

**RELEASE RECOVERY  
(STAMFORD)**

**MMP – RFA**

**“REDACTED”**



# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)



## Appendix A

### Dispensary Facility License Information Form

Section A: Business Information						
1. Applicant business type:						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association	<input type="checkbox"/> Other: _____
2. Legal Name of Applicant: Releaf Recovery LLC						
3. Trade Name of Applicant: Releaf Recovery LLC						
4. Applicant's Business Address: 379 Quarry Brook Drive						
5. City: South Windsor				6. State: CT	7. Zip Code: 06074-3526	
8. Daytime Telephone Number: (203) 362-8461			9. E-mail Address: angela@ccc-ct.com			
10. Applicant's Mailing Address (if different than business address):					11. City:	
12. State:	13. Zip Code:	14. Daytime Telephone Number:		15. Fax Number:		

Section B: Contact Information	
All communications from the department regarding this application will be sent to your primary contact and alternate contact, if one is designated. We will assume that you receive all communications sent to your designated contact(s) and it will be your responsibility to notify us if any of their contact information changes.	
16. Name of Primary Contact: Thomas Nicholas	17. Primary Contact Title: Chief Operating Officer
18. Primary Contact E-mail Address: t.i.nicholas@att.net.com	19. Primary Contact Telephone Number: (860) 558-4935
20. OPTIONAL - Name of Alternate Contact: Angela D'Amico	21. Alternate Contact Title: Chief Executive Officer
22. Alternate Contact E-mail Address: angela@ccc-ct.com	23. Alternate Contact Telephone Number: (203) 362-8461

Section C: Formation/Incorporation Information	
24. Date of Formation/Incorporation: 08 /26 /2011	25. Place of Formation/Incorporation: CT
26. Registered with the Connecticut Secretary of State: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	27. Sale and Use Tax Permit Number: Provide a copy of your Sale and Use Tax permit with your application.



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## Section D: Proposed Dispensary Facility Information

28. Proposed Dispensary Facility Address: 48 Union Street			29. City: Stamford		
30. State: CT	31. Zip Code: 06906	32. Telephone Number: (203) 362-8461		33. Fax Number:	
34. Own or Lease Property: <input type="checkbox"/> Own <input checked="" type="checkbox"/> Lease Provide a copy of the lease, deed or other documents evidencing the right to occupy if you are awarded a license.			35. Name of Property Owner: Sun Hill Management Trust		

## Section E: Business Association Information

36. Are you associated with any other dispensary facility licensee or license applicant or producer licensee or license applicant: <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, provide the name of all applicants with whom you are associated. Attach additional pages if necessary.	
37. Applicant Name: Prime Wellness of Connecticut	38. Licensee or Applicant Type: <input checked="" type="checkbox"/> Dispensary Facility <input type="checkbox"/> Producer
39. Applicant Name: Compassionate Care Center of Connecticut	40. Licensee or Applicant Type: <input checked="" type="checkbox"/> Dispensary Facility <input type="checkbox"/> Producer

## Section F: Proposed Dispensary Department Hours

41. State the proposed dispensary department hours of operation for each day. The dispensary department is where marijuana will be sold.

Monday	10	to	6	Friday	10	to	8
Tuesday	10	to	6	Saturday	10	to	6
Wednesday	10	to	6	Sunday		to	
Thursday	10	to	6				

## Section G: Proposed Dispensary Facility Hours

42. State the proposed dispensary facility hours of operation for each day. The dispensary facility includes areas where non-marijuana products and services will be offered.

Monday	10	to	6	Friday	10	to	8
Tuesday	10	to	6	Saturday	10	to	6
Wednesday	10	to	6	Sunday		to	
Thursday	10	to	6				



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## Section H: Other Business Names & Addresses

List all names under which the applicant has done business or has held itself out to the public as doing business. Do not limit your response to business operations in Connecticut. Attach additional pages if necessary.

43. Name:	44. Time Period:

List all addresses, other than those listed in response to Section A, that the applicant owns, has owned or from which it has conducted business during the previous five years and give the approximate time periods during which such locations were owned or utilized. Attach additional pages if necessary.

45. Address:	46. Time Period:

## Section I: Dispensary Facility Backers

Provide the following information for each dispensary facility backer. A dispensary facility backer is any person (including any legal entity) with a direct or indirect financial interest in the applicant, except it shall not include a person with an investment interest provided the interest held by such person and such person's co-workers, employees, spouse, parent or child, in the aggregate, does not exceed five per cent of the total ownership or interest rights in the applicant and such person will not participate directly or indirectly in the control, management or operation of the dispensary facility if a license is granted.

Create additional copies of this page if necessary.

**Each backer identified in response to this section must complete and sign Appendix B.**

47. Name:	48. Percentage of ownership
Thomas Nicholas	25%
Angela D'Amico	25%
Kevin P. Murphy	25%
John P. Glowik, Jr.	25%



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## Section J: Directors, Owners, Officers and Other High-Level Employees

Provide the following information for each individual, including each dispensary facility backer, who will:

- directly or indirectly have control over, or participate in the management or operation of, the dispensary facility; or
- who currently receives, or who reasonably can be expected to receive, within one calendar year, compensation from the applicant exceeding \$100,000.

Create additional copies of this page if necessary.

Each person identified in response to this section must complete and sign Appendix C.

49. Name (First, Middle, Last):	50. Title:	51. Role:
Thomas Nicholas	COO	Managing Operation
Angela D'Amico	CEO	Sales, Marketing
Kevin Murphy	CFO	Managing Finances
John Glowik Jr	Co Owner	Director
David Paume	Dispensary Manager	Day to Day Operations.

## Section K: Financial Statement

Set forth all expenses greater than \$10,000 incurred in connection with the establishment of your business and the sources of the funds for each. Attach additional pages if necessary. The Department may require backup documentation.

52. Expense Item:	53. Cost:	54. Source of Funds:
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

## Section L: Security System

Identify the company or companies that will provide security services for the dispensary facility if a license is awarded. If more than two companies will provide security services, complete this section for each such additional company.

55. Primary Security Company Name: Alarm King Inc.	
56. Primary Security Company Address (including Apartment or Suite #): 16 Lake Ave Ext.	57. City: Danbury



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58. State: CT	59. Zip Code: 06811	60. Telephone Number: (203) 743-1721	61. Fax Number:
62. E-mail Address: mmadden@alarmkinginc.com			
63. Backup Security Company Name (if applicable): Integrated Security Group			
64. Backup Security Company Address (including Apartment or Suite #): 1347 E Main Street #1			65. City: Meriden
66. State: CT	67. Zip Code: 06450	68. Telephone Number: (203)630-2361	69. Fax Number:
70. E-mail Address: info@intergratedsecuritygroup.com			
71. Attach a detailed description of the security plan to be offered by the security company or companies. Be sure to include a discussion of each of the required elements set forth in Section 21a-408-62 of the Regulations of Connecticut State Agencies.			

## Section M: Legal Proceedings

72. Has the applicant ever had any petition filed by or against it, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?  Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

73. Has the applicant ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?  Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

74. Is the applicant a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?  Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

75. Has the applicant ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?  Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section N: Criminal Actions

76. Has the applicant ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or are any such charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.



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## Section O: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating the applicant's suitability to participate in the medical marijuana program. As the duly authorized representative of the applicant, I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

77. Signature:



78. Date Signed:

9.12.2015

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes. As the duly authorized representative of the applicant, I hereby make the above certifications on behalf of the applicant.

79. Signature:



80. Date Signed:

9.12.2015



**Alarm King, Inc.**  
**16 Lake Avenue Ext.**  
**Danbury, CT 06811**  
**203-743-1721**

CT License Number: # 105868

**Security Solution Specification**  
**Prepared Exclusively for**

**Releaf Recovery, LLC.**  
**Stamford, CT**



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SECURITY PLAN & OVERVIEW

**ALARM KING PROPOSED SECURITY SYSTEMS PLAN**

**FOR RELIEF RECOVERY**

*Doors/ Other Openings*

All doors/openings that gain entry to the facility shall be contacted utilizing Sentrol armored cable contacts. All wiring to these contacts will be supervised and report status to the Honeywell master control panel. (UL Commercial) Each opening shall have a unique zone identification number as well as an alphanumeric description. The armored cable offers a first line of defense against tampering with or disabling the ability to sense alarms. (24/7) All Sentrol contacts will be supervised with end of line resistors (4293sn) and will immediately report trouble conditions via the LCD touchpads, central station and on-site activity printer. The contacts are industrial grade, hermetically sealed and will be installed with tamper proof screws. All doors not frequently used will be placed on 24/7 alarm and can only be disarmed by a high level authorized user. See CAD Drawing page 14 and 15 for detail of locations.

*Motion Detection and Glass Break System*

All perimeter opening shall be backed up by at least one form of motion detection. The motion sensors in the specification utilize passive infra-red, microwave, and software analytic technology to properly detect intrusion and simultaneously prevent false alarms. All motion sensors shall have a unique zone identification number as well as an alphanumeric description. Every motion detectors shall be tampered, supervised and have look down lens capability that will be enabled. In areas with glass, glass break detectors will be installed to decrease the response time required for police to respond.

Special Notes: The ceiling above drug safe shall be covered with a motion detector to prevent access from above and placed on 24/7 alarm. In addition, the back up communication device (hidden) shall also be protected with a motion detector on a 24/7 alarm zone. Only master code users will be able to bypass these zones when needed for ceiling access. See CAD Drawing page 14 for detail of locations.

*Communication Devices and Systems*

The burglary alarm system will have three primary pathways to the Central Station: 1. Loop start land line, 2. Internet communicator, 3. Cellular – GSM. This triple redundancy system will send signals to our

central station every 2 minutes to constantly verify connectivity. If the central station does not receive 3 consecutive 2-minute tests (6 minutes total) the system will generate an alarm.

#### *Power Failure Backup System*

In the event of a power failure the burglary alarm systems back up batteries will instantly provide power for continued operation. The system has been designed to provide 24 hours of battery backup protection. The Honeywell main control panel has a built in charging circuit and will keep the backup battery system fully charged. The Honeywell master control panel monitors the state of battery condition at all times and will immediately send a battery trouble status to Central Station upon sensing of trouble or below battery specification.

#### *On Site Activity Printer*

All burglary alarm system events shall report to an onsite activity printer in addition to sending signals to the Central Station. The printer will be located in the IT room secured area. The printer tape shall be utilized daily for auditing purposes and real time reporting of events.

#### *Remote Access*

The system will have the ability for high-level authorized users only to access reports and receive alarm signals via mobile devices, which include desktop computers, laptop computers and smart phones.

#### *Auto Arm*

The alarm system will be programmed to automatically set the perimeter and interior protection of the facility in the event of a fail to arm by user. In addition if the facility is not armed within a certain time period, this condition will generate a supervisory condition in which a call list will be called. The system will not be programmed for auto-disarm.

#### *Central Station Signaling*

The burglary alarm system shall be programmed for the transmission of the following signals: 6 minute test, open and closing by user, trouble, supervisory, low battery, low ac, alarm by zone, program tamper.

#### *Panic/ Holdup/ Duress System*

Panic/ holdup buttons are located throughout the facility including all areas that will have drug storage, drug dispensing and drug treatment operations. The panic (Audible) and holdup (Silent) system shall be activated 24/7 and all wiring shall be supervised to ensure 100% operation at all times. In addition to the hardwired units a long-range receiver and 3 wireless remotes shall be installed and implemented. All panic and/ or holdup buttons will have unique identification numbers and alphanumeric descriptions and will report to

central station accordingly. See CAD Drawing page 14 for detail of locations. The Honeywell security system shall be programmed for duress activation at any of the systems installed LCD touchpads. See CAD Drawing page 14 for detail of locations.

#### *Partitioning*

The system shall be programmed for multiple burglary alarm partitions. The IT/ Safe Area and Dispensary Area will have unique user codes from the office area system. (By User) Only an authorized user of that partition can turn the burglary alarm system off. This will allow continued protection from general office staff and/or visitors. In order to gain entry into drug storage, drug dispensing and drug treatment area a user will have to be authorized for that partition, present a valid HID card and enter the proper pin in the access control reader. This action will disarm the partition alarm, activate the door lock and temporarily deactivate the 24/7 door contact for a period of 30 seconds.

#### *Service and Maintenance*

The specifications include a 3-year 100% warranty on parts and/or labor. Additionally the burglary alarm system shall be tested two times per year and this inspection is included within the warranty period at no cost. At the start of year 4 this service shall be billed according to our published standard rates. As the system is fully supervised and will send trouble conditions immediately to Central Station Dispatch the specification includes a 4 hour response time to any and all trouble and supervisory conditions.

#### *Access Control Readers*

Access control readers shall be utilized to control authorized access/ visitor management into the facility and including all areas that will have drug storage, drug dispensing and drug treatment operations. The access control doors shall be programmed for door prop and door forced open alarm and will be activated 24/7 to prevent doors from being left open or breached. The only way to disarm these access control points is with a valid presentation of an HID proximity card and 4-digit pin code. Any breach of these conditions shall transmit an immediate signal to Central Station. A dedicated computer running HUBMAN 2 software shall store access control data/ reports for a period of approximately 5 years but no less than three years for auditing and prevention purposes. See CAD Drawing page 14 for detail of locations.

*CCTV System*

All exit/entry points to the facility shall be covered by high-resolution Wide Dynamic Range (WDR) variable focus, color cameras. These specifications will allow for changing or fluctuating light levels and offers low light capability. The color cameras shall be connected to a Hikvision NVR located within the protection of the Safe room and separate alarm partition. The unit will be rack mounted and will transmit video clips of all alarm events off site for archiving. The NVR shall store recorded video for a period of not less than 60 days. Cameras have also been located in all areas that will have drug storage, drug dispensing and drug treatment operations. Additionally strategic cameras have been placed in waiting areas, hallway areas, stairwells and entrances to restrooms.

Releaf Recovery

Appendix A – Section L -#71

**CORP ADDRESS:**

379 Quarry Brook Dr.  
South Windsor CT 06074

**SITE ADDRESS:**

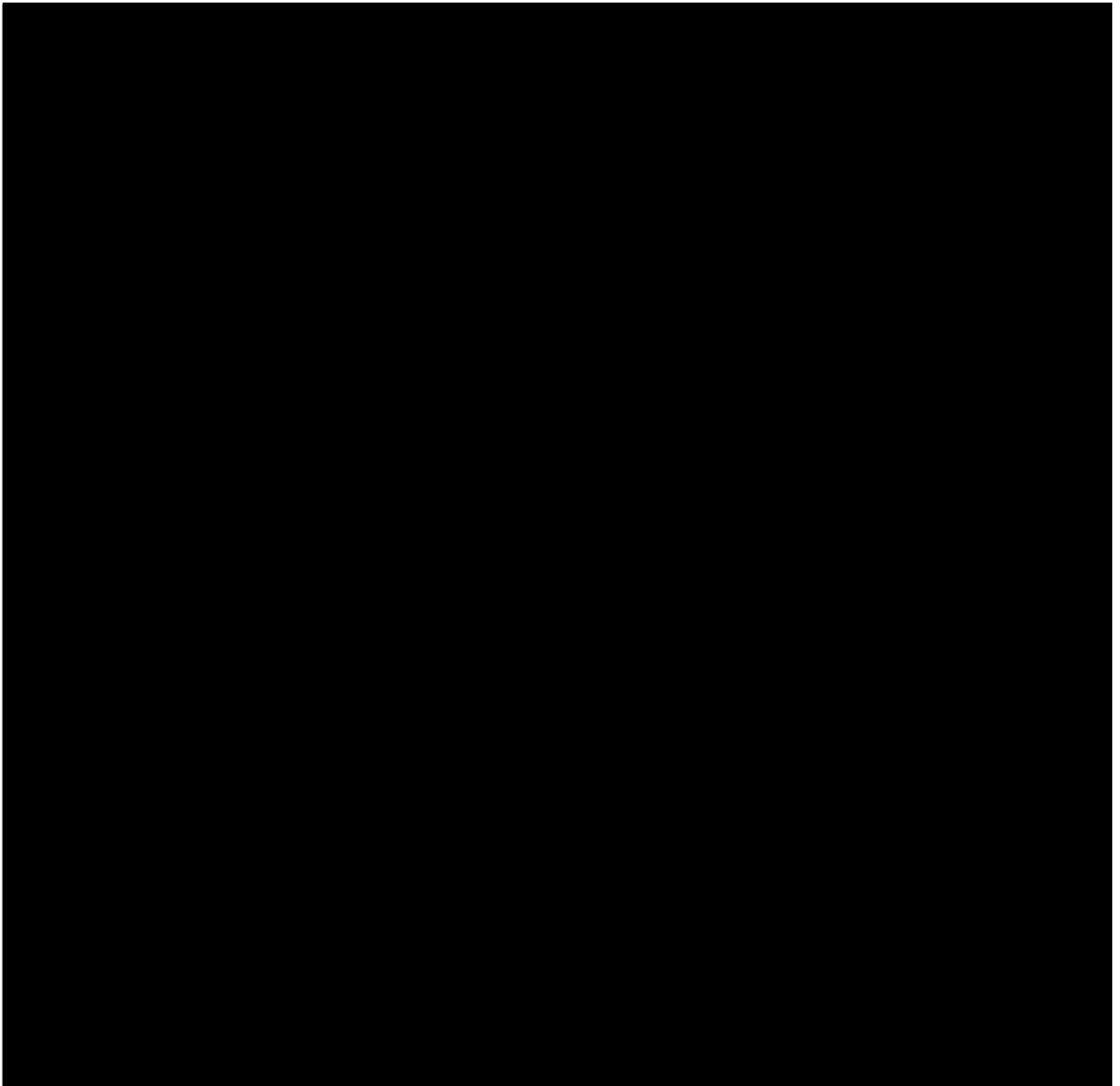
48 Union St. Unit #2  
Stamford, CT  
06906

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Account Name: Releaf Recovery, LLC  
Contact Name:

RFP Stage: In Progress

**Burglary Alarm System**



Releaf Recovery

Appendix A – Section L -#71

**CORP ADDRESS:**

379 Quarry Brook Dr.  
South Windsor CT 06074

**SITE ADDRESS:**

48 Union St. Unit #2  
Stamford, CT  
06906

Account Name: Releaf Recovery, LLC  
Contact Name:

RFP Stage: In Progress

Access Control Proximity System



Releaf Recovery

Appendix A – Section L -#71

**CORP ADDRESS:**

379 Quarry Brook Dr.  
South Windsor CT 06074

**SITE ADDRESS:**

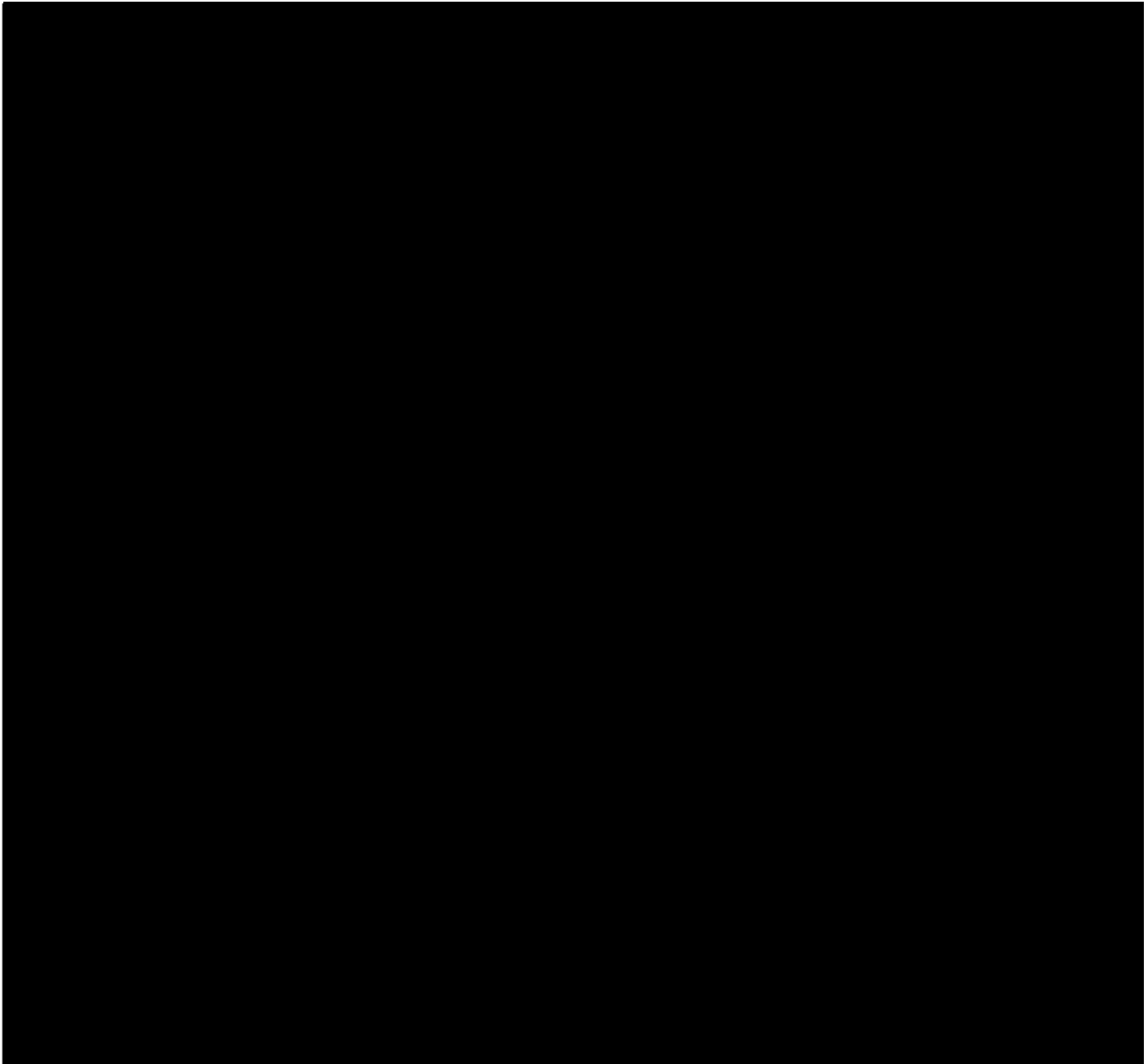
48 Union St. Unit #2  
Stamford, CT  
06906

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Account Name: Releaf Recovery, LLC  
Contact Name:

