent drug users, especially people who inject drugs."

Authors recognized, however, that only "a minority of individuals who use illicit drugs become dependent on or inject them" and acknowledged "[T]he risks of cannabis use are much smaller than those of other illicit drugs." They concluded, "In high-income countries, the contribution of illicit drugs to burden of disease is less than that of tobacco, but may be similar to alcohol."

An [editorial](#) accompanying the study opined that criminal drug prohibition has failed to reduce illicit drug availability and has not positively contributed to global health outcomes, stating: "Over the past 50 years international drug treaties have neither prevented the globalization of the illicit production and non-medical use of these drugs, nor, outside of developed countries, made these drugs adequately available for medical use. The system has also arguably worsened the human health and well-being of drug users by increasing the number of drug users imprisoned, discouraging effective countermeasures to the spread of HIV by injecting drug users, and creating an environment conducive to the violation of drug users' human rights."

It concluded: "National experimentation in approaches to prevention and reduction of drug-related harm should be allowed. The international drug treaties in their present form seriously constrain governments' capacities to engage in such policy experiments. ... Countries that wish to experiment with different ways of regulating drug use and reducing drug-related harm will need to consider opting out of provisions of the existing drug control treaties. ... From the perspective of public health, we need to move towards a control system that is

more aligned with the risks that different drugs pose to users and shows an understanding of the effects of different regulatory approaches on drug use and harm."

Both papers are available online at: <http://www.thelancet.com>.

*For more information, please contact Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org).*

<continued from **U. S. FEDERAL GOVERNMENT CONTINUES CRACKDOWN ON MEDICAL CANNABIS PROVIDERS**, page 1

> On Thursday, federal authorities [sent letters](#) to multiple Colorado dispensaries stating that "action will be taken to seize and forfeit their property" if they do not cease operations within 45 days. The [letters](#), sent by US Attorney John Walsh, state: "This ... constitutes formal notice that action will be taken to seize and forfeit (your) property if you do not cause the sale and/or distribution of marijuana and marijuana-infused substances at (this) location to be discontinued. ... [T]he Department of Justice has the authority to enforce federal law even when such activities may be permitted under state law."



The Justice Department alleges that all of the facilities cited in their complaint are in violation of [21 USC Code Sec. 860](#), which prohibits the distribution of a federally controlled substance within one thousand feet of "a public or private elementary, vocational, or secondary school or a public or private college, junior college, or university, or a playground, or housing facility owned by a public housing authority." Colorado state law imposes similar zoning restrictions; however, many if not all of the facilities in question are believed to have been [grandfathered](#) in under the law and were operating with a valid state license.

While the federal government in recent months has utilized [similar tactics to close down cannabis providers in California](#) and has also coordinated DEA-led raids of dispensaries in

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<continued from previous page> other states, most notably in [Washington](#) and Montana, last week's efforts in Colorado mark the first time that the federal authorities have targeted facilities that are operating explicitly under a state license.

[Speaking](#) on Tuesday with KQED News in San Francisco, Tommy LaNier -- Director of the White House Office of National Drug Control Policy's National Marijuana Initiative -- warned that Justice Department officials are also intending to target city and county officials who oversee local regulations permitting the production or dispensing of medical cannabis. "[We] have ... advised those places where they're trying to regulate marijuana -- which is illegal under the Control Substances Act -- (that) they cannot do that," LaNier said.

He added that the Justice Department's crackdown intends to eventually target every state that allows for some form of limited legalization of marijuana for medical purposes.

In December, US Attorney General Eric Holder [told](#) members of Congress that the Justice Department would only target medical cannabis operators that "use marijuana in a way that's not consistent with the state statute."

[Members](#) of the NORML Legal Committee [filed suit](#) in November against the federal government arguing that its actions were in violation of the Ninth, Tenth, and Fourteenth Amendments of the US Constitution. That lawsuit remains pending.