RFP Stage: In Progress

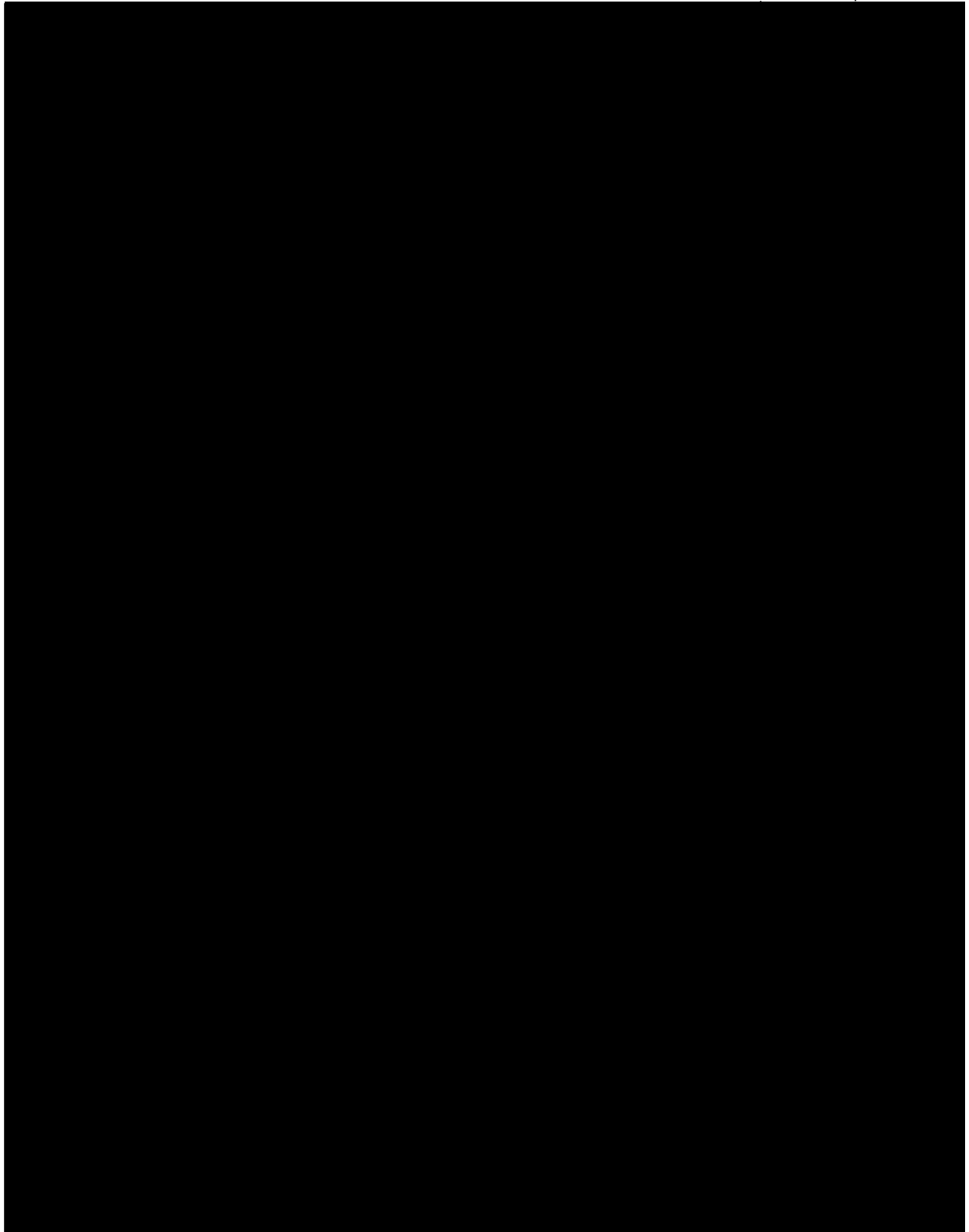
**CCTV System**

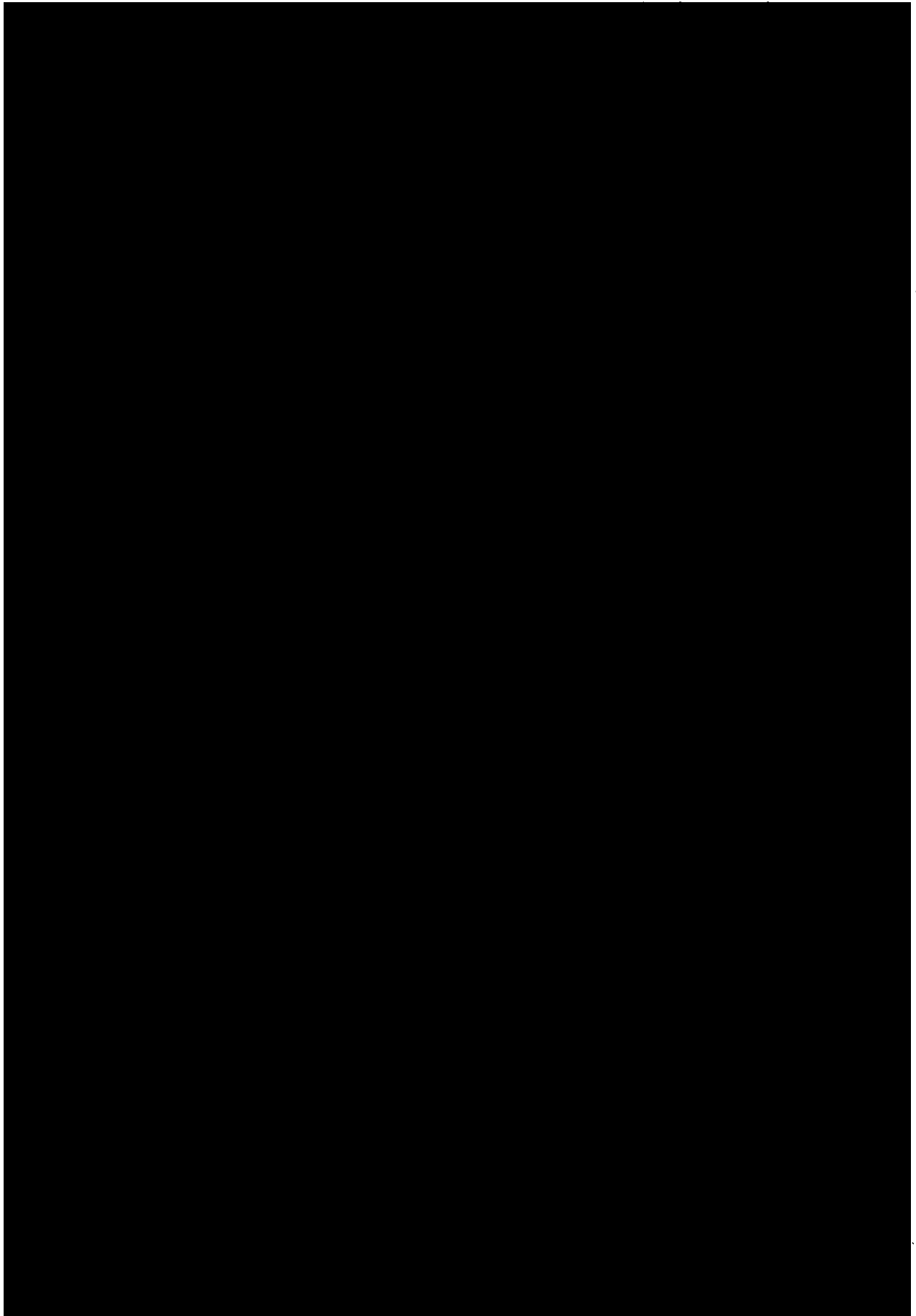


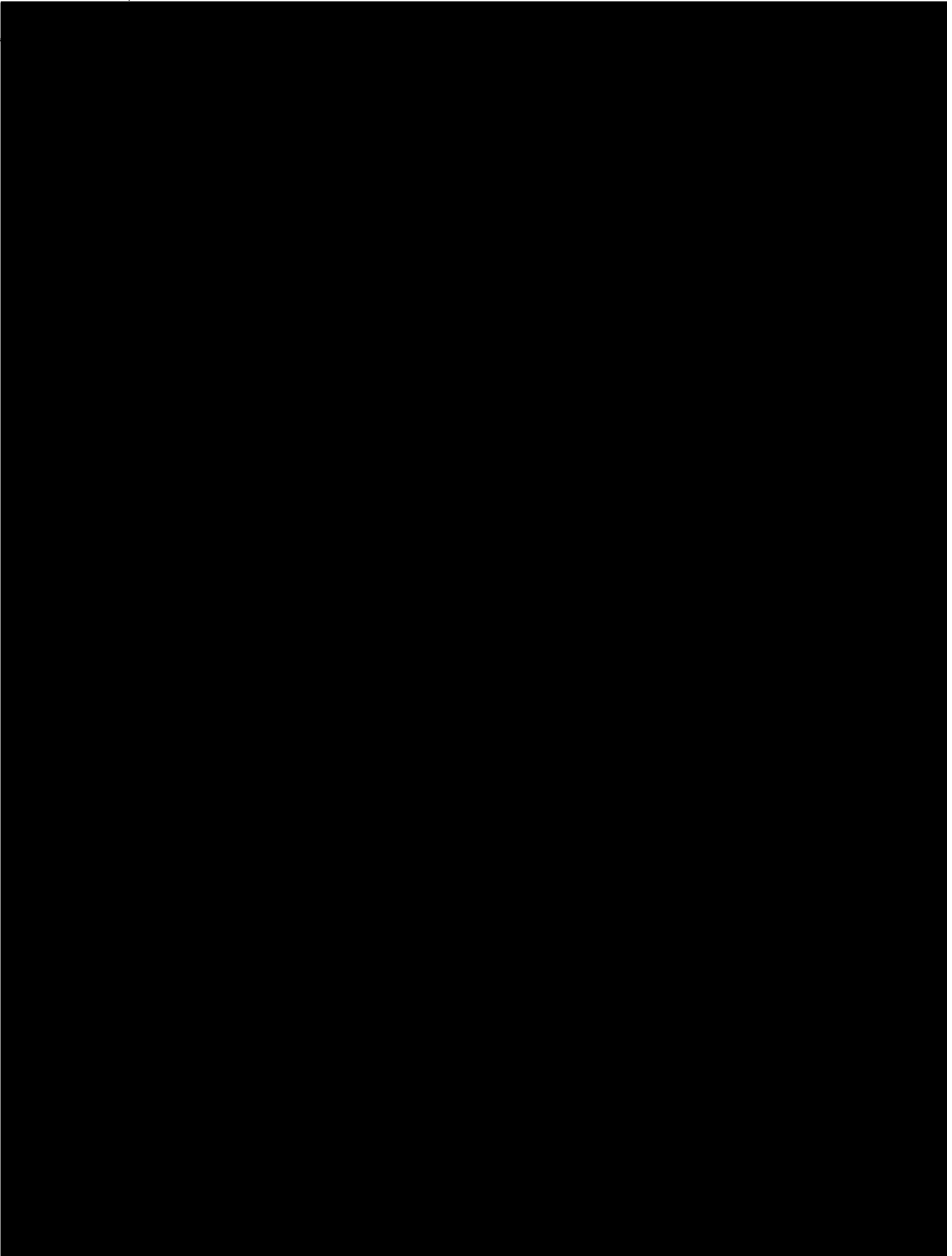


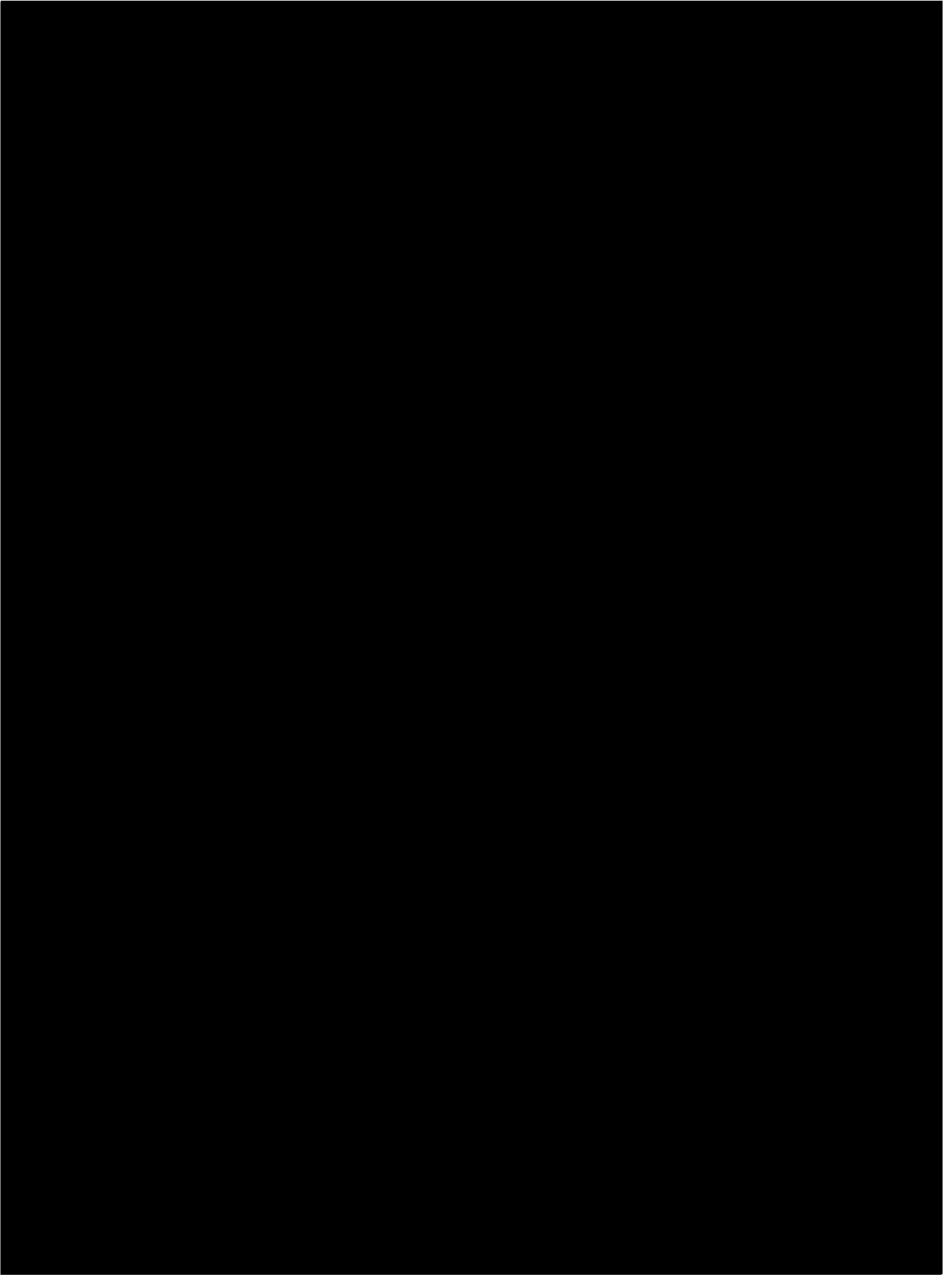
JOB SPECIFICATION NOTES

Releaf Recovery Stamford

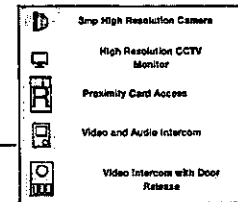
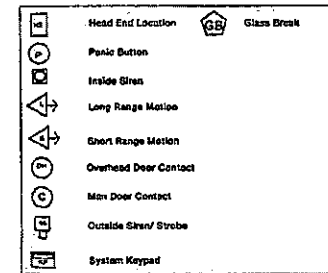
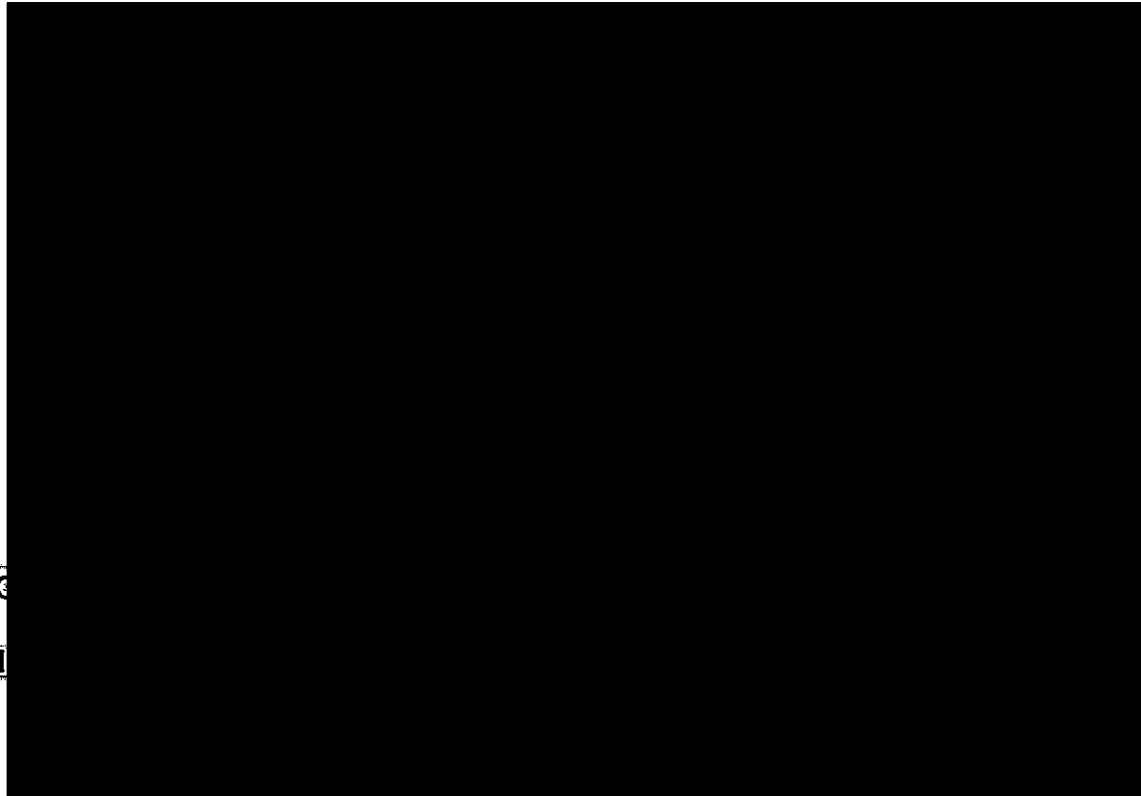








APPENDIX A SECTION L-71



building area:  
1500 sq gross

project  
north



8' 16'

THIS VERSION IS TO SC

Other versions are provid

preliminary



releaf recovery, llc

south windsor, ct

releaf recovery  
dispensary center

stamford, ct

schematic plan

pwc 3646  
09/16/15

A-1.0

2015 © COPYRIGHT PWC

# Emergency Response Plan

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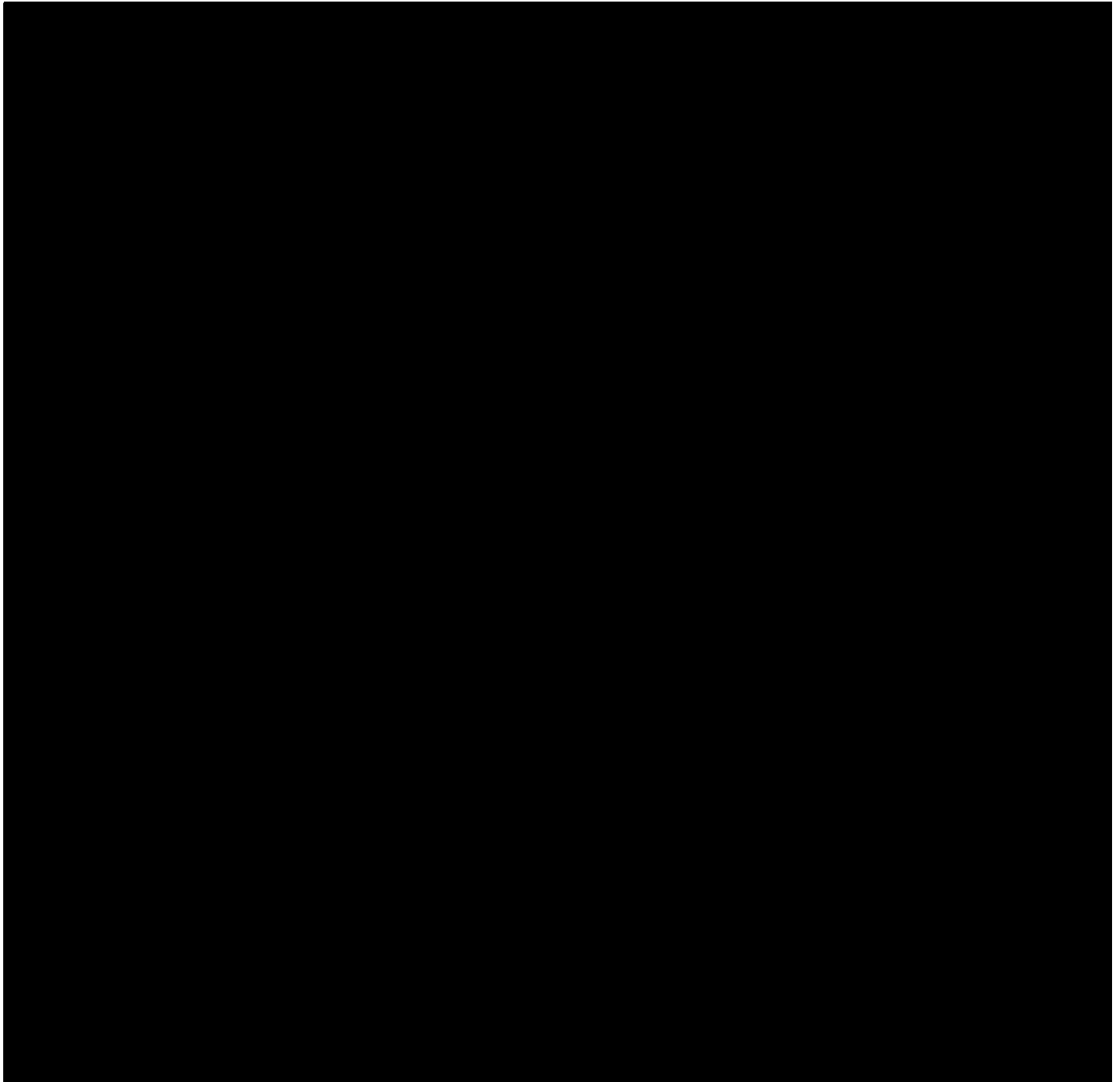
**Releaf Recovery**