*For more information, please contact Keith Stroup, NORML Legal Counsel, or Allen St. Pierre, NORML Executive Director, at (202) 483-5500.*

<continued from WIDER USE OF CANNABIS THERAPY COULD REDUCE PRESCRIPTION PAIN DRUG DEATHS, page 1 > an alternative therapy, according to a peer-reviewed

[paper](#) published online this week in the *Harm Reduction Journal*.

"There is sufficient evidence of safety and efficacy for the use of (cannabis/cannabinoids) in the treatment of



nerve pain relative to opioids," the commentary states. "In states where medicinal cannabis is legal, physicians who treat neuropathic pain with opioids should evaluate their patients for a trial of cannabis and prescribe it when appropriate prior to using opioids. ... Prescribing cannabis in place of opioids for neuropathic pain may reduce the morbidity and mortality rates associated with prescription pain medications and may be an effective harm reduction strategy."

The author notes that between the years 1999 and 2006, "approximately 65,000 people died from opioid analgesic overdose." By contrast, he writes "[N]o one has ever died from an overdose of cannabis."

In [clinical trials](#), inhaled cannabis has consistently been shown to [reduce](#) neuropathic pain of diverse causes in subjects unresponsive to standard pain therapies.

In November, clinical investigators at the University of California, San Francisco reported that vaporized cannabis [augments](#) the analgesic effects of opiates in subjects prescribed morphine or oxycodone. Authors of the study surmised that cannabis-specific interventions "may allow for opioid treatment at lower doses with fewer [patient] side effects."

Neuropathy affects between five percent and 10 percent of the US population. The condition is often unresponsive to conventional analgesic medications such as opiates and non-steroidal anti-inflammatory drugs. *For more information, please contact Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org). Full text of the paper, "Prescribing cannabis for harm reduction" is available online at: <http://www.harmreductionjournal.com/content/pdf/1477-7517-9-1.pdf>.*

<continued from NON-PSYCHOTROPIC CANNABINOID INHIBITS COLON CANCER CELL PROLIFERATION, page 1 >

Investigators at the University of Naples assessed the effect of CBD on colon carcinogenesis in mice. Researchers reported that CBD administration was associated with cancerous tumor reduction and reduced cell proliferation. <continued on next page>

<continued from previous page> Authors wrote: "Although cannabidiol has been shown to [kill glioma cells](#), to inhibit cancer cell invasion and to [reduce the growth of breast carcinoma](#) and lung metastases in rodents, its effect on colon carcinogenesis has not been evaluated to date. This is an important omission, since colon cancer affects millions of individuals in Western countries. In the present study, we have shown that cannabidiol exerts (1) protective effects in an experimental model of colon cancer and (2) antiproliferative actions in colorectal carcinoma cells."

Authors also acknowledged that CBD possesses "an extremely safe profile in humans." They concluded, "[O]ur findings suggest that cannabidiol might be worthy of clinical consideration in colon cancer prevention."

[Clinical review data](#) published in the scientific journal *Current Drug Safety* in December concluded that CBD is "non-toxic" to healthy cells and is "well tolerated" in humans. Nevertheless, cannabidiol is presently classified under federal law as a [schedule I](#) prohibited substance. Such substances are required by law to possess "a high potential for abuse," "a lack of accepted safety ... under medical supervision," and "no currently accepted medical use in treatment in the United States."

[Separate preclinical trials](#) evaluating the anti-cancer activities of cannabinoids and endocannabinoids show that their administration can inhibit the proliferation of a variety of cancerous cell lines, including breast carcinoma, prostate carcinoma, gastric adenocarcinoma, skin carcinoma, leukemia cells, neuroblastoma, lung carcinoma, uterus carcinoma, thyroid epithelioma, pancreatic adenocarcinoma, cervical carcinoma, oral cancer, biliary tract cancer (cholangiocarcinoma), and lymphoma.