Woodbridge CT

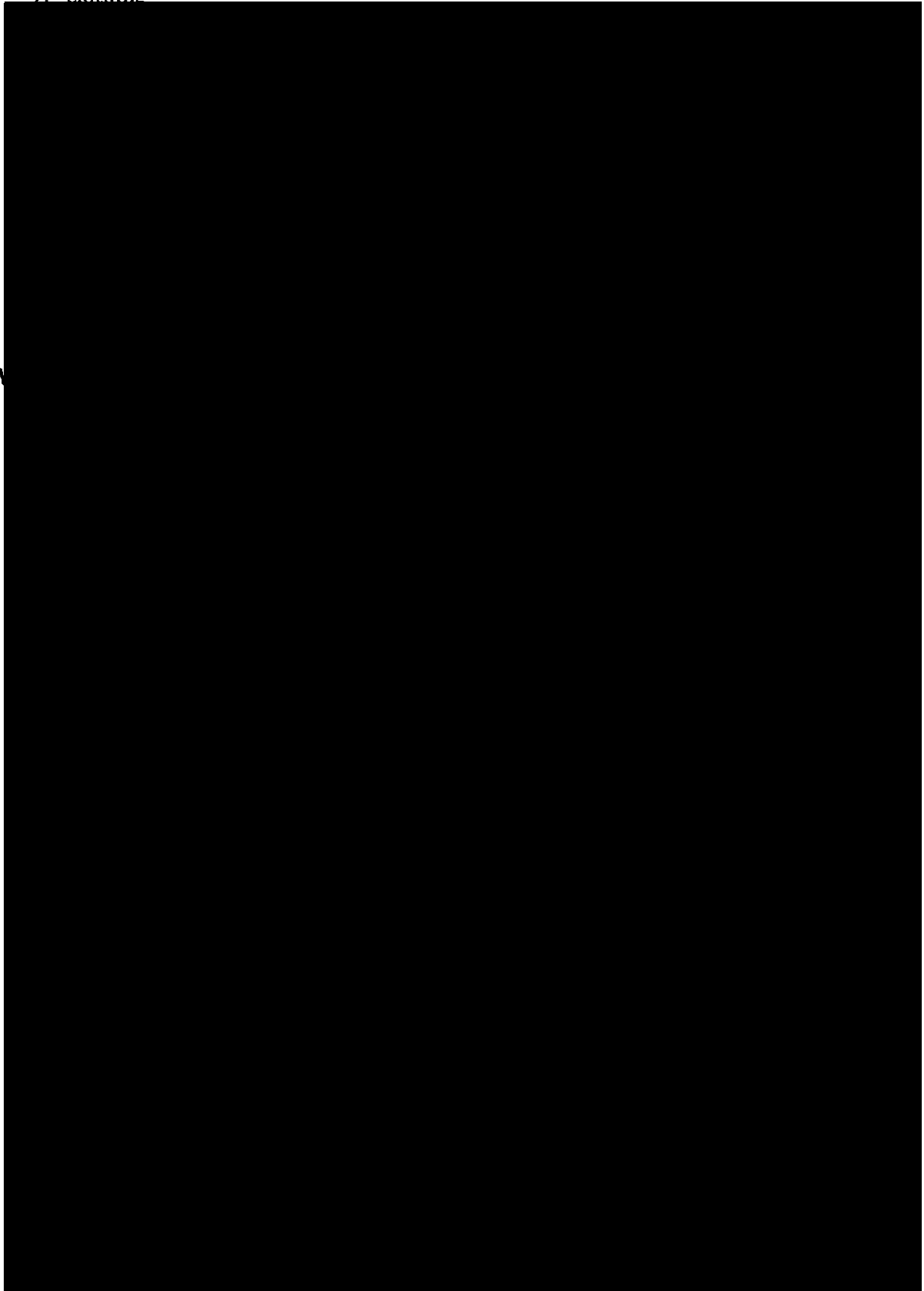
Stamford CT

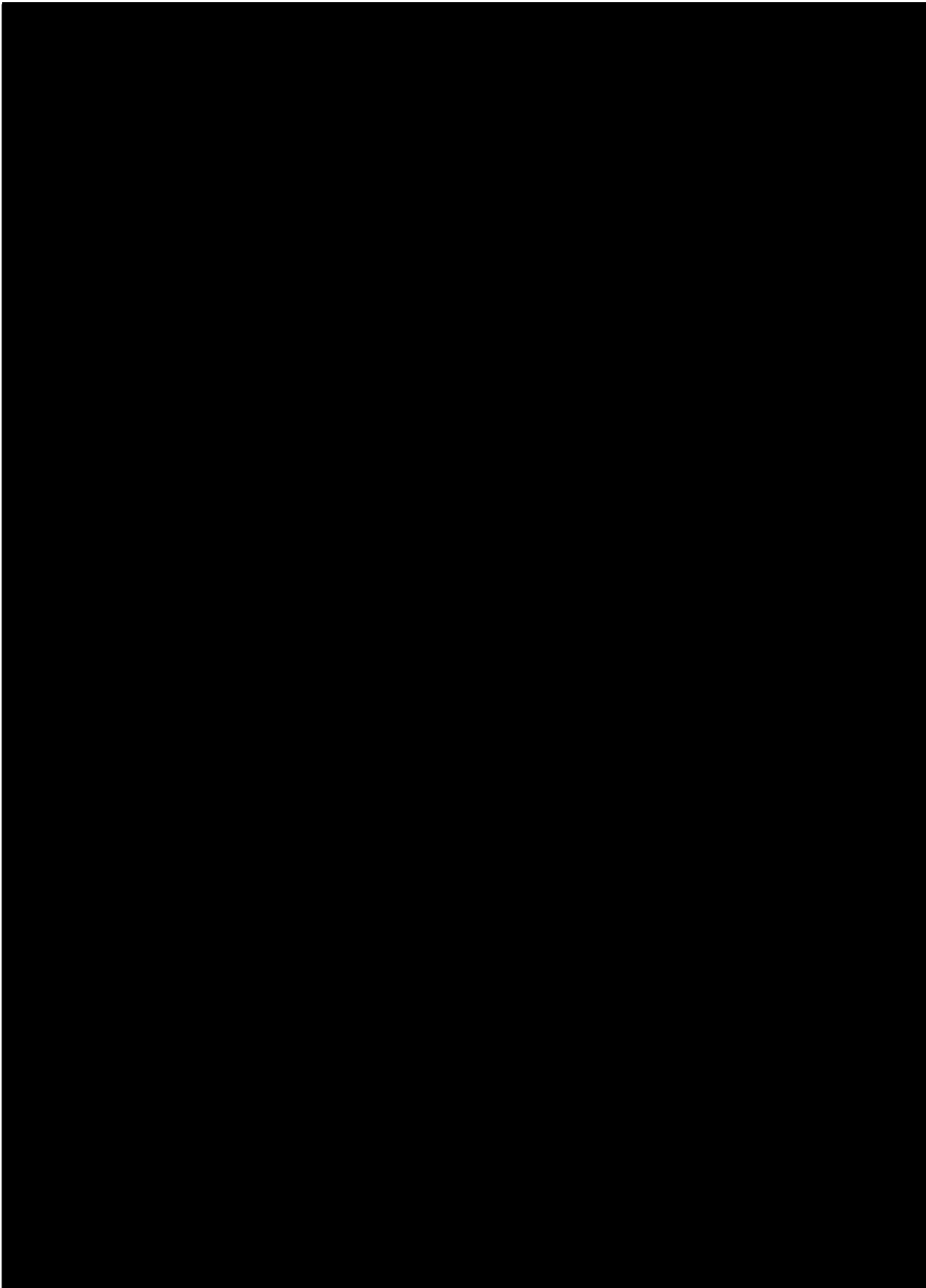
Contact: Angela D'Amico

Last Revision Date: 09/2015

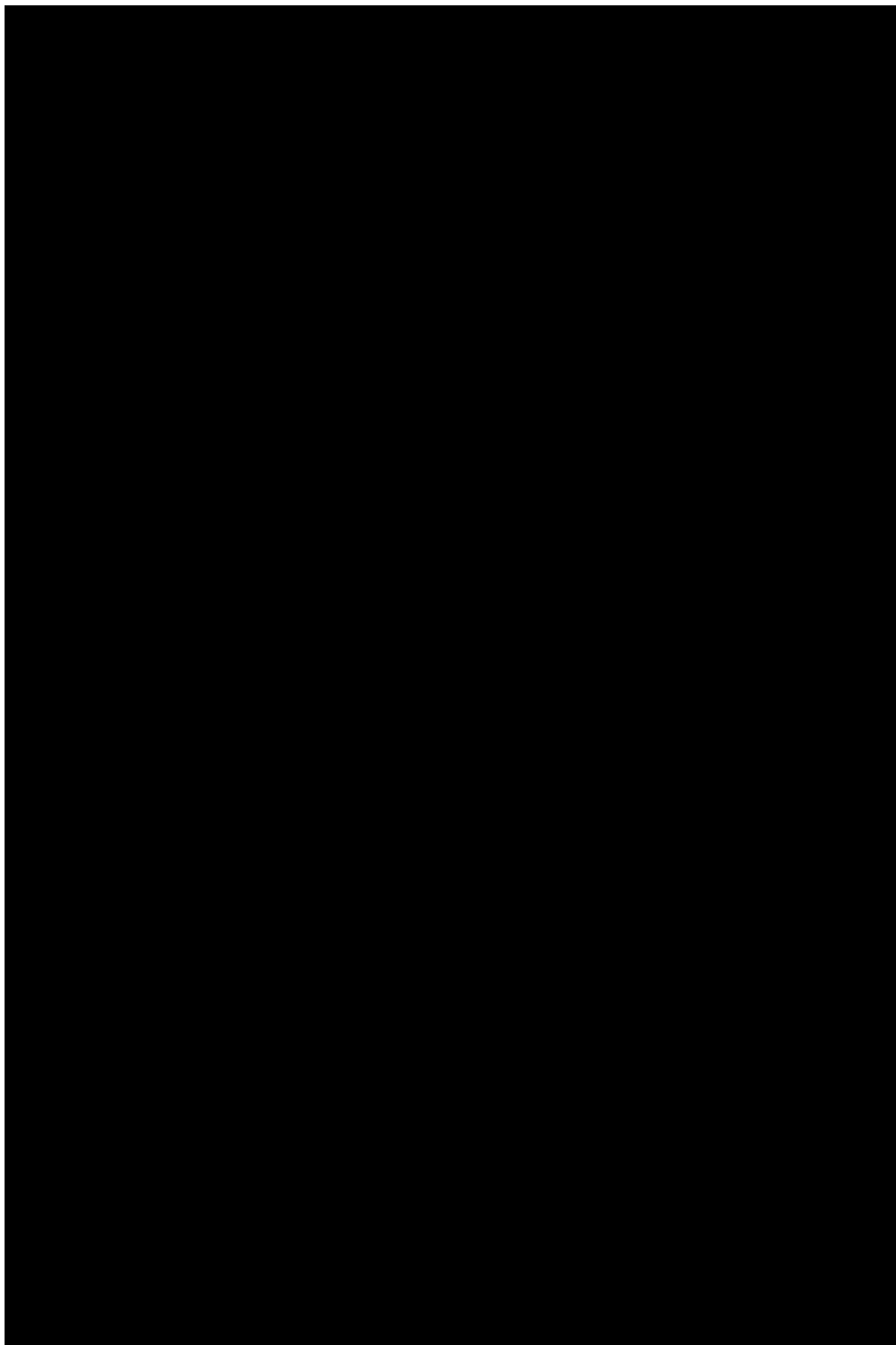


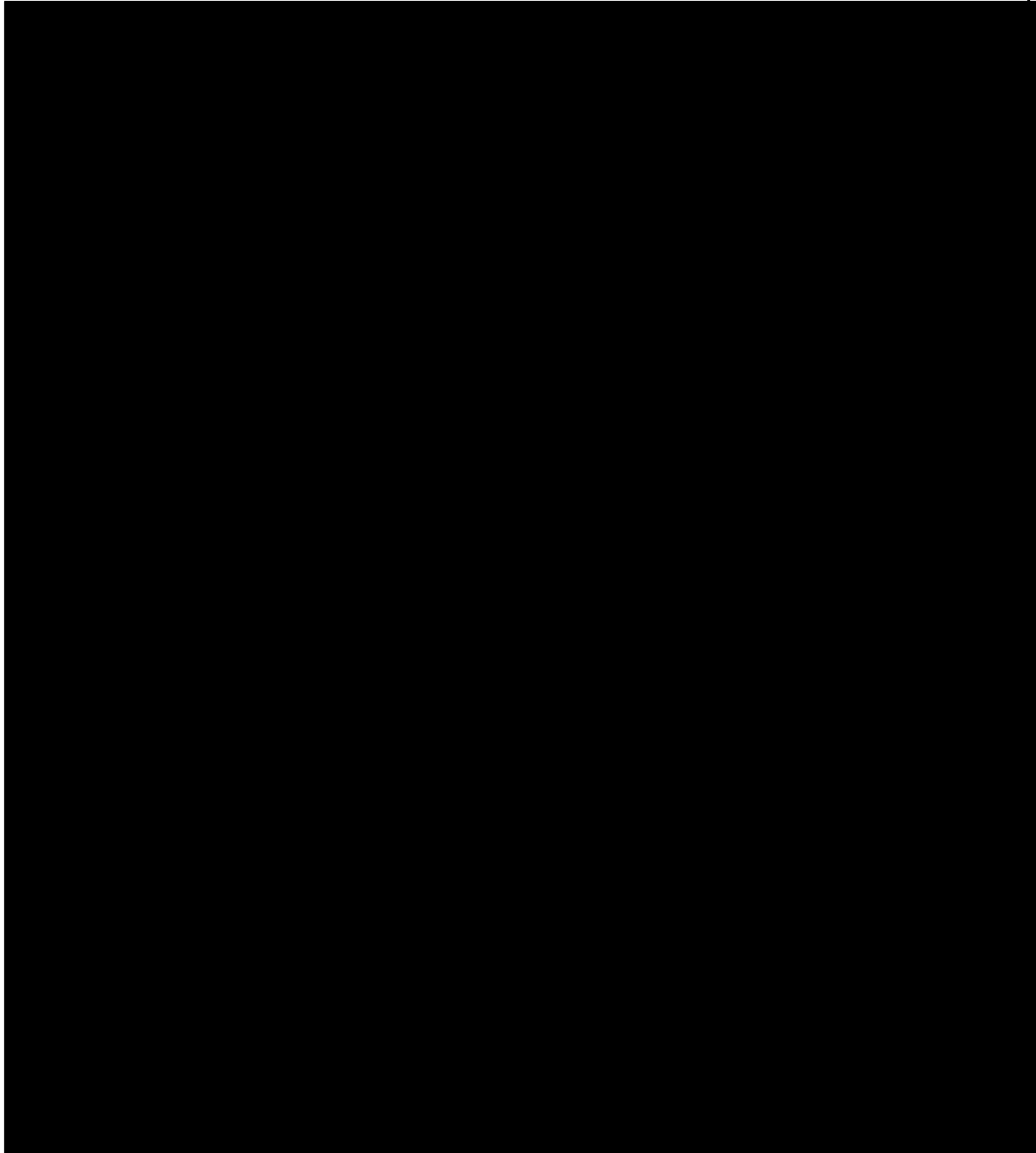
7. clothing











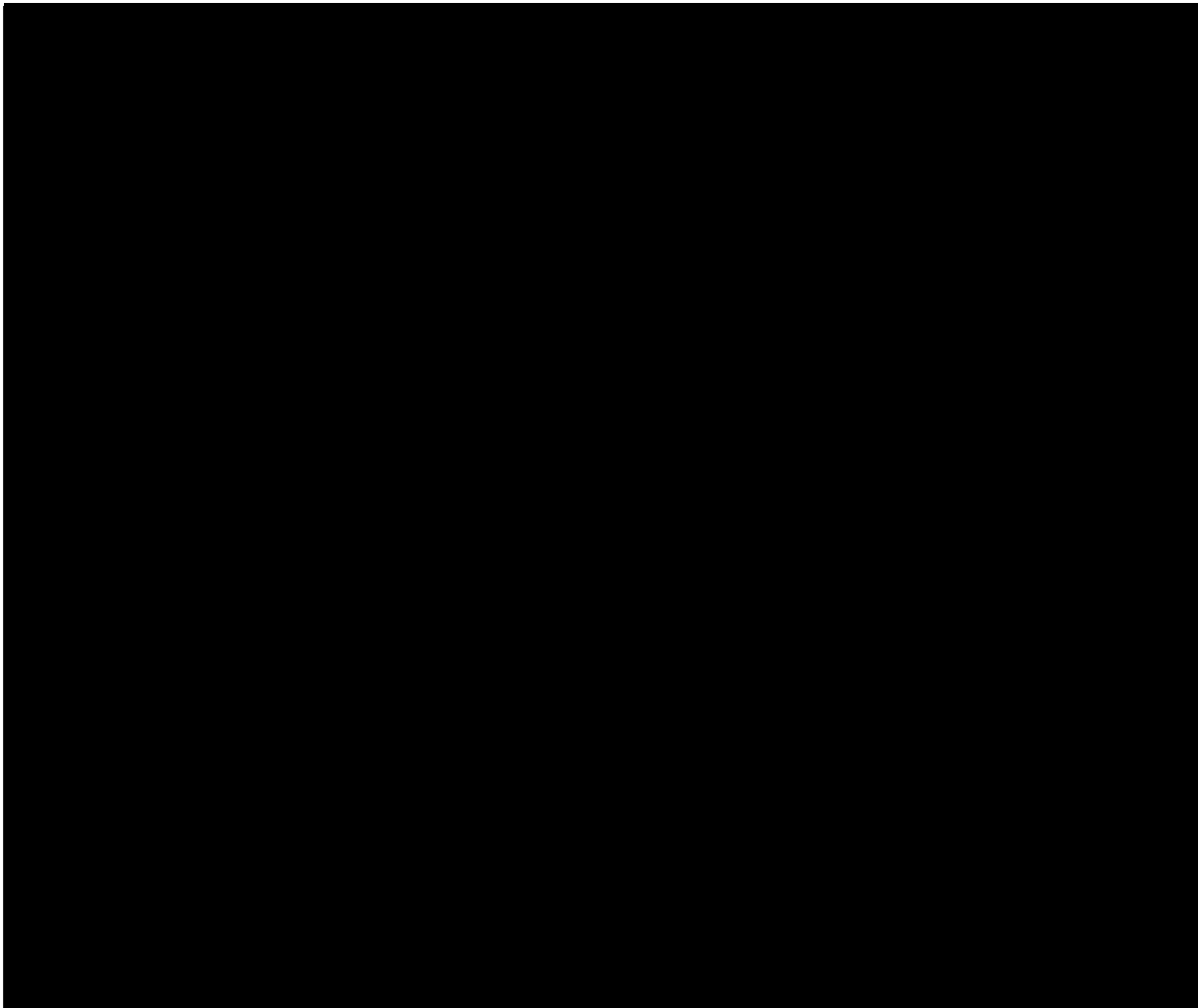
# Theft Diversion and Loss Program (overview)

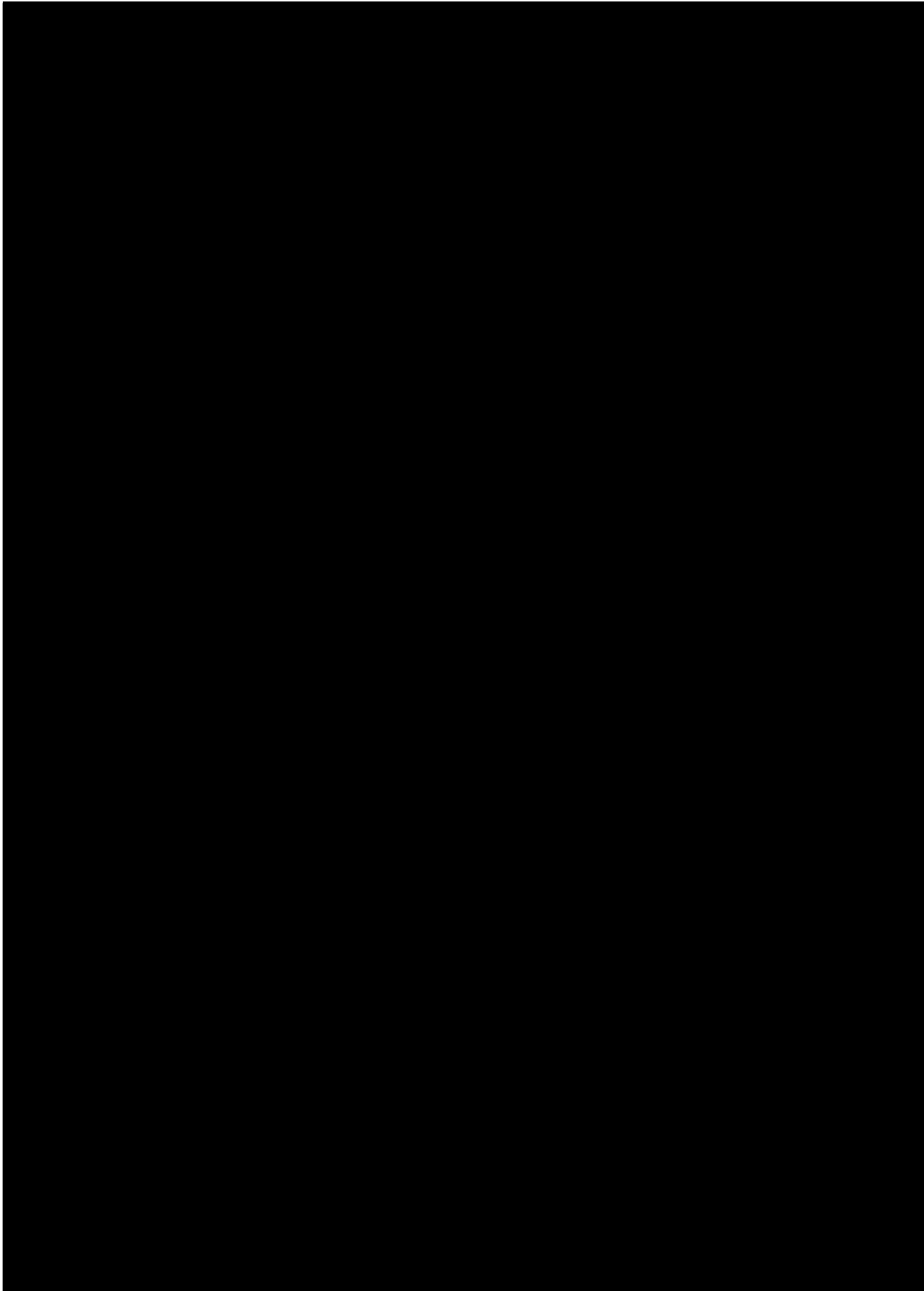
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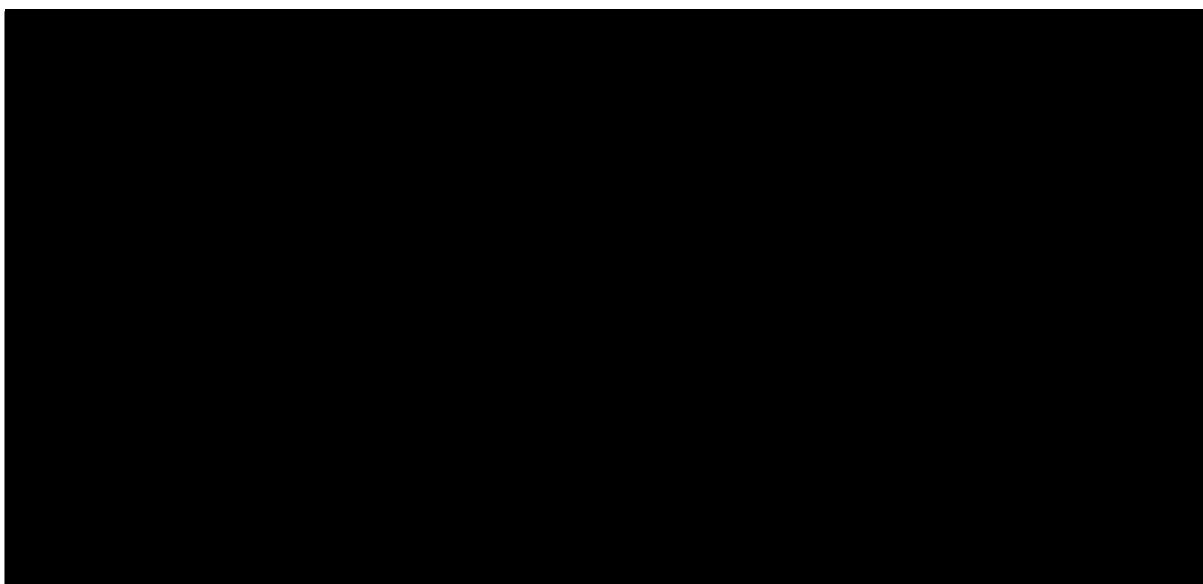
## Goals

Our goals for this program are to provide severe deterrence for the theft, diversion and loss of marijuana products. The outline of this program, contained below, will help minimize or eliminate product and financial losses to our business. Additionally the program is designed to make it difficult for a theft to occur from internal and external sources, and to increase the probability of successfully apprehending an offender. Our program is based and augmented on ideals published by the Drug Enforcement Administration (Sept, 2012).

## Burglary









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## Appendix B

### Dispensary Facility Backer Information Form

This form must be completed by each person or entity identified as a dispensary facility backer in Appendix A, section I.

#### Section A: Backer Information

1. Backer business type:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sole Proprietorship	Corporation	Limited Liability Co.	Partnership	Limited Liability Partnership	Unincorporated Association	Other: Individual

2. Legal Name of Backer:

Angela D'Amico

3. Trade Name of Backer (if applicable):

4. Street Address (including Apartment or Suite #):

55 Brittany Ave

5. City:

Trumbull

6. State:

CT

7. Zip Code:

06611

8. Daytime Telephone Number:

(203) 362-8461

9. Fax Number:

10. E-mail Address:

angela@ccc-ct.com

#### Section B: Backer Members

If you selected anything other than "Sole Proprietorship" in response to Section A, identify the members of your organization. A member is any person with a direct or indirect ownership interest greater than 5%. Attach additional pages if necessary.

Each member of a backer identified in response to this section must complete either:

- Appendix C if they are also a director, owner, officer or other high-level employee of the applicant; or
- Appendix E in all other instances.

11. Name (First, Middle, Last):	12. Percentage of ownership interest
Angela D'Amico	25%
Thomas Nicholas	25%
Kevin Murphy	25%
John Glowik	25%



# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)



## Section C: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

13. State	14. Issue Date (month/year):	09 /2011	15. Type:	16. Number:
CT	Expiration Date (month/year):	09 / 2016	MMDE	0000018
17. State	18. Issue Date (month/year):	09 / 2015	19. Type:	20. Number:
CT	Expiration Date (month/year):	09 / 2016	MMDB	0000004

## Section D: Legal Proceedings

21. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

22. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

23. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on your ability to serve as a backer for the applicant.

24. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section E: Criminal Actions

25. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

Releaf Recovery

Appendix B – Section C; continued

Appendix B – Section C; continued

State: CT issue date: 4/15 expiration date: 4/16 Facility license: MMDF.0000003





# Medical Marijuana Program

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## Section F: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. As the backer, or duly authorized representative of the backer, I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

26. Signature:

▶

27. Date Signed:

9.12.15

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

28. Signature:

▶

29. Date Signed:

9.12.15



# Medical Marijuana Program

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## Appendix B

### Dispensary Facility Backer Information Form

This form must be completed by each person or entity identified as a dispensary facility backer in Appendix A, section I.

Section A: Backer Information						
1. Backer business type:						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association	<input checked="" type="checkbox"/> Other: Individual
2. Legal Name of Backer: Thomas J. Nicholas						
3. Trade Name of Backer (if applicable):						
4. Street Address (including Apartment or Suite #): 379 Quarry Brook Drive						
5. City: South Windsor				6. State: CT	7. Zip Code: 06074	
8. Daytime Telephone Number: (860) 558-4935		9. Fax Number: (860) 644-9440			10. E-mail Address: t.j.nicholas@att.net	

Section B: Backer Members	
<p>If you selected anything other than "Sole Proprietorship" in response to Section A, identify the members of your organization. A member is any person with a direct or indirect ownership interest greater than 5%. Attach additional pages if necessary.</p> <p>Each member of a backer identified in response to this section must complete either:</p> <ul style="list-style-type: none"> <li>• Appendix C if they are also a director, owner, officer or other high-level employee of the applicant; or</li> <li>• Appendix E in all other instances.</li> </ul>	
11. Name (First, Middle, Last):	12. Percentage of ownership interest
Thomas Joseph Nicholas	25%



# Medical Marijuana Program

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## Section C: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

13. State NY	14. Issue Date (month/year): 10 / 77 Expiration Date (month/year): 10 / 80	15. Type: Registered Nursing	16. Number: 299758
17. State CT	18. Issue Date (month/year): 11 / 79 Expiration Date (month/year): 09 / 96	19. Type: Registered Nursing	20. Number: 10.R32804

## Section D: Legal Proceedings

21. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

22. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

23. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on your ability to serve as a backer for the applicant.

24. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section E: Criminal Actions

25. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.



# Medical Marijuana Program

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## Section F: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. As the backer, or duly authorized representative of the backer, I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

26. Signature:



*Thomas J. Michaels*

27. Date Signed:

9/8/2015

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

28. Signature:



*Thomas J. Michaels*

29. Date Signed:

9/8/2015

APPENDIX C, OFFICER BACKGROUND INFORMATION FORM  
SECTION "D", #26 INFORMATION

26. Prime Wellness of Connecticut, LLC  
75 John Fitch Boulevard  
South Windsor, CT 06074

Position - CEO

Employed from 9.1.2014 to present but associated with the  
Business from its inception in 2013.

Prime Wellness has never been accused of violating any local,  
State or Federal laws or regulations.

APPENDIX B AND C, DISPENSARY FACILITY BACKER INFORMATION FORM  
SECTION "C & E" INFORMATION

**T.J. Nicholas Professional Licenses (Retired)**

1. New York State Registered Nursing License #299758 - Granted 10/21/77.
2. Connecticut Registered Nursing License # - 10.R32604 granted 11/27/79 valid through 9/30/96.

**Other licenses**

State of Connecticut Driver's license

APPENDIX B AND C, DISPENSARY FACILITY BACKER INFORMATION FORM  
SECTION "C & E" INFORMATION

**T.J. Nicholas Ownership in Licensed Dialysis Facilities**

1. Enfield Dialysis Center, Inc. (lic. # 0157) – 148 Hazard Avenue, Enfield, CT. Certified on 2/28/90 and sold to BMA of CT (FMC) effective 1-1-98 (lic. # 0247).
  2. East Hartford Dialysis Center, Inc. (lic. # 0210) – 200 Pitkin Street, East Hartford, CT. Certified on 2/4/94 and sold to BMA of CT (FMC) effective 1-1-98 (lic.# 0248).
  3. Central Connecticut Dialysis Center, Inc. (lic. # 0207) - 377 Research Parkway, Meriden, CT. Certified on 1/13/94 and sold to BMA of CT (FMC) effective 1-1-98 (lic. # 0246).
  4. Rocky Hill Dialysis Center, LLC. (lic. # 0259) – 30 Waterchase Drive, Rocky Hill, CT. Certified on 12/15/99 and sold to DaVita effective 9-1-01(lic. # 0270).
  5. Middlesex Dialysis Center, LLC. (lic. # 0269) – 100 Main St., Suite A, Middletown, CT. Certified on 11/15/2000 and sold to DaVita effective 9-1-01 (lic.# 0316).
- (I was the "Agent of Service" for the above companies)
6. Pioneer Valley Dialysis Center – 208 Ashley Avenue, W. Springfield, MA. Certified on 11/22/96 and sold to FMC effective 1-1-98.
  7. Yankee Family Dialysis Center – 115 Wildwood Avenue, Greenfield, MA. Certified on 11/21/96 and sold to FMC effective 1-1-98.
  8. Manadnock Dialysis Center – 428B Winchester Avenue, Keene, NH. Certified on 5/21/97 and sold to FMC effective 1-1-98.
  9. Central Suffolk AKC, dba Dialysis Pro Re Nata (op. cert. # 5151204R) – 5225 Nesconset Highway, Port Jefferson Station, NY. Certified on 1/18/82, joined as an owner in 1990, sold to FMC in 2006.
  10. South Shore Dialysis (op. cert. # 2906202R) – 615 Peninsula Blvd. Hempstead, NY. Certified on 1/21/84, joined as owner in 1999, sold to DaVita in 2001.  
- 250 Pettit Avenue, Bellmore, NY. Certified on 1/21/84.
  11. Eastview Dialysis Inc. (op. cert. # 3464201R) – 120 Victor Heights Parkway, Victor, NY. Certified on August 17, 1998. Sold to FMC 2011. I was agent of service for EDI.



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## Appendix B

### Dispensary Facility Backer Information Form

This form must be completed by each person or entity identified as a dispensary facility backer in Appendix A, section I.

#### Section A: Backer Information

1. Backer business type:

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association	<input checked="" type="checkbox"/> Other: <u>Individual</u>
--	--------------------------------------	--	--------------------------------------	--	---	--

2. Legal Name of Backer:

Kevin P Murphy

3. Trade Name of Backer (if applicable):

4. Street Address (including Apartment or Suite #):

70 Island Avenue

5. City:

Madison

6. State:

CT

7. Zip Code:

06443

8. Daytime Telephone Number:

(917) 664-2913

9. Fax Number:

10. E-mail Address:

kpmurphy50@gmail.com

#### Section B: Backer Members

If you selected anything other than "Sole Proprietorship" in response to Section A, identify the members of your organization. A member is any person with a direct or indirect ownership interest greater than 5%. Attach additional pages if necessary.

Each member of a backer identified in response to this section must complete either:

- Appendix C if they are also a director, owner, officer or other high-level employee of the applicant; or
- Appendix E in all other instances.

11. Name (First, Middle, Last): Kevin P Murphy	12. Percentage of ownership interest 25





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## Section C: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

13. State CT, NY	14. Issue Date (month/year): 07 /87 Expiration Date (month/year): /	15. Type: Series 7, 63	16. Number: 1680861
17. State	18. Issue Date (month/year): / Expiration Date (month/year): /	19. Type:	20. Number:

## Section D: Legal Proceedings

21. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

22. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

23. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on your ability to serve as a backer for the applicant.

24. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section E: Criminal Actions

25. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.



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## Section F: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. As the backer, or duly authorized representative of the backer, I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

26. Signature:



27. Date Signed:

9-10-15

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

28. Signature:



29. Date Signed:

9-10-15



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## Appendix B

### Dispensary Facility Backer Information Form

This form must be completed by each person or entity identified as a dispensary facility backer in Appendix A, section I.

Section A: Backer Information						
1. Backer business type:						
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Unincorporated Association	<input type="checkbox"/> Other:
2. Legal Name of Backer: John P. Glowik Jr.						
3. Trade Name of Backer (if applicable):						
4. Street Address (including Apartment or Suite #): 44 Independence Lane						
5. City: Shrewsbury				6. State: MA	7. Zip Code: 01545	
8. Daytime Telephone Number: (508) 925-5676		9. Fax Number: (508) 925-5676			10. E-mail Address: jg1973hc@aol.com	

Section B: Backer Members	
<p>If you selected anything other than "Sole Proprietorship" in response to Section A, identify the members of your organization. A member is any person with a direct or indirect ownership interest greater than 5%. Attach additional pages if necessary.</p> <p>Each member of a backer identified in response to this section must complete either:</p> <ul style="list-style-type: none"> <li>Appendix C if they are also a director, owner, officer or other high-level employee of the applicant; or</li> <li>Appendix E in all other instances.</li> </ul>	
11. Name (First, Middle, Last): John P. Glowik Jr.	12. Percentage of ownership interest 25%
Angela D'Amico	25%
Thomas J. Nicholas	25%
High Street Capital Partners	25%



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## Section C: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary. **SEE ATTACHED**

13. State CT	14. Issue Date (month/year): 04 / 2015 Expiration Date (month/year): 04 / 16	15. Type: MMDF	16. Number: .0000004
17. State CT	18. Issue Date (month/year): 04 / 14 Expiration Date (month/year): 04 / 15	19. Type: MMDF	20. Number: .0000004

## Section D: Legal Proceedings

21. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

22. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

23. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on your ability to serve as a backer for the applicant.

24. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section E: Criminal Actions

25. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

APPENDIX B Section C: Licenses, Permits and Registrations

J.P. Glowik Jr.'s Ownership in Licensed Dialysis Facilities

1. Enfield Dialysis Center, Inc. (lic.# 0157) – 148 Hazard Avenue, Enfield, CT. Certified on 2/28/90 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0247).
2. East Hartford Dialysis Center, Inc. (lic. # 0210) – 200 Pitkin Street, East Hartford, CT. Certified on 2/4/94 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0248).
3. Central Connecticut Dialysis Center, Inc. (lic. # 0207) - 377 Research Parkway, Meriden, CT. Certified on 1/13/94 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0246).
4. Rocky Hill Dialysis Center, LLC. (lic. # 0259) – 30 Waterchase Drive, Rocky Hill, CT. Certified on 12/15/99 and sold to DaVita effective 9/1/01 (lic. # 0270).
5. Middlesex Dialysis Center, LLC. (lic. # 0269) – 100 Main St., Suite A, Middletown, CT. Certified on 11/15/2000 and sold to DaVita effective 9/1/01 (lic. # 0316).
6. Pioneer Valley Dialysis Center – 208 Ashley Avenue, W. Springfield, MA. Certified on 11/27/96 and sold to FMC effective 1/1/98.
7. Yankee Family Dialysis Center – 115 Wildwood Avenue, Greenfield, MA. Certified on 12/10/96 and sold to FMC effective 1/1/98.
8. Monadnock Dialysis Center – 428B Winchester Avenue, Keene, NH. Certified on 5/21/97 and sold to FMC effective 1/1/98.
9. Central Suffolk AKC, dba Dialysis Pro Re Nata (op.cert. # 5151204R) – 5225 Nesconset Highway, Port Jefferson Station, NY. Certified on 1/18/82, joined as an owner in 1990, sold to FMC in 2006.
10. South Shore Dialysis (op.cert. # 2906202R) – 615 Peninsula Blvd. Hempstead, NY. Certified on 1/21/84, joined as owner in 1999, sold to DaVita in 2001.  
- 250 Pettit Avenue, Bellmore, NY. Certified on 1/21/84.
11. Eastview Dialysis Inc. (op.cert. # 3464201R) – 120 Victor Heights Parkway, Victor, NY. Certified on August 17, 1998. Sold to FMC 2011.

12. Capital District Dialysis Center – 650 McClellan Street, Schenectady, NY. Certified on 9/30/88, joined as owner in 1990, sold to FMC in 2006.

13. Albany Dialysis Center - 64 Albany Shaker Road, Albany, NY. Certified on 6/30/83, joined as owner in 1991 and sold to FMC in 2006.

14. Albany Regional Kidney Center – 2 Clara Barton Drive, Albany, NY. Certified on 6/30/83, joined as owner in 1993, sold to FMC in 2006.

15. Amsterdam Dialysis Center – 1810 Riverfront Center, Amsterdam, NY. Certified on 8/14/98 and sold to FMC in 2006.

\* I was "Agent of Service" on facilities # 6, 7 and 8 above.



# Medical Marijuana Program

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## Section F: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. As the backer, or duly authorized representative of the backer, I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

26. Signature:

*John P. Blawie Jr.*

27. Date Signed:

9/08/2015

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

28. Signature:

*John P. Blawie Jr.*

29. Date Signed:

9/08/2015



# Medical Marijuana Program



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## Appendix C

### Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section J.

#### Section A: Personal Information

1. Name (First, Middle, Last): Angela D'Amico			
2. Street Address (including Apartment or Suite #): 55 Brittany Ave			
3. City: Trumbull		4. State: CT	5. Zip Code: 06611
6. Title: CEO	7. Telephone Number: (203) 362-8461	8. E-mail Address: angela@ccc-ct.com	
11. Gender: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female			
12. Current or Most Recent Employer: D & B Wellness, LLC		13. Date of Employment: Start Date: 10 / 01 / 2013 End Date: / /	
14. Employer Address (including Apartment or Suite #): 4 Garella Rd			
15. City: Bethel		16. State: CT	17. Zip Code: 06804
18. Telephone Number: (203) 909.6869	19. Fax Number:	20. E-mail Address: info@ccc-ct.com	

#### Section C: Pharmacy Business Experience

21. Do you have any experience controlling, managing, operating or working for a pharmacy?  
 Yes  No

22. Are you currently associated with a pharmacy in any state?  
 Yes  No

23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information:

- The pharmacy name;
- The pharmacy's location;
- All titles and responsibilities held by you at the pharmacy, including the time frame for each;
- The dates of your association with the pharmacy;
- Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and
- Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, how those allegations were resolved.





# Medical Marijuana Program

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## Section D: Marijuana Business Experience

24. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana business?

Yes  No

25. Other than the applicant, are you currently associated with a marijuana business in any state or country?

Yes  No

26. If you answered "yes" to question 24 or 25, attach a statement setting forth the following information for each marijuana business with which you have been associated:

- The business name;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why; and
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations.

## Section E: Other Relevant Business Experience

27. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

Yes  No

28. If you answered "yes" to question 27, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

## Section F: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

29. State	30. Issue Date (month/year):	09 / 2016	31. Type:	32. Number:
CT	Expiration Date (month/year):	09 / 2016	MMDB	0000004
33. State	34. Issue Date (month/year):	04 / 2016	35. Type:	36. Number:
CT	Expiration Date (month/year):	04 / 2016	MMDF	0000003

Releaf Recovery

Appendix B – Section C; continued

Appendix B – Section C; continued

State: CT issue date: 4/15 expiration date: 4/16 Facility license: MMDF.0000003



RESUME

**CORPORATE BUSINESS OWNER**

Dynamic results-oriented professional with over 30 years of broad based experience and visible achievements in business development/startup, strategic business partnerships and emerging markets. Out of the box thinker with visionary leadership strengths; resourceful team player characterized by innovative entrepreneurial spirit.

**CORE COMPETENCIES**

Business Start Up and Turnaround, Market Assessment and Research, Customer Relationship Management. Strategic Business Planning. Product Development and Launch. Client Needs Analysis, Productivity and Process Improvement. Training and Development. Major Account and National Sales. Strategic Sales and Marketing.

**CAREER**

**D&B WELLNESS, LLC dba COMPASSIONATE CARE CENTER OF CT - FOUNDER 2013- PRESENT**

Supervise and oversee daily operations of CCC including but not limited to; laws, ordering, paperwork, sales, vendor relationships, patient services, regulatory compliance, patient communication and education. Speak and coordinate all educational classes in dispensary and at support groups for approved diseases. Meet with doctors to educate and hopefully sign up to become a certifying doctor for the program. Train, coach and encourage success of all managers and staff. Maintain daily contact with security specialist to ensure all security measure are current and operational. Maintain all patient lists and communicate with expired card holders to help in the recertification process. Handle all marketing and merchandising for CCC.

**A.D. LINES EURO GROUP, INC. PRESIDENT/OWNER 1986-PRESENT**

Developed and built business from start up to generate multi million dollar sales annually; established strong account customer base of retailers, manufacturers, and independents. Increased sales year after year by leveraging referenceable accounts to build credibility and introducing new sales tools and marketing collateral. Opened the market ahead of the competitions, persuasively overcoming customers concerns about current economic down trend and belief in our product viability. Created marketing presentation and demo products. Developed all trade show booth design and trend. Hired, trained and supervised all staff, sales team, and independent contractors

**EDUCATION**  
BARUCH COLLEGE,  
THE CITY UNIVERSITY OF NEW YORK  
ZICKLIN SCHOOL OF BUSINESS  
B.S. 1979





# Medical Marijuana Program

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## Section G: Legal Proceedings

37. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

38. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

39. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

40. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section H: Criminal Actions

41. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section I: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

42. Signature



43. Date Signed:

9.12.15



# Medical Marijuana Program

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I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

44. Signature:



45. Date Signed:

9.12.15



# Medical Marijuana Program

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## Appendix C

### Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section J.

Section A: Personal Information			
1. Name (First, Middle, Last): Thomas Joseph Nicholas			
2. Street Address (including Apartment or Suite #): 379 Quarry Brook Drive			
3. City: South Windsor		4. State: CT	5. Zip Code: 06074
6. Title: COO	7. Telephone Number: (860) 558-4935	8. E-mail Address: t.j.nicholas@att.net	
[Redacted]			11. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Section B: Employment Information			
12. Current or Most Recent Employer: Prime Wellness of Connecticut, LLC		13. Date of Employment: Start Date: 09 / 01 / 14 End Date: : / /	
14. Employer Address (including Apartment or Suite #): 75 John Fitch Boulevard			
15. City: South Windsor		16. State: CT	17. Zip Code: 06074
18. Telephone Number: (860) 331-8918	19. Fax Number: (860) 436-5007	20. E-mail Address: tom@primewellnessofct.com	
Section C: Pharmacy Business Experience			
21. Do you have any experience controlling, managing, operating or working for a pharmacy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
22. Are you currently associated with a pharmacy in any state? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information: <ul style="list-style-type: none"> <li>• The pharmacy name;</li> <li>• The pharmacy's location;</li> <li>• All titles and responsibilities held by you at the pharmacy, including the time frame for each;</li> <li>• The dates of your association with the pharmacy;</li> <li>• Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and</li> <li>• Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, how those allegations were resolved.</li> </ul>			



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## Section D: Marijuana Business Experience

24. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana business?

Yes  No

25. Other than the applicant, are you currently associated with a marijuana business in any state or country?

Yes  No

26. If you answered "yes" to question 24 or 25, attach a statement setting forth the following information for each marijuana business with which you have been associated:

- The business name;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why; and
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations.

## Section E: Other Relevant Business Experience

27. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

Yes  No

28. If you answered "yes" to question 27, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

## Section F: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

29. State NY	30. Issue Date (month/year): 10 / 77	31. Type: Registered Nursing	32. Number: 299758
	Expiration Date (month/year): 10 / 80		
33. State CT	34. Issue Date (month/year): 11 / 79	35. Type: Registered Nursing	36. Number: 10.R32804
	Expiration Date (month/year): 09 / 96		

APPENDIX C, OFFICER BACKGROUND INFORMATION FORM  
SECTION "D", #26 INFORMATION

26. Prime Wellness of Connecticut, LLC  
75 John Fitch Boulevard  
South Windsor, CT 06074

Position - CEO

Employed from 9.1.2014 to present but associated with the  
Business from its inception in 2013.

Prime Wellness has never been accused of violating any local,  
State or Federal laws or regulations.



APPENDIX B AND C, DISPENSARY FACILITY BACKER INFORMATION FORM  
SECTION "C & E" INFORMATION

**T.J. Nicholas Professional Licenses (Retired)**

1. New York State Registered Nursing License #299758 - Granted 10/21/77.
2. Connecticut Registered Nursing License # - 10.R32604 granted 11/27/79 valid through 9/30/96.

**Other licenses**

State of Connecticut Driver's license #094170763 expires 9-21-2015.

APPENDIX B AND C, DISPENSARY FACILITY BACKER INFORMATION FORM  
SECTION "C & E" INFORMATION

**T.J. Nicholas Ownership in Licensed Dialysis Facilities**

1. Enfield Dialysis Center, Inc. (lic. # 0157) – 148 Hazard Avenue, Enfield, CT. Certified on 2/28/90 and sold to BMA of CT (FMC) effective 1-1-98 (lic. # 0247).
  2. East Hartford Dialysis Center, Inc. (lic. # 0210) – 200 Pitkin Street, East Hartford, CT. Certified on 2/4/94 and sold to BMA of CT (FMC) effective 1-1-98 (lic.# 0248).
  3. Central Connecticut Dialysis Center, Inc. (lic. # 0207) - 377 Research Parkway, Meriden, CT. Certified on 1/13/94 and sold to BMA of CT (FMC) effective 1-1-98 (lic. # 0246).
  4. Rocky Hill Dialysis Center, LLC. (lic. # 0259) – 30 Waterchase Drive, Rocky Hill, CT. Certified on 12/15/99 and sold to DaVita effective 9-1-01(lic. # 0270).
  5. Middlesex Dialysis Center, LLC. (lic. # 0269) – 100 Main St., Suite A, Middletown, CT. Certified on 11/15/2000 and sold to DaVita effective 9-1-01 (lic.# 0316).
- (I was the "Agent of Service" for the above companies)
6. Pioneer Valley Dialysis Center – 208 Ashley Avenue, W. Springfield, MA. Certified on 11/22/96 and sold to FMC effective 1-1-98.
  7. Yankee Family Dialysis Center – 115 Wildwood Avenue, Greenfield, MA. Certified on 11/21/96 and sold to FMC effective 1-1-98.
  8. Manadnock Dialysis Center – 428B Winchester Avenue, Keene, NH. Certified on 5/21/97 and sold to FMC effective 1-1-98.
  9. Central Suffolk AKC, dba Dialysis Pro Re Nata (op. cert. # 5151204R) – 5225 Nesconset Highway, Port Jefferson Station, NY. Certified on 1/18/82, joined as an owner in 1990, sold to FMC in 2006.
  10. South Shore Dialysis (op. cert. # 2906202R) – 615 Peninsula Blvd. Hempstead, NY. Certified on 1/21/84, joined as owner in 1999, sold to DaVita in 2001.  
- 250 Pettit Avenue, Bellmore, NY. Certified on 1/21/84.
  11. Eastview Dialysis Inc. (op. cert. # 3464201R) – 120 Victor Heights Parkway, Victor, NY. Certified on August 17, 1998. Sold to FMC 2011. I was agent of service for EDI.

## Thomas J. Nicholas

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379 Quarry Brook Drive  
South Windsor, CT 06074  
860.644.9440 - 860.558.4935  
t.j.nicholas@att.net

### Education

Diploma in Professional Registered Nursing  
Ellis Hospital School of Nursing  
Schenectady, New York  
Graduated with Honors, 1977

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### Professional Profile

#### Prime Wellness of Connecticut, LLC 2013 to Present

- CEO for PWCT which was licensed as a Medical Marijuana Dispensary Facility by CT DCP on 4.10.14. One of only six licenses granted in Connecticut. The first Medical marijuana Dispensary in CT history to pass opening inspection by the department of drug control on 8.8.14 and the only one to do so in the 120 day period as required by regulation.
- PWCT employs 5 full time and 5 part employees ranging from Pharmacists to security officers and is open six days per week to serve the needs of patients.

#### Sustainable Products, Inc. 2003-2014

- Sustainable Products was an Industrial Products Sales, Marketing and Distribution Company.
- Represented a Connecticut company's environmentally friendly product line of industrial lubricants and machining fluids to the machining and fabricating industry in the northeast.
- Represented a Capital Equipment Manufacturer in the machined parts finishing area.

#### Eastview Dialysis Center, Inc. 1997 – 2011

#### Eastview Dialysis Properties, Inc. 1997 - 2013

- President and CEO of an out-patient dialysis facility operating business and properties management business both located at 120 Victor Heights Parkway, Victor, NY. 14564. I was a founding shareholder and participated as CEO in the day to day management of both companies.
- Eastview Dialysis Center provided out-patient dialysis treatments to @120 chronic renal failure patients and was licensed in all treatment modalities. The operations were carried out in an 8,600 sq. ft. building built expressly to serve the needs of the dialysis patients.
- The operating company was responsible for all operations and billing in excess of \$3M to Medicare and Medicaid for patient services on an annual basis. My involvement in Eastview Dialysis Inc. terminated when the company was sold to Fresenius Medical Care in 2011. I'm currently the President and CEO of Eastview Dialysis Properties, Inc. (EDPI). EDPI building and property located at 120 Victor Heights Parkway, Victor, NY was sold in November, 2013.

#### Prime Medical, Inc. 1990 - 1997

- As co-founder and fifty percent owner, operated a successful and well respected medical products sales and distribution company concentrating on dialysis products.
- Developed a medical water purification company called Prime Water. Prime Water engineered, designed, installed and serviced medical grade water purification systems for dialysis units and medical facilities in the eastern United States.

## Thomas J. Nicholas

- My involvement in Prime Medical, Inc. terminated when the company was sold to Fresenius Medical Care in 1997.

### Connecticut Based Dialysis Facilities – 1991 - 2001

- As President and CEO of five Connecticut based dialysis facilities (Enfield Dialysis, East Hartford Dialysis, Central CT Dialysis, Rocky Hill Dialysis and Middlesex Dialysis), I was responsible for operations and day to day management. Our facilities treated in excess of 450 patients on a three time per week basis. Each facility billed between two and four million dollars in annual patient services to Medicare under the ESRD program, Medicaid and private insurers on an annual basis
- Partner and board member in Connecticut businesses as well as ESRD facilities and related businesses in Massachusetts, New Hampshire and New York (12 total). Please see attached facilities list with specifics.
- **NO LICENSED MEDICAL FACILITY OR ANY BUSINESS WHERE I HAD CONTROL HAS EVER BEEN ALLEGED OR FOUND TO HAVE VIOLATED ANY FEDERAL, STATE OR LOCAL LAWS OR REGULATIONS DURING THE TIME PERIOD WHEN I WAS ASSOCIATED.**

### National Medical Care, Inc. – 1981 – 1990

- Northeast Area Manager responsible for sales and marketing of manufactured dialysis disposable products and systems to dialysis facilities in New York, New Jersey and New England.
- National Dialysis Sales Specialist Salesman of the year twice and Regional Salesman of the year four times.

### Professional Nursing

- Worked as an R.N./Orthopedic technician and Operating Room assistant in an Orthopedic Practice (Paulsen and Albano, PC) in Schenectady, N.Y. in 1977.
- Worked as an Operating Room Nurse at the Hermann Hospital in Houston, Texas in 1978-1979.
- Worked as an Operating Room Nurse at Hartford Hospital in Hartford, CT in 1980.

### Professional Skills and Business Accomplishments

My medical training and background has allowed me to be very successful during my adult working life. Moreover, the fact that I was trained as a Registered Nurse and have worked in both hospital and private medical businesses has given me a real appreciation and understanding of how to access and attend to the needs of clients and patients alike. We formed a number of dialysis operating businesses with physicians as partners (being mindful of Stark and safe harbors laws).

As President and CEO of six individual dialysis companies in two states, I participated in all aspects of the business from formation to site location and development to regulatory application and day to day operation. I was agent of service for all six companies. I was personally vetted by both state health departments in the states where we operated and the federal government as a billing agency to Medicare and Medicaid.



# Medical Marijuana Program

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## Section G: Legal Proceedings

37. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

38. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

39. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

40. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section H: Criminal Actions

41. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section I: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

42. Signature:



*James J. Mitchell*

43. Date Signed:

9.8.2015



# Medical Marijuana Program

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I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

44. Signature:



*Shawn J. Nichols*

45. Date Signed:

9.8.2015



# Medical Marijuana Program

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## Appendix C Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section J.

### Section A: Personal Information

1. Name (First, Middle, Last): Kevin P Murphy		
2. Street Address (including Apartment or Suite #): 70 Island Avenue		
3. City: Madison	4. State: CT	5. Zip Code: 06443
6. Title: owner	7. Telephone Number: (917) 664-2913	8. E-mail Address: kpmurphy50@gmail.com
[Redacted]		9. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female

### Section B: Employment Information

12. Current or Most Recent Employer: Murphy Capital, LLC		13. Date of Employment: Start Date: 01 / 01 / 2013 End Date: : / /	
14. Employer Address (including Apartment or Suite #): 70 Island Avenue			
15. City: Madison		16. State: CT	17. Zip Code: 06443
18. Telephone Number: (917) 664-2913	19. Fax Number:	20. E-mail Address: kpmurphy50@gmail.com	

### Section C: Pharmacy Business Experience

21. Do you have any experience controlling, managing, operating or working for a pharmacy?  
 Yes  No

22. Are you currently associated with a pharmacy in any state?  
 Yes  No

23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information:

- The pharmacy name;
- The pharmacy's location;
- All titles and responsibilities held by you at the pharmacy, including the time frame for each;
- The dates of your association with the pharmacy;
- Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and
- Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, how those allegations were resolved.