For more information, please contact Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org). Full text of the study, "Chemopreventive effect of the non-psychoactive phytocannabinoid cannabidiol on experimental colon cancer," appears in the *Journal of Molecular Medicine*. A separate

*summary of the anti-cancer properties of cannabinoids is available from NORML here: <http://norml.org/library/item/gliomascancer>.*

<continued from MARIJUANA USE NOT ASSOCIATED WITH RESIDUAL COGNITIVE DECLINE LATER IN LIFE, page 1 >

Researchers at the Kings College, School of Medicine in London investigated the prospective association between self-reported illicit drug use and cognitive functioning during the mid-adult years. A total of 8,992 participants who were surveyed at 42 years of age in the National Child Development Study (1999-2000) were included in the study.

Authors analyzed data on three cognitive functioning measures (memory index, executive functioning index, and overall cognitive index) when the participants were 50 years of age (2008-2009). Multivariable regression analyses were performed to estimate the association between different illicit drug use measures at 42 years of age and cognitive functioning at 50 years of age.

Investigators reported that those subjects who had used illegal drugs, primarily cannabis, as recently as in their 40s performed as well or slightly better on the tests than did their peers who had never used illicit substances.

The scientists concluded, "At the population level, it does not appear that current illicit drug use is associated with impaired cognitive functioning in early middle age. ... The lack of association between current illegal drug use and cognitive functioning also appears to be congruent with previous evidence showing the absence of a long-term residual effect of illicit drug use on cognition."

For more information, please contact Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org). Full text of the study, "Is illicit drug use harmful to cognitive functioning in the mid-adult years? A cohort-based investigation," appears in the *American Journal of Epidemiology*. Additional information regarding cannabis use and cognitive function is available online from NORML at: <http://norml.org/component/zoo/category/cannabis-and-the-brain-a-user-s-guide>

## Arizona: Governor Directs State Health Officials To Implement Voter-Approved Cannabis Dispensary Measure

**Phoenix, AZ, USA:** Republican Gov. Jan Brewer on Friday [directed](#) state officials to move forward with plans to implement sections of an [approved](#) 2010 voter [initiative](#) (Proposition 203) that allows for the licensed production and distribution of cannabis for therapeutic purposes.

The law, known as the [Arizona Medical Marijuana Act](#) (AMMA), removes state-level criminal penalties for the use and possession of up to 2.5 ounces of marijuana by qualified patients who are registered with the state Department of Health. The measure also mandates the state to adopt rules governing the establishment of up to 125 nonprofit cannabis dispensaries, which would be legally authorized to produce and dispense marijuana to authorized patients on a not-for-profit basis.

Governor Brewer -- who opposed the ballot measure -- had previously [filed a lawsuit](#) in federal court alleging that her administration's compliance with the law's state-licensing provisions would put state employees in danger of federal prosecution. Lawyers for the American Civil Liberties Union (ACLU) and the [NORML Legal Committee](#) co-authored a Motion to Dismiss the case. United State's District Judge Susan Bolton [dismissed](#) the governor's suit earlier this month.

Speaking publicly on Friday, Gov. Brewer [announced](#) that she will not re-file her lawsuit, and ordered state health officials "to begin accepting and processing dispensary applications, and issuing licenses for those facilities," as is required by the 2010 law.

According to the [website](#) of the Arizona Department of Health, the department hopes to begin accepting applications for dispensaries this summer.

To date, only three states -- Colorado, Maine, and New Mexico -- have granted licenses to allow for the state-sanctioned production and distribution of cannabis. (Several other states,

including Delaware, New Jersey, Rhode Island, and Vermont, have enacted licensing legislation, but have yet to issue any actual dispensary licenses.)

An estimated [16,000 Arizonans](#) are presently registered to legally possess cannabis under state law. Under the law, qualified patients may cultivate their own cannabis at home if they do not reside within 25 miles of an operating cannabis dispensary.