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## Section D: Marijuana Business Experience

24. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana business?

Yes  No

25. Other than the applicant, are you currently associated with a marijuana business in any state or country?

Yes  No

26. If you answered "yes" to question 24 or 25, attach a statement setting forth the following information for each marijuana business with which you have been associated:

- The business name;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why; and
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations.

## Section E: Other Relevant Business Experience

27. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

Yes  No

28. If you answered "yes" to question 27, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

## Section F: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

29. State NY, CT	30. Issue Date (month/year): 07 / 87	31. Type: Series 7, 63	32. Number: 1680861
33. State	34. Issue Date (month/year): /	35. Type:	36. Number:
	Expiration Date (month/year): /		



**Kevin P. Murphy**  
 322 West 57th Street, Apt. 48H  
 New York, NY 10019  
 PH: 917.664.2913

**Professional Summary: Hedge Fund Marketing Expert**

Kevin Murphy is currently Managing Member of Murphy Capital, LLC. Prior to Murphy Capital, he was a Founding Member and Managing Partner of Tandem Global Partners, LLC. Kevin, along with Joseph Petri and other seasoned professionals started the firm in 2007. These entrepreneurs and their vision formed the foundation of Tandem Global Partners and were primary drivers behind its success. Prior to launching Tandem Global Partners, Kevin was a Managing Partner at Stanfield Capital Partners. While at Stanfield, he was instrumental in growing the company from inception to a \$30 billion alternative money management firm. He was a member of the Operating and Management team that oversaw all aspects of Stanfield's business, which included risk management, sales and distribution, client services, legal, compliance and operations. Kevin was integral in spearheading the strategic development of the firm and responsible for attracting key personnel and money management talent.

**Professional History**

- 2012 - Current **High Street Capital Partners, LLC**  
 Managing Member. Engaged in nurturing a variety of legal cannabis companies through their start-up phases, including fiscal analysis, capital investment and financial growth strategies and assessments critical to their success.
- 2012 - Current **Murphy Capital, LLC**  
 Managing Member. Engaged in the investment management of private and public companies for the benefit of family and philanthropic interests.
- 2007-2012 **Tandem Global Partners, Managing Partner**  
 Responsibilities Included: Managing all aspects of the business including distribution, strategic development, structural and risk oversight.
- 1999-2006 **Stanfield Capital Partners, Managing Partner**  
 Responsibilities Included: Managing all aspects of the business including distribution, strategic development, structural and risk oversight.
- 1996-1999 **Gleacher NatWest, Partner**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1994-1996 **Schroders, Senior Vice President**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1992-1994 **Lazard Freres, Vice President**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1988-1991 **Cantor Fitzgerald, Vice President**  
 Responsibilities Included: Brokering mortgage-backed securities.

**Kevin P. Murphy**  
322 West 57th Street, Apt. 48H  
New York, NY 10019  
PH: 917.664.2913

**Education**

1985      **The College of the Holy Cross**  
Received a Bachelor of Arts Degree

**Other**

**St. Benedict Joseph Medical Center in Honduras**  
Member of Board of Director

**Business References**

**Joe Petri**  
Former CEO of HSBC Americas  
New York, NY  
973-722-1695

**Mike Vranos**  
CEO Ellington Management Group  
Old Greenwich, CT  
203-698-2422

**Personal Reference**

**Richard Johnson**  
Former Managing Director, Strategic Business Development  
Stanfield Capital  
New York, NY  
203-543-2109

**Kevin P. Murphy**

Mr. Murphy is the Managing Member of Murphy Capital, LLC. Murphy Capital is engaged in the investment management of private and public companies for the benefit of his family and his philanthropic interests.

Mr. Murphy has had a highly successful career in the New York money management business and is a well-respected member of the financial community amongst his peers. He is a consummate professional and has been instrumental in growing companies from inception to billion dollar money management firms. Kevin was a Managing Partner of Tandem Global Partners, a boutique investment firm focused on the emerging markets. Prior to Tandem, Kevin was a Managing Partner at Stanfield Capital Partners.

Mr. Murphy was central to growing Stanfield from inception to a \$30 billion alternative money management firm. He was a member of the Operating and Management team that oversaw all aspects of Stanfield's business, which included risk management, sales and distribution, client services, legal, compliance and operations. He was integral in spearheading the strategic development of the firm and responsible for attracting key personnel and money management talent. He was involved in developing and administering the firm-wide investment policy; constructing asset allocation strategies; conducting research on a broad range of investment vehicles for portfolio investments; monitoring and reporting portfolio performance to ensure that client objectives were met; implemented trades; conducted periodic client review meetings; and maintained strategic relationships with trustees, vendors, and asset custodians. Kevin also previously acquired in-depth valuable career experience with Gleacher NatWest (Partner and Dir. of Marketing), Schroders (Sr. VP of Sales), Lazard Freres (VP) and Cantor Fitzgerald (VP). He graduated with a B.A. from Holy Cross College.

**Mr. Murphy founded Murphy Capital in 2012, a Family Office where he pursues his strong commitment to his profession as well as to his faith, family and community ties.** Kevin has worked closely with the local Franciscan Friars in the Bronx, which has led to his supporting and serving on the Board for the St. Benedict Joseph Medical Center in Honduras. Kevin is a generous supporter of a wide range of charities and mentors many individuals helping launch and achieve their aspiring career goals.

**Mr. Murphy founded High Street Capital Partners in 2012.** He successfully applies this multifaceted background in the investment management, venture capital and non-profit medical industries to this more recent role as a well recognized leader within the emerging Medical Marijuana Industry. Specifically, as a seasoned Wall Street executive with significant investment, risk management and business acumen; over the last 5 years Kevin has nurtured a variety of cannabis companies through their start-up phases. His expertise in business management and unique set of skills in terms of fiscal analysis, capital investment and financial growth strategies and assessment is critical to their success. The result is a robust high quality stable of long term investments now thriving across the spectrum of the rapidly growing Cannabis Industry. As such, Kevin possesses a broad understanding of the medical marijuana space that few have yet to attain. Not the least of which is his close knowledge and experience operating dispensaries within the strict regulatory environment found here in New England.

Mr. Murphy's leadership in the Cannabis Industry specifically includes his roles as a Founding Member, Board Member and Lead Financier of the for-profit WPMC of Maine, which oversees the non-profit Wellness Connection of Maine group of dispensaries and grow operations; Chief Financial Officer, Founding Member, Board Member and Financier of Prime Wellness of Connecticut dispensary operation; a Lead Financier of The Cannabliss group of dispensaries in Portland, OR; a Board Member and Lead Financier of Dixie Elixirs & Edibles in Denver, CO and Founding Member, Principal and Financier of Kalyx Development Corporation, a Real Estate finance group specializing in the Marijuana industry. In total, Mr. Murphy possesses highly specialized skill sets and is a valuable and experienced additional industry resource to successfully assist states initially navigating this promising medical field.

Section D, 26.

Prime Wellness of CT  
75 John Fitch Blvd.  
South Windsor, CT 06074

I am a backer of the facility with an ownership interest in the business. I am the CFO of the business and have been since inception.

Prime has been in operation since April 5, 2014.

The business has not violated the laws or the regulations of the state.

Nature's Care Company of IL  
975 Rohlwing Road  
Rolling Meadows, IL 60008

I am a backer of the facility with an ownership interest in the business.

I have been associated with the business since it's inception, summer of 2014.

I have no working responsibilities with the company.

The company has not had a violation.

Cannabliss & Co.  
1917 SE 7<sup>th</sup> Ave.  
Portland, OR 97214

I am a backer of the business with an ownership interest in the business.

I have been involved with the company since December 1, 2014.

I have no working responsibilities with the company.

The company has been in compliance since my involvement in the company.

Section E, 27.

I am the Managing Member of Murphy Capital, LLC. Murphy Capital makes private investments in small to mid sized companies. Murphy Capital's goal is to partner with entrepreneurs and help support them to becoming successful. I have had extensive experience in evaluating, financing and selling companies for more than 25 years.

I have been the managing Member of Murphy Capital since January 1, 2013. Our office is located at 70 Island Ave., Madison, CT 06443.

Murphy Capital and I have never had a violation. My skills as an investor, risk taker and business builder will play a critical role in the success of our company.



# Medical Marijuana Program

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## Section G: Legal Proceedings

37. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

38. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

39. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

40. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section H: Criminal Actions

41. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section I: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

42. Signature:

43. Date Signed:

9-10-15



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I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

44. Signature:

45. Date Signed:

9-10-15



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## Appendix C

### Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section J.

Section A: Personal Information			
1. Name (First, Middle, Last): John P. Glowik Jr.			
2. Street Address (including Apartment or Suite #): 44 Independence Lane			
3. City: Shrewsbury		4. State: MA	5. Zip Code: 01545
6. Title: Owner, Facility Backer		7. Telephone Number: (508) 925-5676	8. E-mail Address: jg1973hc@aol.com
[Redacted]			11. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female

Section B: Employment Information			
12. Current or Most Recent Employer: Prime Alternative Treatment Centers		13. Date of Employment: Start Date: 08 / 03 / 15 End Date: : / /	
14. Employer Address (including Apartment or Suite #): 44 Independence Lane			
15. City: Shrewsbury		16. State: MA	17. Zip Code: 01545
18. Telephone Number: (508) 925-5676		19. Fax Number: (508) 925-5676	20. E-mail Address: jg1973hc@aol.com

Section C: Pharmacy Business Experience
21. Do you have any experience controlling, managing, operating or working for a pharmacy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22. Are you currently associated with a pharmacy in any state? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information: <ul style="list-style-type: none"> <li>• The pharmacy name;</li> <li>• The pharmacy's location;</li> <li>• All titles and responsibilities held by you at the pharmacy, including the time frame for each;</li> <li>• The dates of your association with the pharmacy;</li> <li>• Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and</li> <li>• Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, how those allegations were resolved.</li> </ul>





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## Section D: Marijuana Business Experience

24. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana business?

Yes  No

25. Other than the applicant, are you currently associated with a marijuana business in any state or country?

Yes  No

26. If you answered "yes" to question 24 or 25, attach a statement setting forth the following information for each marijuana business with which you have been associated:

- The business name;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why; and
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations.

## Section E: Other Relevant Business Experience

27. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

Yes  No

28. If you answered "yes" to question 27, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

## Section F: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

29. State	30. Issue Date (month/year):	09 / 14	31. Type:	32. Number:
CT	Expiration Date (month/year):	09 / 15	MMDB	.0000007
33. State	34. Issue Date (month/year):	09 / 15	35. Type:	36. Number:
CT	Expiration Date (month/year):	09 / 16	MMDB	.0000007

**APPENDIX C Section D: Marijuana Business Experience**

**Prime Alternative Treatment Centers of NH**

**Merrimack, NH Dispensary & Peterborough, NH Cultivation Facility**

**July 2014 began application process for NH medical marijuana program as Chief Executive Officer and currently CEO/President of Prime ATC.**

**There have been no violations of laws or regulations in the state of New Hampshire since inception to present.**

**APPENDIX C Section E: Other Relevant Business Experience**

Pioneer Valley Dialysis Center, Yankee Family Dialysis Center & Monadnock Dialysis Center serving Springfield (MA), Greenfield (MA) & Keene (NH) respectively.

Medical treatment centers for hemodialysis and peritoneal dialysis services to the patients directly under the supervision of physician and nursing personnel.

Chief Executive Officer overseeing all three facilities in all phases of operations from 1995 – 1998. The businesses were sold to Fresenius USA along with eleven other dialysis units which were associated with the three above.

No violations were involved in the dialysis facilities with the state or federal agencies overseeing the health care provided.

I served on all fourteen boards and three other medical supply companies from 1988 to 2012 gaining necessary experience in capitalizing and budgeting properly for business success. But most importantly gained the needed experience in providing for the patient and their needs in a professional, safe manner. We served thousands of patients in a moral and ethical style with the highest care available. Our success was seeing satisfied, well treated patients pass thru our facility doors.

We are currently enjoying that same success at Prime Wellness of Connecticut in South Windsor, CT. since September of 2015. The proof is in our actions to the patients of Connecticut currently. We have a proven track record and wish to bring our services to other parts of the state.

APPENDIX C Section F: Licenses, Permits and Registrations

J.P. Glowik Jr.'s Ownership in Licensed Dialysis Facilities

1. Enfield Dialysis Center, Inc. (lic.# 0157) – 148 Hazard Avenue, Enfield, CT. Certified on 2/28/90 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0247).
2. East Hartford Dialysis Center, Inc. (lic. # 0210) – 200 Pitkin Street, East Hartford, CT. Certified on 2/4/94 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0248).
3. Central Connecticut Dialysis Center, Inc. (lic. # 0207) - 377 Research Parkway, Meriden, CT. Certified on 1/13/94 and sold to BMA of CT (FMC) effective 1/1/98 (lic. # 0246).
4. Rocky Hill Dialysis Center, LLC. (lic. # 0259) – 30 Waterchase Drive, Rocky Hill, CT. Certified on 12/15/99 and sold to DaVita effective 9/1/01 (lic. # 0270).
5. Middlesex Dialysis Center, LLC. (lic. # 0269) – 100 Main St., Suite A, Middletown, CT. Certified on 11/15/2000 and sold to DaVita effective 9/1/01 (lic. # 0316).
6. Pioneer Valley Dialysis Center – 208 Ashley Avenue, W. Springfield, MA. Certified on 11/27/96 and sold to FMC effective 1/1/98.
7. Yankee Family Dialysis Center – 115 Wildwood Avenue, Greenfield, MA. Certified on 12/10/96 and sold to FMC effective 1/1/98.
8. Monadnock Dialysis Center – 428B Winchester Avenue, Keene, NH. Certified on 5/21/97 and sold to FMC effective 1/1/98.
9. Central Suffolk AKC, dba Dialysis Pro Re Nata (op.cert. # 5151204R) – 5225 Nesconset Highway, Port Jefferson Station, NY. Certified on 1/18/82, joined as an owner in 1990, sold to FMC in 2006.
10. South Shore Dialysis (op.cert. # 2906202R) – 615 Peninsula Blvd. Hempstead, NY. Certified on 1/21/84, joined as owner in 1999, sold to DaVita in 2001.  
- 250 Pettit Avenue, Bellmore, NY. Certified on 1/21/84.
11. Eastview Dialysis Inc. (op.cert. # 3464201R) – 120 Victor Heights Parkway, Victor, NY. Certified on August 17, 1998. Sold to FMC 2011.

12. Capital District Dialysis Center – 650 McClellan Street, Schenectady, NY. Certified on 9/30/88, joined as owner in 1990, sold to FMC in 2006.

13. Albany Dialysis Center - 64 Albany Shaker Road, Albany, NY. Certified on 6/30/83, joined as owner in 1991 and sold to FMC in 2006.

14. Albany Regional Kidney Center – 2 Clara Barton Drive, Albany, NY. Certified on 6/30/83, joined as owner in 1993, sold to FMC in 2006.

15. Amsterdam Dialysis Center – 1810 Riverfront Center, Amsterdam, NY. Certified on 8/14/98 and sold to FMC in 2006.

\* I was “Agent of Service” on facilities # 6, 7 and 8 above.

**JOHN P. GLOWIK, Jr.**  
 44 Independence Lane  
 Shrewsbury, MA 01545  
 jg1973hc@aol.com  
 508-925-5676

**EMPLOYMENT HISTORY**

**Prime Alternative Treatment Center of New Hampshire** **2014-Present**  
**CEO & President**  
**1<sup>st</sup> approved alternative treatment center in New Hampshire – dispensary & cultivation facility**

**Prime Wellness of Connecticut** **2013-Present**  
**Co-Owner & Facility Backer**  
**CT based medicinal cannabis dispensary. 1<sup>st</sup> approved dispensary in the state of Connecticut.**

**Local, experienced health care provider, owner and operator of dialysis outpatient centers in MA (Springfield & Greenfield), NH (Keene), CT (Hartford, Enfield, Middletown, Rocky Hill), NY (Albany-2, Amsterdam, Schenectady, Selden, Bellmore, Hempstead, Rochester)**

**Thirty-nine years of health care experience (1973-2012)**

**Reviewed and approved by Department of Health in 4 states to own or operate with Certificate of Need/Determination of Need certificates - MA, CT, NH, NY Fully accredited and no citations with inspections from the Departments of Health in the 4 states.**

**Owned and Operated 16 Dialysis facilities based in MA (Springfield & Greenfield), NH (Keene), CT (Hartford, Enfield, Middletown, Rocky Hill), NY (Albany-2, Amsterdam, Schenectady, Selden, Bellmore, Hempstead, Rochester)**  
**1989-2012**

**Prime Medical Inc.** **1988 -1997**  
**President & Co-Founder/Owner**  
**MA based medical supply company covered New England, New York, New Jersey**

**Prime Water** **1992-1997**  
**Co-Founder/Owner**  
**MA based water purification/delivery systems for medical facilities**

**NutraCare Inc.** **1990-1994**  
**Co-Founder/Owner, Vice President**  
**GA based parental nutrition company serving patients in dialysis centers and at home.**

**Sales Specialist/Regional Manager** **1973-1988**  
**Pharmaceutical & Medical sales to hospitals, physicians, outpatient medical facilities in the greater Northeast states**

**BOARDS AND CIVIC ENGAGEMENT**

Served on numerous community boards; Worcester Academy, Worcester MA Board of Trustees (3 terms), Holy Cross GAA Board, Holy Cross College Advisory Board to the Trustees since 2007, Worcester, MA, Paxton Recreation Commission Chairman, Paxton, MA, Paxton Youth Sports, President, Paxton Little League, Treasurer, Sacred Heart Basketball League Board, Worcester, MA.

**EDUCATION**

Holy Cross College, Worcester MA  
B.A. Economics & History (Double Major)

1969 - 1973



# Medical Marijuana Program

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## Section G: Legal Proceedings

37. Have you, or has any entity over which you exercised management or control, had any petition filed by or against you, or otherwise sought relief under, any provision of the Federal Bankruptcy Act or under any State insolvency law in the last ten year period?

Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

38. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

39. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

40. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section H: Criminal Actions

41. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section I: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

42. Signature:



*John P. Glawich Jr.*

43. Date Signed:

9/08/2015





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I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

44. Signature:

*John P. Glawich Jr.*

45. Date Signed:

9/08/2015



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## Appendix C

### Directors, Owners, Officers or Other High-Level Employees Background Information Form

To be completed by all persons identified in your response to Appendix A, section J.

#### Section A: Personal Information

1. Name (First, Middle, Last): David Paume		
2. Street Address (including Apartment or Suite #): 8 Wedgewood Drive		
3. City: Danbury	4. State: CT	5. Zip Code: 06811
6. Title: Dispensary Manager	7. Telephone Number: (203) 790-1505	8. E-mail Address: dpaume@comcast.net
[Redacted]		11. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female

#### Section B: Employment Information

12. Current or Most Recent Employer: Boehringer Ingelheim		13. Date of Employment: Start Date: 08 /01 /199 End Date: / /	
14. Employer Address (including Apartment or Suite #): 900 Ridgebury Rd			
15. City: Ridgefield		16. State: CT	17. Zip Code: 06877
18. Telephone Number: (203) 798-5588	19. Fax Number:	20. E-mail Address: david.pauma@boehringer-ingelheim.com	

#### Section C: Pharmacy Business Experience

21. Do you have any experience controlling, managing, operating or working for a pharmacy?  
 Yes  No

22. Are you currently associated with a pharmacy in any state?  
 Yes  No

23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information:

- The pharmacy name;
- The pharmacy's location;
- All titles and responsibilities held by you at the pharmacy, including the time frame for each;
- The dates of your association with the pharmacy;
- Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and
- Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, how those allegations were resolved.



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## Section D: Marijuana Business Experience

24. Other than the applicant, do you have any experience controlling, managing, operating or working for a marijuana business?

Yes  No

25. Other than the applicant, are you currently associated with a marijuana business in any state or country?

Yes  No

26. If you answered "yes" to question 24 or 25, attach a statement setting forth the following information for each marijuana business with which you have been associated:

- The business name;
- The business location;
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## Section E: Other Relevant Business Experience

27. Do you have any experience controlling, managing, operating or working for any other business that you believe may be relevant to the department's evaluation of the applicant with whom you are associated?

Yes  No

28. If you answered "yes" to question 27, attach a statement setting forth the following information for each such business with which you have been associated:

- The business name;
- Products or services offered;
- The business location;
- All titles and responsibilities held by you at the business, including the time frame for each;
- The dates of your association with the business;
- Whether you currently have a role at the business and, if not, when your involvement terminated and why;
- Whether the business was ever alleged to have violated the laws or regulations of the state or country in which it operates during the time period when you were associated with the business and, if so, the nature and resolution of those allegations; and
- How this experience is relevant to the department's evaluation of the RFA response of the applicant with whom you are associated.

## Section F: Licenses, Permits and Registrations

Provide information regarding all state licenses, permits or registrations ever held, current or expired, by you. Attach additional pages if necessary.

29. State	30. Issue Date (month/year):	02 / 2011	31. Type:	32. Number:
CT	Expiration Date (month/year):	01 / 2011	Pharmacist	PCT.0007729
33. State	34. Issue Date (month/year):	10 / 2011	35. Type:	36. Number:
CT	Expiration Date (month/year):	10 / 2011	Dispensary Manager	MMDR.0000018



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## Section G: Legal Proceedings

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Yes  No

If the answer above is "yes", attach a statement providing the details of such proceeding or petition.

38. Have you, or has any entity over which you exercised management or control, ever had a professional license, permit or registration in Connecticut, or any other State, suspended, revoked or otherwise subjected to disciplinary action?

Yes  No

If the answer above is "yes", attach a statement providing the date(s), the type of license, permit or registration at issue, and a description of the circumstances relating to each suspension, revocation or other disciplinary action.

39. Are you a party to any legal proceedings where damages, fines or civil penalties may reasonably be expected to exceed \$500,000 above any insurance coverage available to cover the claim?

Yes  No

If the answer above is "yes", attach a statement describing the litigation, including the title and docket number of the litigation, the name and location of the court before which it is pending, the identify of all parties to the litigation, the general nature of the claims being made and the impact an unfavorable opinion may have on the applicant or the applicant's operations.

40. Have you, or has any entity over which you exercised management or control, ever had any fines or other penalties over \$10,000 assessed by any regulatory agency?

Yes  No

If the answer above is "yes", attach a statement providing the details of such fines or penalties.

## Section H: Criminal Actions

41. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section I: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

42. Signature:

43. Date Signed:

09-16-2015



# Medical Marijuana Program



165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

44. Signature:



*Harold Paumé*

45. Date Signed:

*09-16-2015*



# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

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## Appendix D

### Dispensary Facility Manager Information Form

This form must be completed and signed by the person who will serve as the dispensary facility manager if the applicant is awarded a dispensary facility license.

#### Section A: Dispensary Facility Manager Information

1. Name (First, Middle, Last): David Paume			
2. Home Address (including Apartment or Suite #): 8 Wedgewood Drive			3. City: Danbury
4. State: CT	5. Zip Code: 06811	6. Date of Birth: 03 / 23 / 1958	7. Telephone Number: (203) 790-1505
[Redacted]			9. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
10. E-mail Address: dpaume@comcast.net		11. Connecticut Pharmacist License Number: 0007729	

#### Section B: Employment Information

12. Current or Most Recent Employer: Boehringer Ingelheim Pharmaceuticals Inc.		13. Date of Employment: Start Date: 08 01 / 1991 End Date: / /	
14. Employer Address (including Apartment or Suite #): 900 Ridgebury Rd			
15. City: Ridgefield		16. State: CT	17. Zip Code: 06877
18. Daytime Telephone Number: (203) 799-5588	19. Fax Number:	20. E-mail Address:	

#### Section C: Pharmacy Business Experience

21. Do you have any experience controlling, managing, operating or working for a pharmacy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22. Are you currently associated with a pharmacy in any state? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
23. If you answered "yes" to question 21 or 22, attach a statement setting forth, for each pharmacy with which you have been associated, the following information: <ul style="list-style-type: none"> <li>• The pharmacy name;</li> <li>• The pharmacy's location;</li> <li>• All titles and responsibilities held by you at the pharmacy, including the time frame for each;</li> <li>• The dates of your association with the pharmacy;</li> <li>• Whether you currently have a role at the pharmacy and, if not, when your involvement terminated and why; and</li> <li>• Whether the pharmacy was ever alleged to have violated the laws or regulations of the state in which it operates during the time period when you were associated with the pharmacy and, if so, the nature and resolution of those allegations.</li> </ul>



# Medical Marijuana Program

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## Section D: Criminal Actions

24. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

## Section E: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

25. Signature:

*David Pume*

26. Date Signed:

*9-15-2015*

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

27. Signature:

*David Pume*

28. Date Signed:

*09-15-2015*



# Medical Marijuana Program



165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066  
E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)

## Appendix E Backer Members

### Authorization for Release of Personal History Form

This form must be completed and signed by any member of a Backer that is not required to complete Appendix C.