*For more information, please contact Keith Stroup, NORML Legal Counsel, at (202) 483-5500, or Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org).*

## JAMA: Long-Term Exposure To Cannabis Smoke Not Associated With Adverse Effects On Pulmonary Function

***"Our findings suggest that occasional use of marijuana ... may not be associated with adverse consequences on pulmonary function."***

**San Francisco, CA, USA:** Exposure to moderate levels of cannabis smoke, even over the long-term, is [not associated](#) with adverse effects on pulmonary function, according to clinical trial [data](#) published Tuesday in the *Journal of the American Medical Association* (JAMA).

Investigators at the University of California, San Francisco analyzed the association between marijuana exposure and pulmonary function over a 20-year period in a cohort of 5,115 men and women in four US cities.

Predictably, researchers "confirmed the expected reductions in FEV1 (forced expiratory volume in the first second of expiration) and FVC (forced vital capacity)" in tobacco smokers. By contrast, "Marijuana use was associated with higher FEV1 and FVC at the low levels of exposure typical for most



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<continued from previous page> marijuana users. With up to 7 joint-years of lifetime exposure (e.g., 1 joint/d for 7 years or 1 joint/wk for 49 years), we found no evidence that increasing exposure to marijuana adversely affects pulmonary function."

They conclude, "Our findings suggest that occasional use of marijuana ... may not be associated with adverse consequences on pulmonary function."

The study's results are consistent with previous findings reporting no significant decrease in pulmonary function associated with moderate cannabis smoke exposure. According to a 2007 literature [review](#) conducted by researchers at the Yale University School of Medicine and published in the *Archives of Internal Medicine*, cannabis smoke exposure is not associated with airflow obstruction (emphysema), as measured by airway hyperreactivity, forced expiratory volume, or other measures.

In 2006, the [results](#) of the largest case-controlled study ever to investigate the respiratory effects of marijuana smoking reported that cannabis use was not associated with lung-related cancers, even among subjects who reported smoking more than 22,000 joints over their lifetime.

"We hypothesized that there would be a positive association between marijuana use and lung cancer, and that the association would be more positive with heavier use," the study's lead researcher, [Dr. Donald Tashkin](#) of the University of California at Los Angeles [stated](#). What we found instead was no association at all, and even a suggestion of some protective effect" among marijuana smokers who had lower incidences of cancer compared to non-users.

Separate studies of cannabis smoke and pulmonary function have indicated that chronic exposure may be associated with an [increased risk](#) of certain respiratory complications, including cough, bronchitis, phlegm. However, the ingestion of cannabis via alternative methods such as edibles, liquid tinctures, or via [vaporization](#) -- a process whereby the plant's cannabinoids are heated to the point of vaporization but below the point of combustion -- virtually [eliminates](#) consumers' exposure to such unwanted risk factors and has been determined to be a '[safe and effective](#)' method of ingestion in clinical trial settings. *For more information, please contact Allen St. Pierre, NORML Executive Director, at (202) 483-5500, or Paul Armentano, NORML Deputy Director, at: [paul@norml.org](mailto:paul@norml.org). Full text of the study, "Association between marijuana exposure and pulmonary function over 20 years," appears in the *Journal of the American Medical Association*.*

## California: Attorney General Asks State's Lawmakers To Clarify Issues Concerning Dispensing Of Medical Cannabis

**Sacramento, CA, USA:** California Attorney General Kamala Harris is [requesting](#) lawmakers to "clarify" the state's guidelines regarding the production and distribution of marijuana for medical purposes. In a December 21, 2011 [letter](#) from Harris to Assembly Speaker John A. Perez and Senate President Pro-Tempore Darrell Steinberg, the Attorney General states, "[S]tate law ... needs to be reformed, simplified, and improved to better explain to patients and law enforcement alike how, when, and where individuals may cultivate and obtain physician-recommended marijuana."

Specifically, Harris is asking lawmakers to "articulate the scope" of patients' rights to cultivate cannabis in a "collective" manner. Harris further requests that legislators provide regulations regarding the operation of cannabis dispensaries, stating, "Here the legislature could weigh in with rules about hours, locations, audits, security, employee background checks, zoning, compensation .... (and) what it means for a collective or a cooperative to operate as a 'non-profit.'" The Attorney General also requests that lawmakers address issues regarding the production and distribution of cannabis-infused food products, which she states are not specifically regulated under existing state law.

Harris' letter follows a statewide [crackdown](#) of California medical cannabis producers and providers by the United States Justice Department.

Neither the language of Proposition 215, enacted by voters in 1996, nor the Medical Marijuana Program Act, enacted by the legislature in 2003, explicitly addresses the act of cannabis distribution by third-party dispensaries. In 2008, then-Attorney General (now California Governor) Jerry Brown issued [guidelines](#) stating that such facilities should operate on a non-profit basis, "acquire marijuana only from their constituent members," and "may not distribute medical marijuana to any person who is not a member in good standing of the organization."

Harris' letter references the 2008 guidelines, but states "[T]he facts today are far more complicated" than they were then and acknowledges that "non-binding guidelines will not solve (California's) problems." *For more information, please contact Allen St. Pierre, NORML Executive Director, at (202) 483-5500 or visit California NORML at: <http://www.canorml.org>.*



News From *your* local affiliate of the National Organization for the Reform of Marijuana Laws

## NORML Remembers Gatewood Galbraith

Washington, DC, USA:

[Gatewood Galbraith](#) -- a prominent Kentucky attorney, longtime cannabis activist, and perennial

candidate for various state and federal offices -- [died](#) in his sleep on Tuesday as a result of complications from asthma and chronic emphysema. He was 64 years old.

Galbraith was widely known as an outspoken advocate for legalizing cannabis, particularly the non-psychoactive variety of the plant. While campaigning for public office, Galbraith typically wore suits made from [hemp](#) fiber and sometimes traveled in a station wagon fueled by hemp oil. He also formerly served on NORML's Board of Directors (1994-1998).

Galbraith ran five times for governor -- three times as a Democrat, once on the Reform ticket and last year as an independent. He also campaigned unsuccessfully for state agriculture commissioner, attorney general and Congress.

"My view is that the government's role should be to uplift, enlighten, educate and ennoble the citizen, not oppress them with taxation and intrusive laws," Galbraith wrote on his gubernatorial campaign website. In 2006, Galbraith published his autobiography, "[The Last Free Man in America](#)."

Several notable state politicians -- including Gov. Steve Beshear, House Speaker Greg Stumbo, and US Senator Mitch McConnell -- have released public statements lamenting Galbraith's sudden passing.

NORML Founder Keith Stroup said, "Gatewood was someone who placed a high priority on the legalization of cannabis, and firmly believed industrial hemp -- including hemp based ethanol -- could help save the planet. In his several campaigns for public office in Kentucky, he was fearless in his pro-hemp advocacy. He will be missed by all of us who care about legalizing marijuana."

NORML expresses its sincere condolences to the friends and family of Gatewood Galbraith. See also - [http://www.tokeofthetown.com/2012/01/activist\\_legend\\_gatewood\\_galbraith\\_dies.php](http://www.tokeofthetown.com/2012/01/activist_legend_gatewood_galbraith_dies.php)



\* **NOTE!** The Willamette Valley NORML Member meeting happens **every 2nd Sat. of the month** and will be at The Voter Power Office. For more info on meeting visit: <http://w-v-norml.org/Members/meeting.html>

The Willamette Valley NORML

Public meeting happens (most!) **every 4th Sat. of the month**

(Excepting Holidays - Nov., Dec. - when it takes place 3rd Sat.!) and will also be at The Voter Power

Office at **687 River Av, Eugene, Oregon** \* For more info on meeting call: **541.517-0957** -or- visit: <http://w-v-norml.org/meeting.html>

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