#### Section A: Member Information

1. Name (First, Middle, Last): Angela D'Amico			
2. Street Address (including Apartment or Suite #): 55 Brittany Ave			
3. City: Trumbull		4. State: CT	5. Zip Code: 06611
6. Daytime Phone Number: 2033628461	7. Fax Number:	8. E-mail Address: angela@ad-lines.com	

#### Section B: Criminal Actions

9. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

#### Section C: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

10. Signature: 	11. Date Signed: 9.12.15
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I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

12. Signature: 	13. Date Signed: 9.12.15
--------------------	-----------------------------





# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

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## Appendix E Backer Members

### Authorization for Release of Personal History Form

This form must be completed and signed by any member of a Backer that is not required to complete Appendix C.

Section A: Member Information			
1. Name (First, Middle, Last): Thomas Joseph Nicholas			
2. Street Address (including Apartment or Suite #): 379 Quarry Brook Drive			
3. City: South Windsor		4. State: CT	5. Zip Code: 06074
6. Daytime Phone Number: (860) 558-4935	7. Fax Number: (860) 644-9440	8. E-mail Address: t.j.nicholas@att.net	

Section B: Criminal Actions
9. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

Section C: Criminal Background Check	
I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.	
10. Signature: 	11. Date Signed: 9.8.2015

I hereby certify that the above information is correct and complete.	
I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.	
12. Signature: 	13. Date Signed: 9.8.2015



# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)



## Appendix E Backer Members

### Authorization for Release of Personal History Form

This form must be completed and signed by any member of a Backer that is not required to complete Appendix C.

#### Section A: Member Information

1. Name (First, Middle, Last): John P. Glowik Jr.			
2. Street Address (including Apartment or Suite #): 44 Independence Lane			
3. City: Shrewsbury		4. State: MA	5. Zip Code: 01545
6. Daytime Phone Number: (508) 925-5676	7. Fax Number: (508) 925-5676	8. E-mail Address: jg1973hc@aol.com	

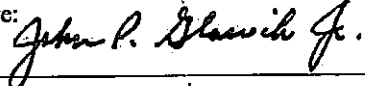
#### Section B: Criminal Actions

9. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?  Yes  No

If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.


#### Section C: Criminal Background Check

I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.

10. Signature: 	11. Date Signed: 9/08/2015
--	-------------------------------

I hereby certify that the above information is correct and complete.

I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157b of the Connecticut General Statutes.

12. Signature: 	13. Date Signed: 9/08/2015
--	-------------------------------



# Medical Marijuana Program

165 Capitol Avenue, Room 145, Hartford, CT 06106-1630 • (860) 713-6066

E-mail: [dcp.mmp@ct.gov](mailto:dcp.mmp@ct.gov) • Website: [www.ct.gov/dcp/mmp](http://www.ct.gov/dcp/mmp)



## Appendix E

### Backer Members

### Authorization for Release of Personal History Form

This form must be completed and signed by any member of a Backer that is not required to complete Appendix C.

Section A: Member Information			
1. Name (First, Middle, Last): Kevin P Murphy			
2. Street Address (including Apartment or Suite #): 70 Island Avenue			
3. City: Madison		4. State: CT	5. Zip Code: 06443
6. Daytime Phone Number: (917) 664-2913	7. Fax Number:	8. E-mail Address: kpmurphy50@gmail.com	

Section B: Criminal Actions
9. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If the answer above is "yes", attach a statement providing the date(s) of conviction(s), name of individual(s) involved, the court(s) where the case(s) were decided, a description of the circumstances relating to each offense or for the pending charges and the outcome of the proceedings.

Section C: Criminal Background Check	
I understand that the department may review criminal background records for purposes of evaluating my suitability to participate in the medical marijuana program. I hereby authorize the release of any and all information of a confidential or privileged nature to the department and its agents.	
10. Signature: 	11. Date Signed: 9-10-15

I hereby certify that the above information is correct and complete.	
I fully understand that if I knowingly make a statement that is untrue and which is intended to mislead the Department of Consumer Protection or any person designated by the Department in the performance of their official function, I will be in violation of Section 53a-157h of the Connecticut General Statutes.	
12. Signature: 	13. Date Signed: 9-10-15



**Section A - Number 2: Provide a brief summary of the applicant's qualifications, experience, and industry knowledge relevant to the development and operation of a dispensary facility.**

**Response to Section A - Number 2:**

**Overview of Experiences in Running a Business of Similar Size and Scope.**

Releaf Recovery has carefully assembled a team of directors, principal officers and day-to-day managers well recognized for having significant experience in successfully running complex organizations and other businesses of similar size and scope. These professionals bring to Releaf Recovery a deep, relevant and diverse set of talents particularly well-suited to what will be critical for the managerial, operational, financial and public image success as reflected in their current, compliant, Patient-care focused Cannabis dispensary center operations.

Recovery has secured the talents of:

- owners and operators of licensed dispensary centers, as well as out-patient Dialysis facilities in Connecticut, Massachusetts, New Hampshire and New York who have been thoroughly vetted by both State Health Departments and federal agencies for quality of care, adherence to regulations and general character and competency, with patient care delivered by their facilities ranked amongst the highest in the nation as measured by standardized CQI quality indicators. (Thomas Nicholas of South Windsor, CT, and John P. Glowik, Jr. of Shrewsbury, MA);
- a highly successful business and money manager who has been instrumental in growing companies from inception to billion dollar operations, and who has assisted in financing and facilitating Northeast Patients Group d/b/a Wellness Connection of Maine (Kevin Murphy);



- a licensed pharmacist in Connecticut having over two decades worth of experience as a research pharmacist, and exercising responsibilities relating to such that range from inventory control, compliance, and ensuring proper licensure to hiring staff and scheduling (David Paume');
- a Chief Executive Officer with extensive experience in the legal medical cannabis industry, managing a compliant, communally praised dispensary in Connecticut, as well as developing and managing an international publishing and licensing business for over 30 years (Angela D'Amico)
- a Medical Advisory Committee to help the company develop new treatment therapies for the list of covered conditions, initiate medical research into advanced applications of the medicine, as well as provide scientific medical training to our state's medical community through CME qualified medical marijuana educational conferences. They will also provide content for educational training programs to Releaf Recovery employees. Current Distinguished Members include Gilbert Fanciullo, MD, MS (committee chairman) board certified in Anesthesiology, Pain Management and Hospice and Palliative Care; Corey Burchman, MD, board certified in Anesthesiology and Pain Medicine, both currently employed at the Dartmouth-Hitchcock Medical Center, Lebanon, NH; Dave Paume' RPh :registered pharmacist with experience in project management of clinical operations of various therapeutic areas; clinical research experience; research & development experience;

**RELEAF RECOVERY PROFESSIONALS' RELEVANT QUALIFICATIONS AND EXPERIENCES IN RUNNING BUSINESSES**

Releaf Recovery has invaluable education; proprietary techniques, processes and systems; a unique medical marijuana perspective and an understanding of working within a strict regulatory environment unique to the Connecticut marketplace; They possess the invaluable experiences of creating and growing a start-up medical marijuana corporation and business; best practices and standards; know-how with respect to establishing a positive image, becoming a respected, charitable and educational part of the fabric of the local community, and becoming a hub for economic development, patient care and educational outreach to the medical and local community.

**Thomas Nicholas (Board of Directors, Chief Operating Officer and Security Director).**

As President and CEO of six individual dialysis companies in two states, Tom participated in all aspects of the business from formation to site location and development to regulatory application and day to day operations. He has been thoroughly vetted by both State Health Departments and federal agencies for general character and competency, financial and technical ability, quality of patient care and adherence to State of Connecticut, Department of Public Health regulations. A number of dialysis operating businesses were with physicians as partners (being mindful of Stark and safe harbors laws). His experience with the Dialysis facility business in the 1990's will have many similarities to what he will face as the Chief Executive Officer of fledgling start-up company in a very strict regulatory environment.

Tom received his medical training and background as a Registered Nurse having worked in both hospital and private medical businesses. Tom worked as an R.N./Orthopedic technician and Operating Room assistant in an Orthopedic Practice (Paulsen and Albano, PC) in Schenectady, N.Y. in 1977, worked as an Operating Room Nurse at the Hermann Hospital in Houston, Texas in 1978-1979, and worked as an Operating Room Nurse at Hartford Hospital in Hartford, CT in

1980. The fact that he was trained as a Registered Nurse has given him a real appreciation and understanding of how to access and attend to the needs of clients and patients alike.

In summary, Thomas Nicholas has spent a career overseeing, running and otherwise managing medical facilities featuring a significant and diverse number of business disciplines, while working with physicians, and other employees.

**D. Kevin P. Murphy (Board of Directors, Chief Financial Officer).**

Mr. Murphy brings to the Board of Directors and his role of Chief Financial Officer a very strict financial analysis and investment discipline, as well as business ownership and management expertise from his own privately-owned and operated businesses. He is the Managing Member of Murphy Capital, LLC. Murphy Capital is engaged in the investment management of private and public companies for the benefit of his family and his philanthropic interests. He played a key role in assisting in the financing and facilitation of Northeast Patients Group d/b/a Wellness Connection of Maine ("WCM"), a very well respected, licensed and regulated non-profit medical marijuana corporation in Maine (referenced above). Wellness Connection of Maine is currently a burgeoning success in providing much needed care for patients in Maine and in existing as a good corporate citizen, and Kevin desires to bring such positive experience and opportunity to his home state of Connecticut.

**David Paume' RPh (Pharmacist/Dispensary Manager)**

David Paume' is a Registered Pharmacist with experience in Project Management of Clinical Operations of various therapeutic areas (i.e. Respiratory, Cardiovascular, Metabolic, Immunology, Oncology and Neurology), Clinical Research experience, Research & Development, experience in the formulation of solid dosage forms (i.e. tablets and capsules) and Marketing Sales experience. As a Licensed dispensary serving a Connecticut State sanctioned



Cannabis dispensary center, he has been responsible for the following; overseeing operations; ensuring proper licensure and compliance; customer service; training pharmacy technicians; overseeing and performing inventory control; and accurately checking and filling Patient orders. His professional background and experiences will serve him well as he exercises a number of the foregoing responsibilities and/or skills in his position as the Licensed Dispensary / Manager of Releaf Recovery.

**Angela D'Amico (Chief Executive Officer)** has been operating successfully, and in full compliance in the State of Connecticut Medical Marijuana Program where she has become skilled and responsible for overseeing operations and managing personnel. She has acquired intimate knowledge and expertise in all areas of the medical marijuana industry, namely in dispensary operations, and will continue to serve the Patients, citizens, and communities of her beloved State. She has also built and managed an international publishing and licensing firm 'AD-Lines' which serves multinational clientele such as Hobby Lobby, Michaels, and Bed Bath and Beyond.

While our team truly does appreciate the Department's interest in "Diversity of Ownership", it should be acknowledged that the Patients and all collective stakeholders may receive further benefit from a highly organized, proven successful team which possesses the truest characteristics of altruism, Patient oriented care, and improvement of healthcare deliverability as are reflected in their current operations, outreach programs, and numerous Patient testimonials praising their compassionate, caring execution and operations. Simply put: They represent the finest examples of Cannabis industry operators, who have no financial necessity to perform (although they are extremely successful and diligent in their business practices)- they do it simply out of their will to help others become well.



**Section A - Number 3: Transactions and Details Associated with Releaf Recovery application development and submission**

**Section A - Number 3 Response:**

- 1: Printing, CD's, Binding & Miscellaneous: \$1,550.00
- 2: Staff & Clerical (Document Assembly): \$2,000.00
- 3: Consulting, Travel & IP Development: \$9,028.15
4. Application Fees: \$1,000.00
5. Architectural fees: \$1,200.00
6. Certified Public Accountant / Independent Auditor fees: \$4,000.00
7. Website / Collateral Development: =300
8. Security Specialist fees: 0
9. Real Estate brokers and deposits: 0
10. Legal / Attorney (for filing of LLC) Fees: \$275.00

**Total: \$19,355.15**



SECTION B1

**RELEAF RECOVERY LLC  
OF STAMFORD**

**SECTION B1 Location of the proposed dispensary facility**

**48 UNION STREET  
UNIT 2  
STAMFORD CT 06906**

STATE OF CONNECTICUT  
DEPARTMENT OF REVENUE SERVICES



**Temporary Permit for  
Sales and Use Tax**

Do **NOT** mail to the Department of Revenue Services

**This temporary permit must be displayed for customers to see and is not assignable or transferable.**

Confirmation  
Number\*:


Organization Name: Releaf Recovery LLC  
Business Trade Name: Releaf Recovery LLC  
Business Address: 379 Quarry Brook Drive  
South Windsor, CT 060743526

**This temporary permit will expire on 09/21/2015.**

\* This number will act as your temporary tax registration number. It will be replaced when you receive your registration confirmation package in the mail.

Your registration package will include information on electronic options available in our Taxpayer Service Center (TSC). In a separate envelope, you will also be receiving a personal identification number (PIN) which will allow you access to the TSC. Once you receive your PIN, we encourage you to take advantage of our electronic services.

Please contact the DRS Registration Section at (860) 297-4885 if you do not receive your registration confirmation package by the 15th business day following completion of REG-1 OL.

 DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023

Date of this notice: 08-28-2015

Employer Identification Number:

Form: SS-4

Number of this notice:

RELEAF RECOVERY LLC  
THOMAS J NICHOLAS MBR  
379 QUARRY BROOK DR  
SOUTH WINDSOR, CT 06074

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 47-4919349. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2016

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.



MAYOR  
DAVID MARTIN



DIRECTOR OF OPERATIONS  
ERNIE ORGERA

LAND USE BUREAU CHIEF  
NORMAN F. COLE, A.I.C.P.  
Tel: (203) 977-4714

**CITY OF STAMFORD**  
**ZONING BOARD**  
**LAND USE BUREAU**  
888 WASHINGTON BOULEVARD  
P.O. Box 10152  
STAMFORD, CT 06904 -2152

Angela D'Amico  
4 Garella Road  
Bethel, CT 06801

September 15, 2015

Dear Angela,

I had the chance to check the zoning classifications of the two properties you are investigating, 984 High Ridge Road and 48 Union Street.

Our records indicate that 984 High Ridge Road is located within the C-N District and 48 Union Street is located within the M-L District. Both of these properties are, therefore, located within Zoning Districts that are identified as eligible for consideration for a Medical Marijuana Dispensary. A copy of the adopted regulations is attached.

As adopted, a Dispensary would require Special Exception approval by the Zoning Board, subject to the conditions contained in the attached regulation and the standards and conditions for Special Exception approval contained in Section 19.3.2 of the Zoning Regulations. Applications would be accompanied by an application for site plan approval, for which requirements are contained in Section 7.2 of the Zoning Regulations.

I have attached the two required application forms. You can view or download the Zoning Regulations to access the two referenced sections (7.2 and 19.3.2.) at the following web link:

[http://www.stamfordct.gov/sites/stamfordct/files/file/file/city\\_of\\_stamford\\_zoning\\_regulations15\\_1.pdf](http://www.stamfordct.gov/sites/stamfordct/files/file/file/city_of_stamford_zoning_regulations15_1.pdf)

Once a fully completed application has been submitted, it can average two to three months till Zoning Board approval has been obtained, which includes time for conducting a public hearing. The length of time of approval can be shortened if all questions are answered in the application and during the public hearing.

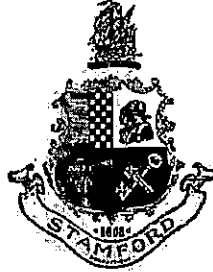
Hope this helps.

Dave

David W. Killeen, CZET, Associate Planner  
Stamford Government Center, 7th Floor  
888 Washington Boulevard  
Stamford, CT 06904 (203) 977-4716  
[dkilleen@stamfordct.gov](mailto:dkilleen@stamfordct.gov) [www.stamfordct.gov](http://www.stamfordct.gov)

MAYOR  
DAVID MARTIN

**CITY OF STAMFORD**



ROBERT D. DeMARCO  
CHIEF BUILDING OFFICIAL  
Tel: (203) 977-4161  
Fax: (203) 977-4163  
Email: rdemarco@ci.stamford.ct.us

ERNE ORGERA  
DIRECTOR OF OPERATIONS  
EMAIL: orgera@ci.stamford.ct.us

OFFICE OF OPERATIONS  
BUILDING DEPARTMENT

Tel: (203) 977-4161 / Fax: 977-4163  
Government Center, 888 Washington Boulevard, Stamford, CT 06901

September 14, 2015

Angela D'Amico  
Owner/Founder, D&B Wellness, LLC  
Compassionate Care Center of CT

RE: 984 High Ridge Road and 48 Union Street

I have reviewed the history of the buildings at 984 High Ridge Road and 48 Union Street in Stamford CT. In the current state of the buildings which at present is reduced to core they will meet all the requirements to occupy a medical marijuana dispensary.

If you need to discuss this matter further, I can be reached at 203-977-4161

Regards,

A handwritten signature in black ink, appearing to read 'Robert D. DeMarco'.

Robert D. DeMarco  
Chief Building Official



**David Martin**  
Mayor



**Charles E. Spaulding**  
Chief Fire Marshal

Section B-2

**Stamford Fire & Rescue**  
**Office of the Fire Marshal**  
888 Washington Boulevard  
PO Box 10152  
Stamford, Connecticut 06904-2152  
(203) 977-4651 Fax # (203) 977-5475

September 15, 2015

Angela D'Amico  
Owner/Founder, D&B Wellness, LLC  
Compassionate Care Center of CT

Re: 984 High Ridge Road and 48 Union Street

Dear Ms. D'Amico:

I am familiar with the location and layout of the building at 984 High Ridge Road and 48 Union Street, Stamford, Connecticut. At this time the building is reduced to core and has the potential to meet all the requirements of the Connecticut Fire Safety Code to occupy as medical marijuana dispensary.

If you have any questions regarding this matter, please contact me.

Respectfully,

Charles E. Spaulding  
Chief Fire Marshal



**Sun Hill Management Trust**  
48 Union Street, Stamford, Connecticut 06906  
203.322.9227

---

September 16, 2015

Mr. Thomas J. Nicholas, COO  
Releaf Recovery, LLC  
379 Quarry Brook Drive  
South Windsor, CT 06074

Dear Tom:

I am writing this letter so that you can include it in your company's application to Connecticut's Medical Marijuana Program. I am the managing partner of Unit 2 in Glendale Commerce Park located at 48 Union Street, Stamford, CT 06906. We have executed a binding letter of intent on the location upon receipt of all local and state approvals, specifically receipt of a license in the DCP's Medical Marijuana program.

I understand that your intended use for my property is a licensed Medical Marijuana facility and I approve of that use.

Best of luck in your quest for licensure and please keep me apprised of your progress.

Sincerely,



Nancy Mimoun  
Managing Partner  
Sun Hill Management Trust

SECTION B4



releaf 

recovery

of Stamford



SECTION B5





releaf  
recovery  
of the world

# SECTION B5

## SURROUNDING AREA 48 UNION STAMFORD



7



SECTION B-5

Section B-



2

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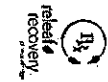
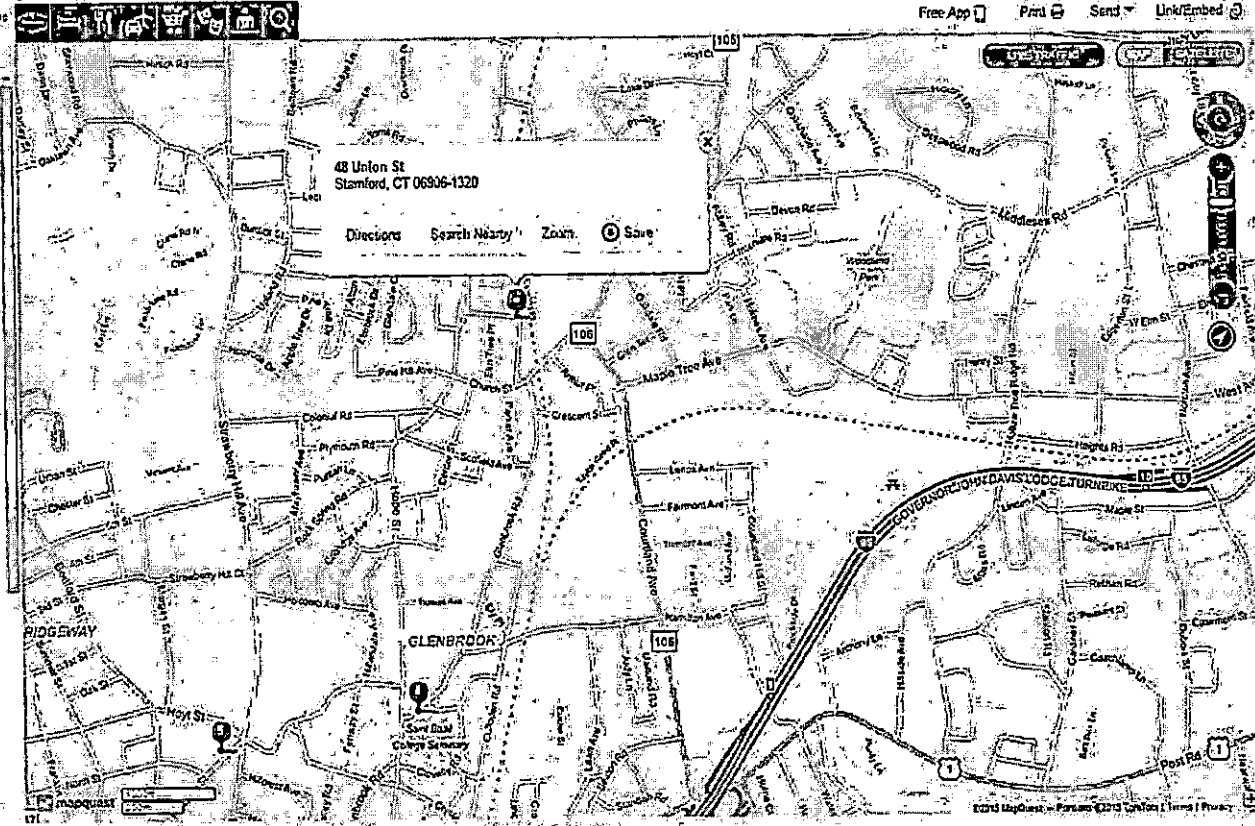
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SECTION B7



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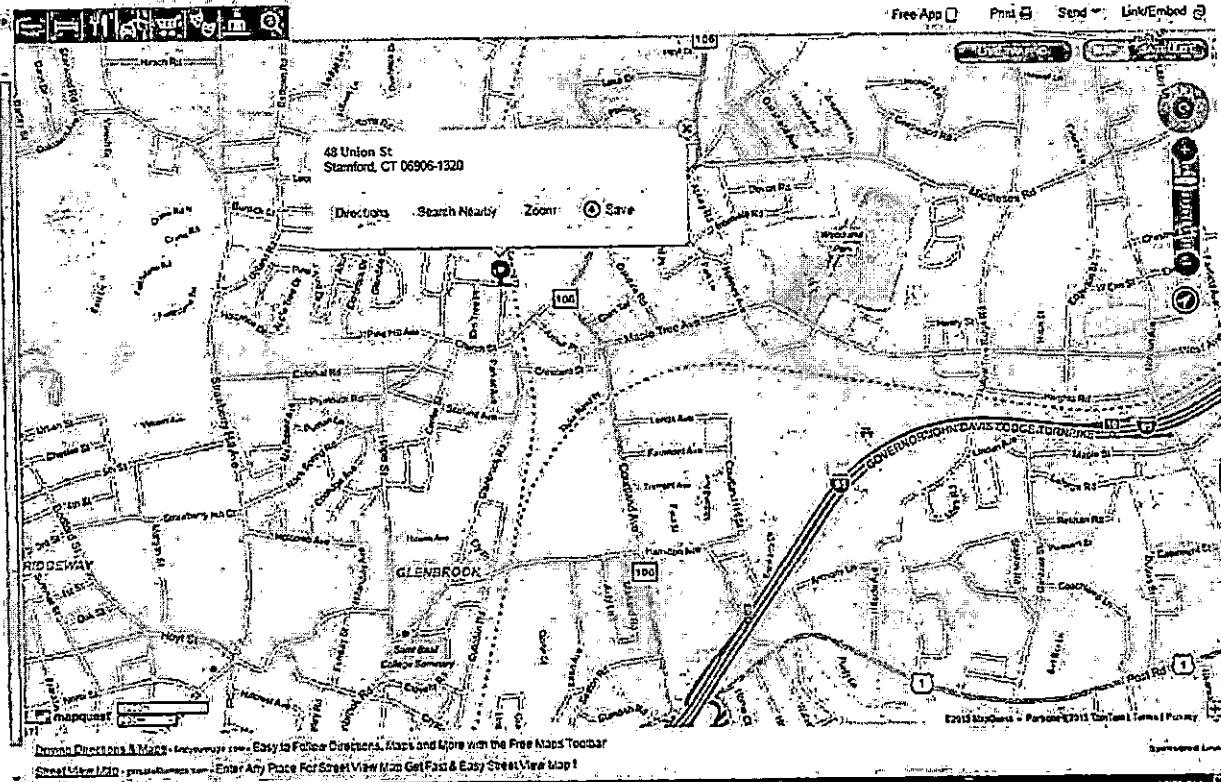
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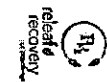
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 Stamford Tank Installation



SECTION B 7



SECTION B 7

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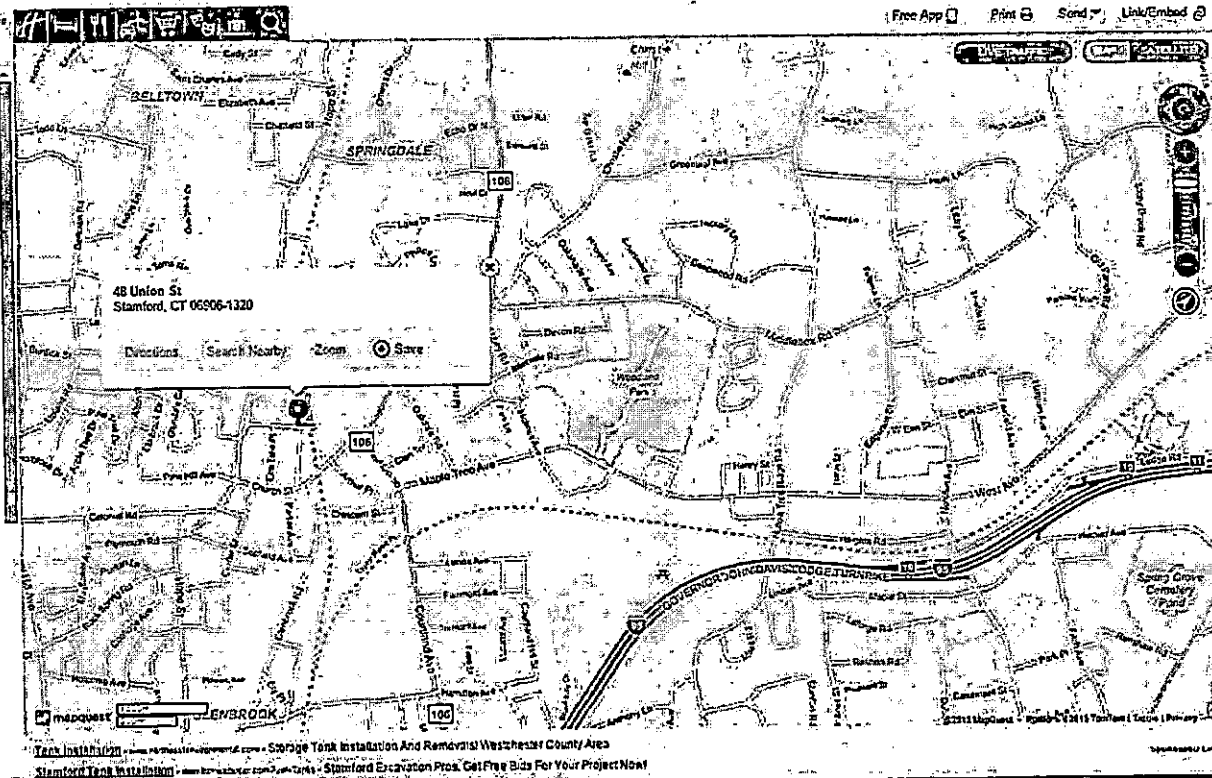
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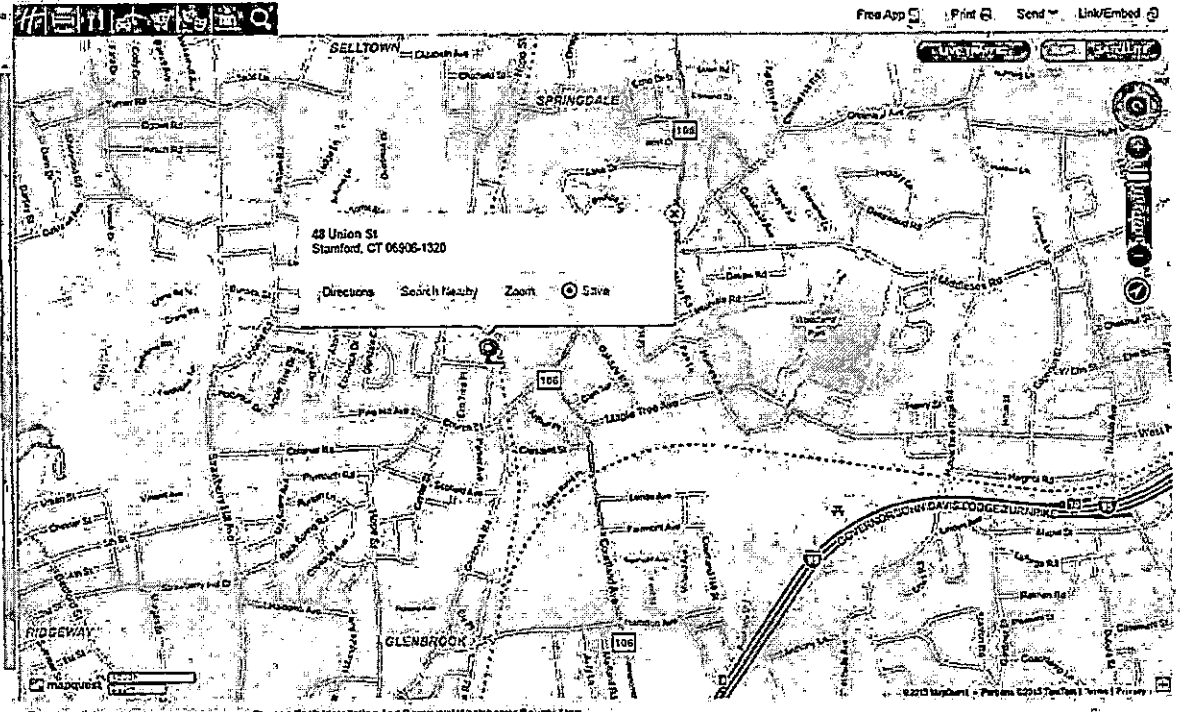
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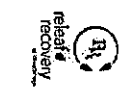
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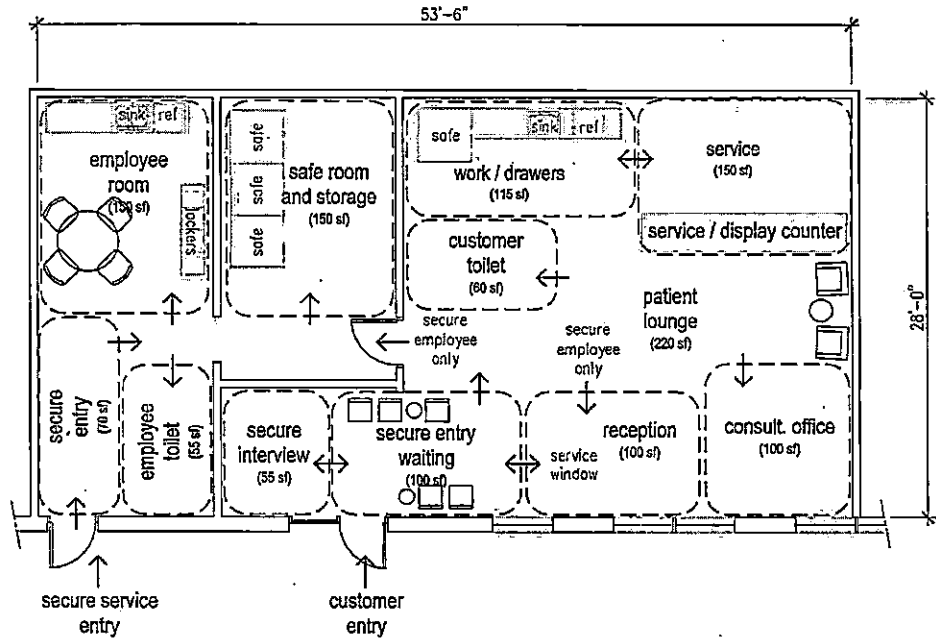
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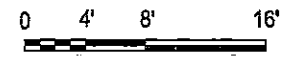




SECTION B8

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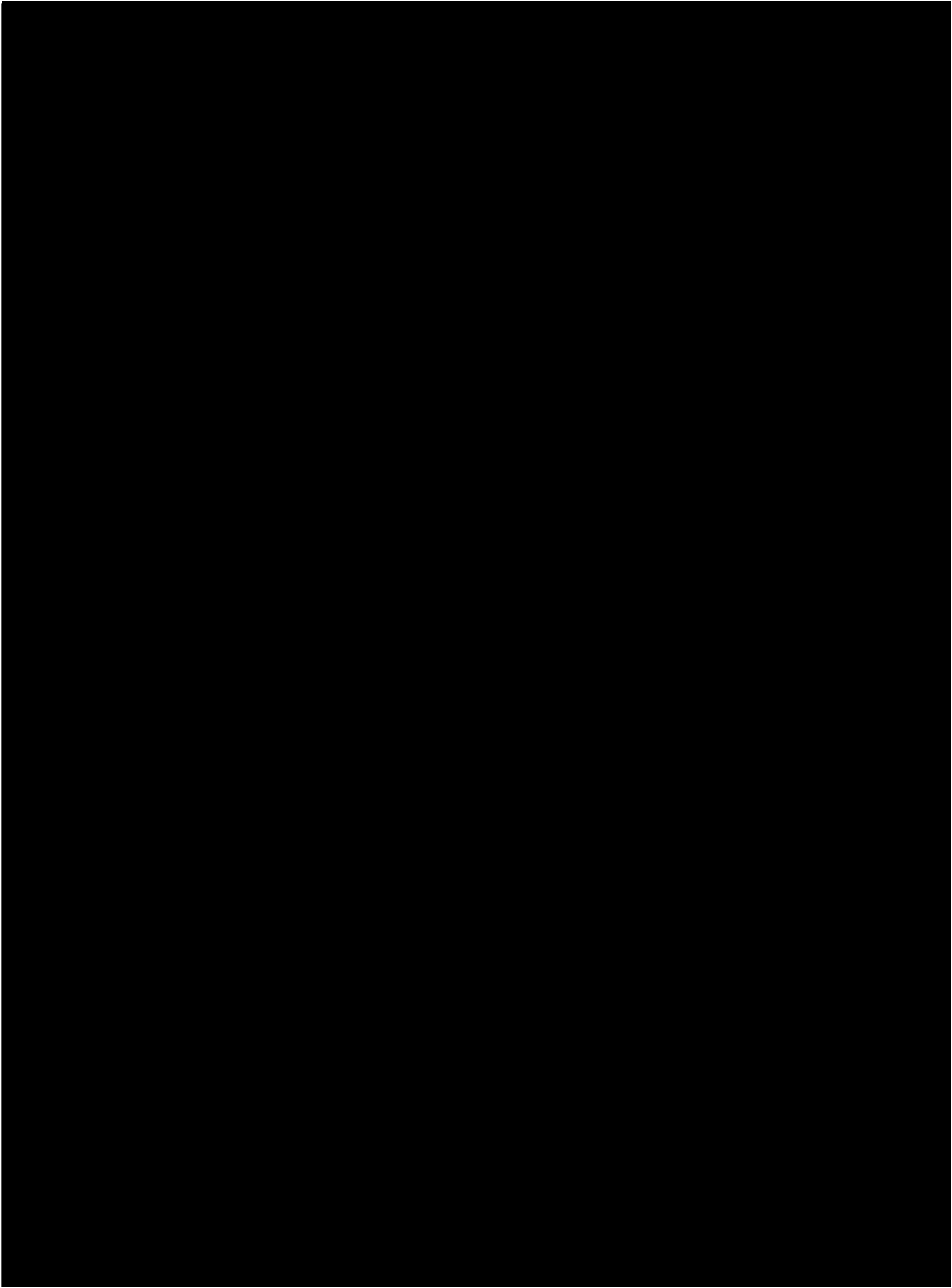
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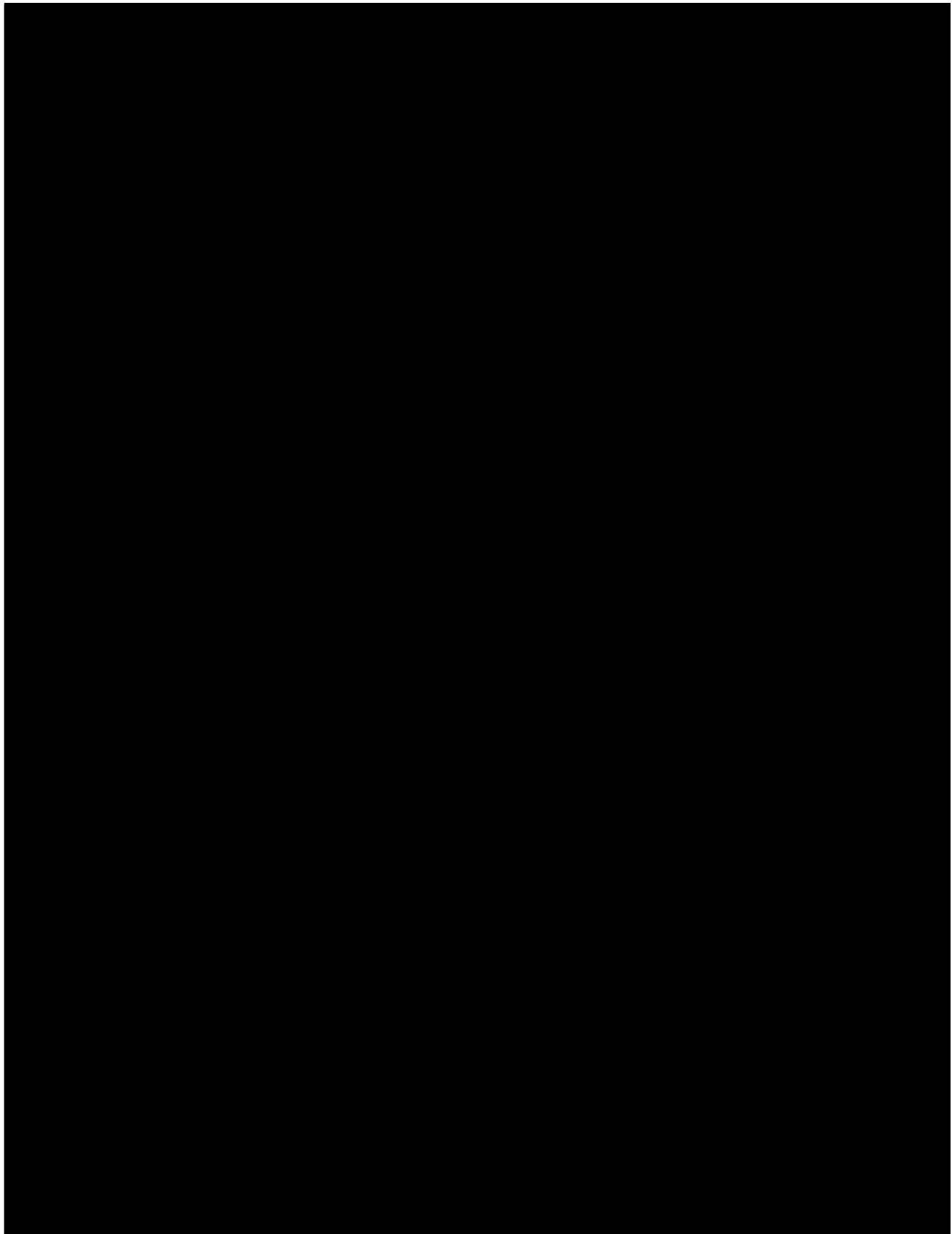
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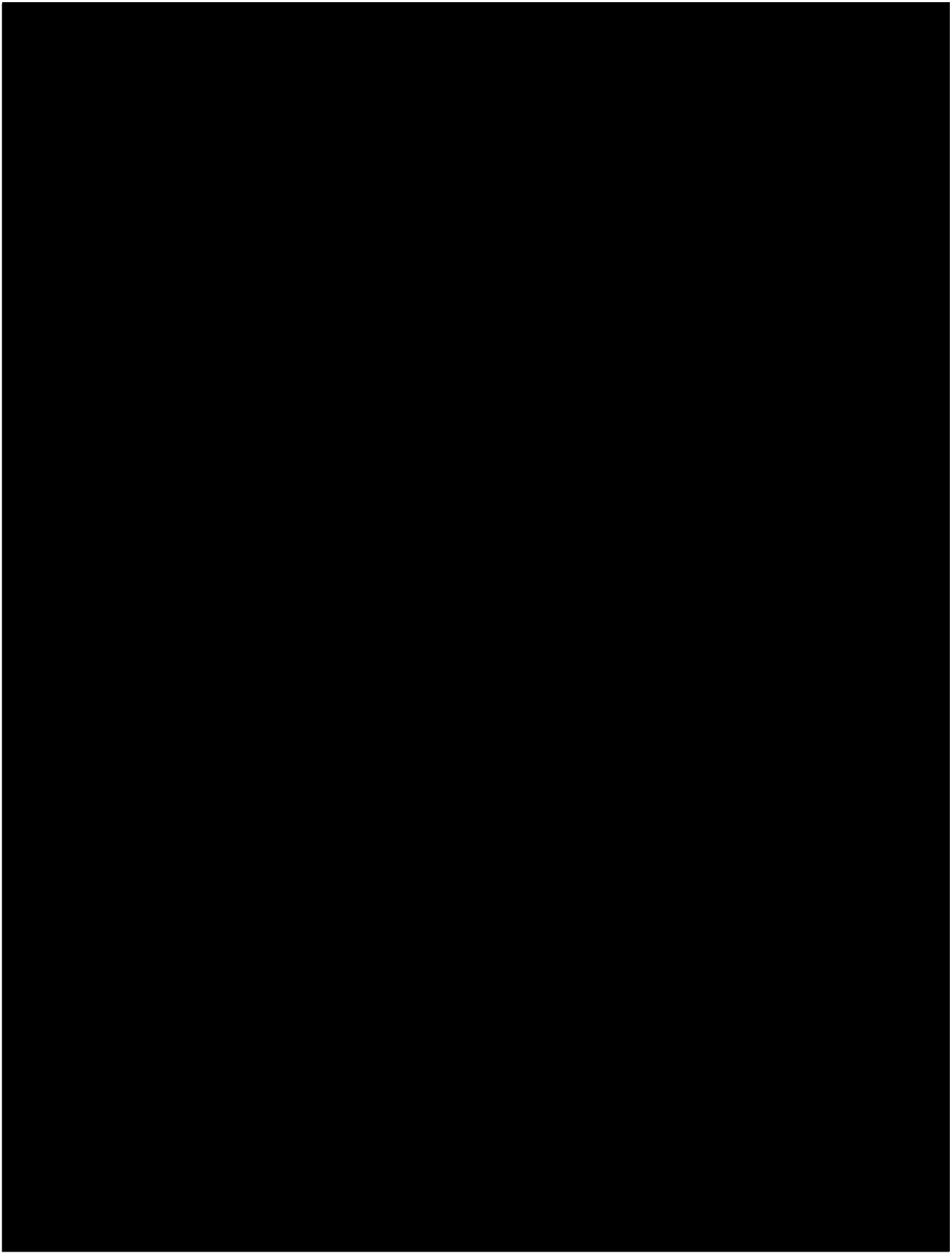






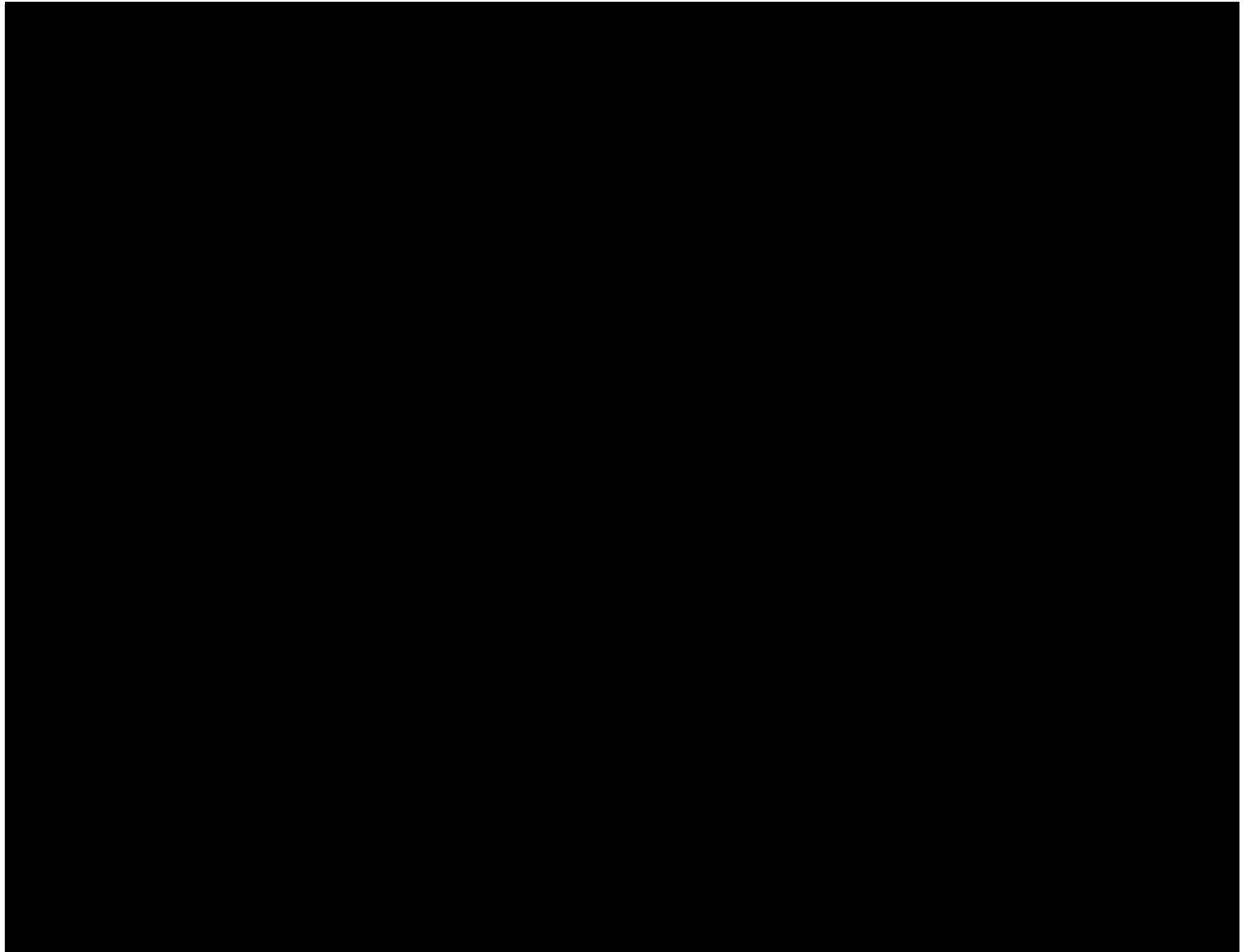


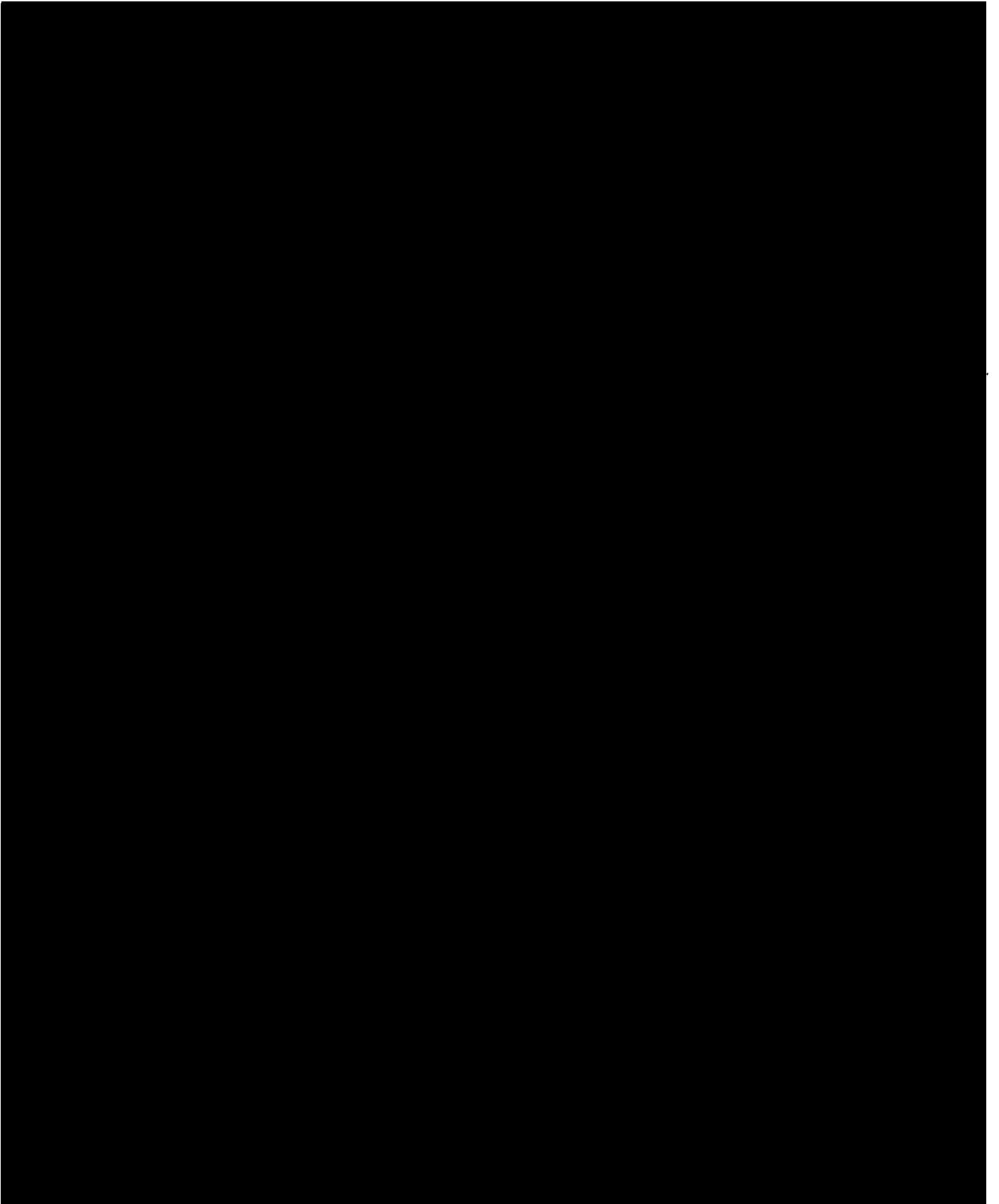
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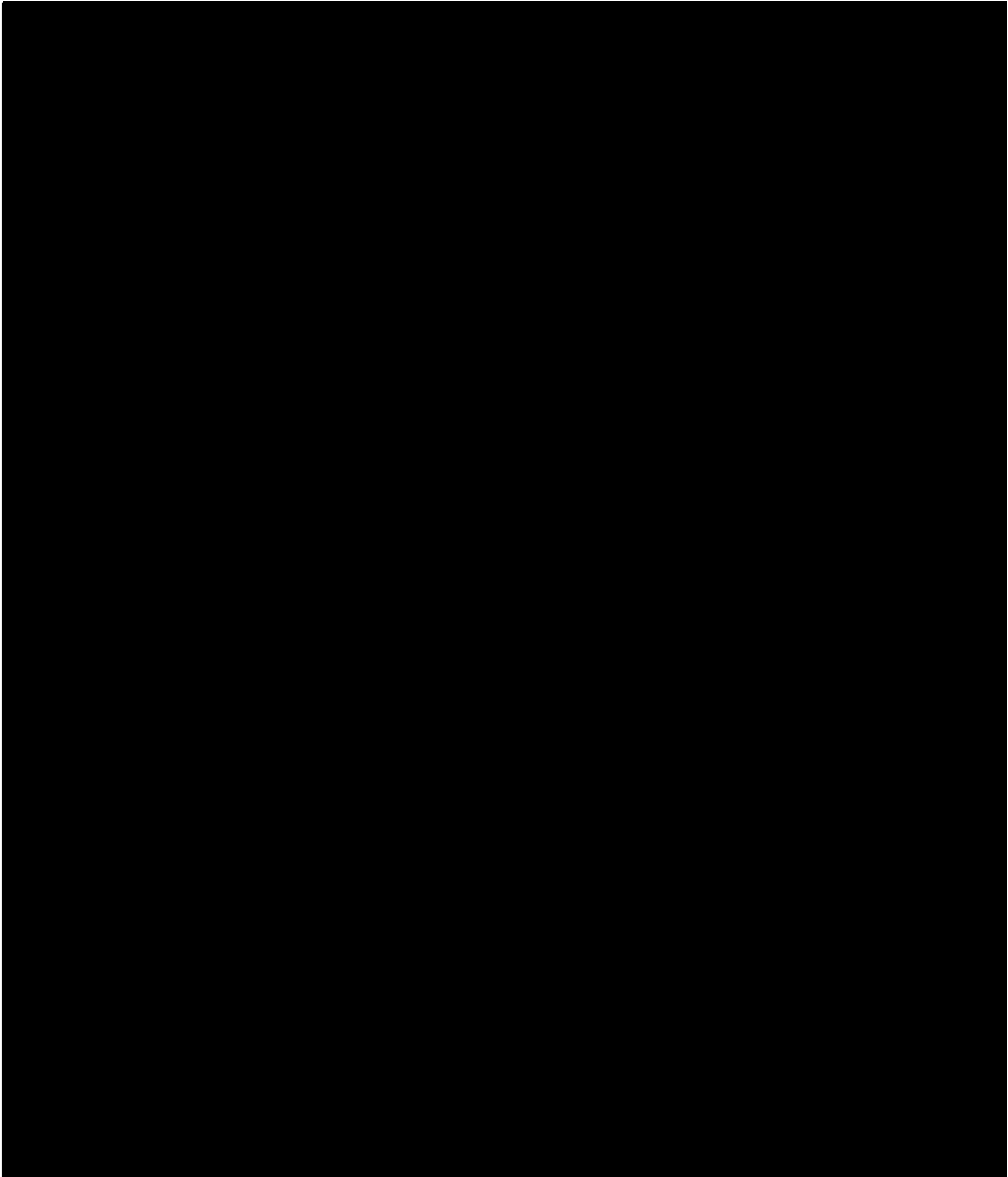




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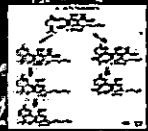






# Cannabis 101

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## Hundreds of Important Cannabis Facts

Cannabis throughout History  
Active Compounds  
Strains & Genetics  
Quality Control  
Legal Concerns  
The Indica: Sativa Spectrum

## Cannabis as Safe & Effective Relief

Getting Started  
Ways to Medicate  
Getting What You Need  
Keeping Track  
Common Uses & Side effects



## Cannabis Industry Resources and Advocacy

Patient Advocacy  
Educational Resources  
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Ground-Breaking Research



## Active Components of Cannabis

Marijuana has several active Chemical Compounds, or 'Cannabinoids'  
The human body is naturally "Pre-Programmed" with Cannabinoid Receptors

Up to 80 Cannabinoids have been discovered so far. Not all Active Components are listed here

**THC**- TetraHydroCannabinol (notably Delta-9) is the Psycho-Active compound, which causes the Euphoric, or "High" feeling that is generally associated with using Marijuana by most patients. THC has Analgesic (Pain Relieving) effects, Neuro-Protective and Anti-Inflammatory qualities; can help stimulate Appetite, relieve Nausea, and more

**CBD**- Cannabidiol is another physiologically active compound within Cannabis which reduces the psychoactive effects of THC. With qualities ranging from Anti-Inflammatory, to Anti-Anxiety, Anti-Arthritic, Analgesic, Anti-Convulsive and more. CBD works similarly to THC compounds, but has actually been shown to modulate it's Psycho Active effects. Strains rich in CBD are less common than THC rich strains, and many are just now being developed and released specifically for the Medical Marijuana Community as an alternative to Psycho Active medication

**THCA and CBDA**- Anti-Inflammatory agents only available when consumed orally, and the plant has not been heated beforehand

**CBN**- A degradation product of THC, and generally isn't found in fresh flowers

### Terpenes

Terpenes modify the effects of THC, and impact the Medicinal Effect of the strain  
They are also responsible for some of the smell and taste characteristics

**Pinenes:** Pine odor, bronchodilator that opens the lungs to more THC absorption. It also increases focus, self satisfaction, and energy

**Caryophyllene:** Sweet, woody, clove taste responsible for anti-inflammatory and neuroprotective effects through CB2 receptor activation

**Linalool:** Floral smelling, is believed to provide some anti-cancer effects and is known to cause severe sedation

**Limonene:** Has a citrus scent and may possess anti-cancer, anti-bacterial, anti-fungal, and anti-depression abilities

**Myrcene:** Effects intake of THC by brain cells to increase the overall effects of THC when ingested together

### Common Side Effects

Users of Cannabis have reported these and similar side effects, which generally take 3 hours to wear off  
In some cases, especially with Overuse, these effects can last up to 10 hours or more, and can be very intense

Short Term Memory Disruption  
Slowed Reaction Time  
Anxiety / Paranoia

Altered Perception  
Increased Appetite  
Tiredness/Laziness

Increased Heart Rate  
Dry and/or Mouth (Cotton-Mouth)  
Euphoria

Take caution, and start with SMALL AMOUNTS when determining YOUR appropriate Cannabis usage.  
Over-using with Natural Cannabis has NOT proven to be lethal.

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## Understanding Names and Genetics

Strains can be named anything, for any reason, but are usually related to the:  
Genetic Parents, Overall Effects, Smell, Taste, Yield, Breeder, Origin, Growth Medium  
"Hydro/Organic", "Indoor/Outdoor", and/or Appearance

- Cannabis strains can be interbred or **Crossed**
- Nature has evolved several **Landrace** strains, which are the original building blocks for all modern strains
- Dominant** and **Recessive** traits are passed down to the offspring seeds  
Establishing a plants **Genotype** (Just like you and your parents)
- Breeders then raise and select whichever offspring incorporate the **Phenotypic Expressions** they desire. If you have brothers or sisters you can see how the same parents can produce multiple offspring that reflect different traits
- Offspring that produce a combined effect superior to either parent is said to show **Hybrid Vigor**
- Breeders attempt to Stabilize strains for production and reproduction through a complex "Back-Crossing" process. If they cannot, those Genetics will only be available by taking cuttings from the original plant, called Clones

Clones can be taken from almost any plant, and are a very common way to reproduce or preserve genetics

For Example: A breeder develops a strain he calls 'Lemon Kush' by Crossing a Landrace strain from the 'Kush' region of Pakistan called Pakistani Kush (Indica) with a Thai Landrace, (which possessed a lemon taste and smell) called Lemon Thai (Sativa) This breeder selected offspring that mostly incorporated Indica dominant traits of Pakistani Kush, but that also possessed very strong lemon smell and taste, and some Sativa characteristics. The other versions or phenotypes of this breeders 'Lemon Kush' include a Sativa Dominant strain which he calls Lemon Zing, as well as a Hybrid strain he calls Lemonade (Male)(Pakistani Kush Landrace) Pakistani Kush x (Female)(Thai Landrace) Lemon Thai

Lemon Kush      Lemonade      Lemon Zing

## KEEPING TRACK

*It is important to know which Strains work the best for you*

This section will help you remember your Personal Preferences (along with any that don't work for you)  
Just place the stickers from your Medicine Containers (or write the names) in the spaces below

My Preferences

My Dislikes


### Standard Weight

Here are the standard weights your Bud-Tender will use

Gram	1/8 Ounce	1/4 Ounce	1/2 Ounce	Ounce	1/4 Pound	1/2 Pound	Pound
1 Gram	3.5 grams	7 grams	14 grams	28 grams	112 grams	224 grams	448 grams

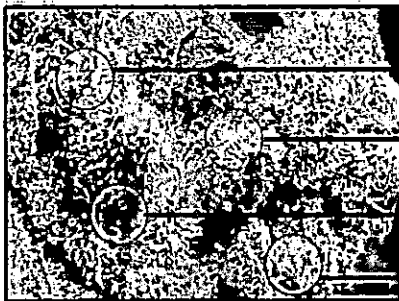
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## Quality Control

### NOT ALL CANNABIS IS CREATED EQUALLY

- The Names/Genetics of a strain only determine the effects that strain will have  
Not the quality or potency of the final product
- The most important factor in the overall quality is the **Grower and their Process**
- The same strain, grown in different conditions will produce very different results
- Some Growers and Collectives have turned to Laboratories that can test their Marijuana for **Chemical Content**, as well as **Cleanliness** using **Gas and or Liquid Chromatography**
- Patients can then see the results in the Bud-Room, and factor them into their decision making process

These tests show how much of a chemical compound is present and/or available, and equally importantly, that your medicine is *Clean*. As research in this field continues, patients can be aided in determining what will work the best for them, based on actual Chemical properties. This is a huge step towards *Legitimizing Marijuana as a Medicine*. While it is very important to know these values, there are other variables that determine potency and effect including factors like your *Personal Body Chemistry*. Think of the test results not only as an excellent analysis but also as an overall reflection of the grower and their process



Well Manicured- unnecessary plant material trimmed

Trichomes- main production site of THC(s)/CBD(s)

Mold/Bacteria/Pest Free

Properly Dried and Cured

- Look for an abundance of Trichomes, (shaped like tiny Crystals)
- These Glands along with the plants Oils and Resins, are where the majority of the THC(s) and CBD(s) are formed, mainly in the flower buds (more so than the leaf material) of female plants, in order to catch pollen from Male plants as it goes through the reproductive/flowering process. If no pollen is present the female plant will devote more of it's energy towards oil and resin gland production, whereas if pollen does become present, and the plant devotes it's energy to producing seeds. Thus, *seedless* or *sin-semilla* flowers generally contain more active Cannabinoids
- Properly Dried and Cured Cannabis should feel lightly moist, even sticky but NOT soaking wet
- Bud Density will vary depending on strain and growth factors.  
In general, a dense, hearty flower insinuates a healthy, well grown plant
- Smell should be clean and crisp, (Regardless of Strain Type/Fragrance)  
Not that of Mildew or Alfalfa (Hay), Chemical Pesticides, or Fertilizers
- Cannabis should burn cleanly and reduce to a thin gray ash. If it turns thick, black, and smells like chemicals, they might still be present in the plant
- Most Cannasseurs agree, it seems best **Not** to ingest Contaminated Cannabis

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## Ways To Medicate

**Marijuana does not have to be smoked to obtain its Medicinal Value**

*Consult your Physician before starting any new medication*

*Especially if you have pre-existing conditions (Heart, Lungs, Kidney, Etc.)*

**Smoking-** Cannabis is generally smoked either in plant or concentrate form (Kief, Hashish, Oils, Waxes, Goo, Etc.) with specially designed Pipes Bongs, Water Bubbler and other devices, or rolled, with special rolling paper into Joints, Blunts, Cones, Etc.

**Inhalation of Smoke/Vapor** has the fastest effect on your body

\* Known Carcinogens are released by burning plant material and/or paper

\* Germs and Bacteria can accumulate on the resins left behind by smoke

\* Make sure to keep all glass pieces clean using an approved/safe product (available at most smoke shops)

\* A solution of rubbing alcohol and salt (or rice) can be used as well, remember to rinse thoroughly with water

\* Butane gas is also slightly toxic

**Concentrates-** made by separating THC/CBD from the plant material, then refining and compressing it or "Concentrating" it into another form. This is done with a variety of processes, from 'bubble bags and ice', to 'high tech CO2 extractors'

\* Concentrates have a very high ratio of Active Chemicals to Overall Weight, compared to even the most potent Marijuana buds, making them very powerful. Be careful when medicating with concentrates

**Vaporization-** Specially designed "Vaporizers" heat Cannabis to the point where Cannabinoids are released into the air/lungs, but the rest of the plant material is largely unaffected. Vaporization releases Cannabinoids to the user, without many of the harmful elements created by burning plant material. Studies also show that some Vaporizers produce little to no Carcinogenic (Cancer Causing) effects, and are much more recommended by Physicians versus Smoking

**Edibles-** Cannabis can be combined with almost any type of Food or Drink. There are multiple methods, the most common being to heat plant material with ordinary butter, which releases the plant's Cannabinoids into the Butter's fatty oils, which the user can then ingest. Edibles are available as Foods, Drinks, Candies, Baked Goods and beyond

\* Beware- Edibles are known for having a much different onset of their effects than smoking or vaporizing

If you use an edible, start with no more than 1/2 of the recommended "Dosage"

Wait up to an Entire Hour to determine the full effect it has had on you

**Topicals-** Salves, Lotions, and Ointments can be applied and absorbed directly into the skin

\* Make sure to test for negative reactions on a small area of your skin first, just in case

**Tinctures/Liquid Concentrates-** THC/CBD is chemically extracted from Marijuana Plant Material, usually with Alcohol. Tinctures are generally taken either as a Sublingual (Tonguedrop) or mixed with some food or drink to mask the taste, which can be a little bitter

\* Take the same precautions with Tinctures and Liquids as you would with Edibles

**Synthetics-** Pharmaceutical Companies have discovered how to recreate the effects of Marijuana with drugs like "Marinol" that are only available through your doctor, and are used through an inhaler, pill capsule, and other forms

\* Ask your doctor about using synthetic/pharmaceutical forms

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### Getting What You Need

**There are over 1000 different kinds (strains) of Cannabis**  
**At first it can be tough knowing which strains work for you**  
**This section is designed to help you decide which strains to use**  
**Based on your Medical needs**

Every strain of Marijuana falls into 1 of 3 basic categories  
 Based on the overall effects they give

**Indica**– Indica Dominant strains mainly affect the Body  
 They produce a Heavy, Lazy, or Sedative effect  
 Commonly used for symptoms like Pain, Lack of Appetite, and Insomnia

**Sativa**– Sativa Dominant strains affect mainly the Mind  
 They produce Euphoric, Energizing, or Uplifting type effects  
 Commonly used for symptoms such as Depression, Pain and Stress Relief  
 Without the Heavy or Lazy type effects

**Hybrid**- Hybrid strains have balanced Indica and Sativa characteristics  
 Known as 50/50 or "all-around" strains

*Note: Most modern Strains have complex family trees. Some are 100% Indica or 100% Sativa  
 Most are technically 'Hybrids' that are either Indica or Sativa Dominant*

### The Indica-Sativa Spectrum

**Every Strain of Marijuana is balanced somewhere between  
 100% Indica and 100% Sativa**

**Most Strains have at least one noticeable secondary effect**

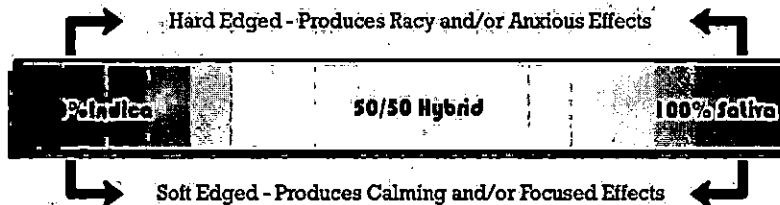
**We call this an "Edge" Ranging from "Hard to Soft"**

**Your Bud-Tender should be able to explain where any strain falls onto this spectrum  
 (If your not sure, don't hesitate to ask)**

*For Example: Let's say John is a business man, with a busy schedule. He has severe spinal injuries, which cause him great pain. He's also been diagnosed with acute anxiety. During the day he prefers Sativa Dominant or Hybrid strains which help relax his back, but don't slow him down. At night and before bed, he prefers Indica dominant strains.*

*Because of his anxiety, he always prefers to medicate with strains that have a "Soft Edge"*

*John's business partner Nick has mild depression. He also prefers Sativa dominant and Hybrid strains during the day and Indicas at night. During the day he generally prefers a strain with a "Hard Edge" which he says "picks him up"*



Once you've determined which balance works best for you,  
 it's time to determine your Personal Preferences  
 Most patients base their preferences on Effects, Genetics, Taste, Smell, Appearance  
 and its Overall Benefit to them as a Medicine

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## Cannabis Throughout History

For thousands of years man has used Marijuana. It has played a role Medicinally and Industrially, traceable as far back as the 28th century BC. Coincidentally, almost every region of the globe has Indigenous or Landrace families of Marijuana which have naturally evolved there.

From the Ancient Chinese, Greeks, Europeans, Persians, Romans and Africans, to King Salomon, Abraham Lincoln, and even Queen Elizabeth, almost every civilization throughout history was known to use or trade Marijuana in some form. Cannabis is a Holy sacrament to the Hindu and Rastafari people of the world, part of the Yin-Yang philosophy, and even a staple of the original Karma Sutra. In fact nearly every major religion has some historical reference to Marijuana. As trade, travel, and empire expanded so did the use and reach of Cannabis, and before long it was an everyday commodity worldwide. Hemp (The fiber, generally stripped from the stalk of Male plants) has been one of nearly every ancient and modern nation's industries, with uses ranging from Rope and Textiles, to Paper, Oils, Clothing, and more. Even America's founding fathers were known for having vast and luscious Hemp fields, nestled among their plantations. As man began discovering the many uses for the plant, he soon also discovered it's Medicinal Qualities. Ancient Medical texts show how to use Cannabis based Anesthetics for complex surgeries, and has been documented for an array of everyday ailments, like Pain Relief to Headaches, Insomnia, Depression, and Menstrual Cramps, used by royalty and peasants alike, much like over the counter medicines of today.

As long as there have been users of Cannabis, there have been those who oppose it. Most Governments throughout history however, have agreed that the Medicinal, Industrial, and overall positive effects of Cannabis far outweighed any negative impact, if any, that it might have. Only in the last century or so has it come under real legal scrutiny here in America, and with the United State's complex legal system, a number of decisions and causes are actually the reason(s) it is illegal here and elsewhere. The most well known modern legal disputes over Marijuana (in America) are traceable back to migrant Mexican workers throughout Texas and California, as well as African and Indian groups, mainly in large cities like New York, San Francisco, or New Orleans, who openly used and/or cultivated it. In 1912, the idea of putting international restrictions on Cannabis emerged at the International Opium Conference, and in 1915 California criminalized it. Marijuana's opponents launched a massive campaign against the "Horrors of Marijuana", and while it was largely based on false propaganda, it still has popular influence in America. Despite the testimony and efforts of groups like the American Medical Association, in 1937 the Marijuana Transfer Tax was levied, but because of a Legal-Loophole farmers could not obtain the necessary Licenses, and the industry as a whole was crippled.

Today, Marijuana is Illegal under Federal Law in America, however Individual States and Voters have the right to approve access to Marijuana as a Medicine. In 1996 California Voters passed an initiative, and now a total of 15 states, as well as Washington D.C. have a Medical Marijuana Program. Some states have even De-Criminalized the possession of small amounts. Countries like Holland and Germany have long adopted policies of tolerance toward Cannabis, and in plant form it is available as a prescription in Canada, Italy, the Netherlands, and Spain. Synthetic forms are also prescribed in America and elsewhere. In 2010 the California Voters very nearly passed a bill that would tax and legalize Marijuana in California. With so many questions surrounding Marijuana, we believe many can be answered by looking to the past. One thing we do know is this: *it's up to us as patients to help determine the future of Cannabis*

*\*To learn more about the History and the Future of Medical Marijuana, check out sites like UKCIA.org and SafeAccessNow.org*



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We Cannasseurs do however use and appreciate  
them as a resource, and think you may benefit as well

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## Additional Information

# INTRODUCTION

In continuing its efforts to provide the best holistic wellness care to its members, Education Planners is pleased to provide this educational material to its members, staff and community physicians. The purpose of this information is to educate us on the latest scientific concepts and understanding of medical cannabis so that we may better benefit from its diverse medicinal properties. Understanding this "pharmaceutical treasure trove" will hopefully make its utilization more efficient and effective (and less daunting for those who are new to this ancient herbal medicine):

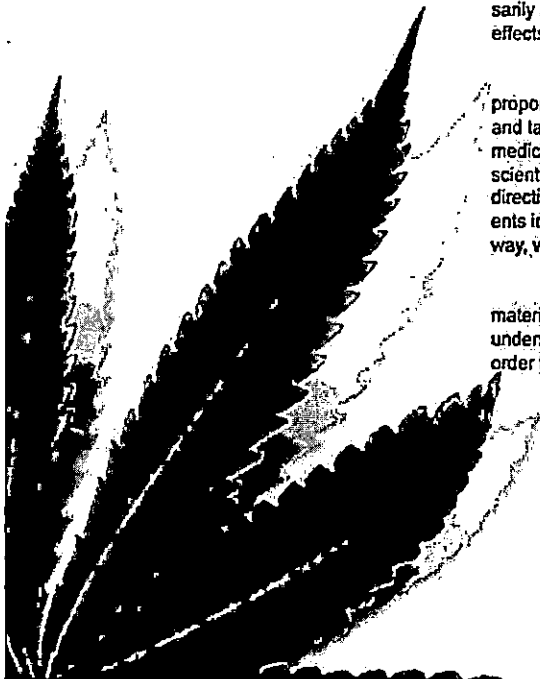
Helping us to better understand medical cannabis are the advances in laboratory analysis (now available to collectives) combined with the ongoing research taking place around the world. Much of this research is aimed at delineating the therapeutic effects of the various chemical compounds in cannabis, especially the cannabinoids and terpenoids. Two recent articles illustrating this development are those by Izzo, et al. (2009) and Russo (2011). An excellent video on medical cannabis and its impact on human health can be found online at: <http://www.youtube.com/watch?v=8Md2WNqxtQ>.

Another key to better understanding of medical cannabis is awareness that the chemical compounds available in the plant change with how the plant is processed and administered. Potential therapeutic benefits will vary if the cannabis is processed/administered in raw (unheated), heated or aged (degraded) form.

Also knowing that the various compounds in cannabis may modulate each other in synergistic or antagonistic ways is important. For example, the cannabinoid CBD will lessen to some degree the psychotropic effects of the cannabinoid THC, while the terpenoid  $\alpha$ -pinene will synergize the bronchodilator effects of THC. This complexity of interaction means that medical cannabis should be seen in the light of an herbal medicine, where to extract a so-called "active ingredient" will not necessarily result in the full range of therapeutic effects, or may produce unwanted side effects that usually do not occur when the whole herb is administered.

Finally, knowing that each strain of cannabis has potentially vastly different proportions of cannabinoids and terpenoids (often expressed in terms of color, smell and taste) means that one needs to be strain specific when discussing cannabis as medicine. This is a difficult step, but one that modern laboratory analysis and scientific research is now making possible. Education Planners is working in this direction and hopes that this educational material will assist caregivers and recipients in making a choice as to which strain, in what form, and administered in which way, will be most beneficial to them.

As new research in medical cannabis becomes available, this educational material will be revised to reflect the latest insights. In this way we hope that our understanding and use of medical cannabis will continue to grow in effectiveness in order to meet the needs and maximize the wellness of our members.



## DOSING MEDICAL CANNABIS

Understanding how to dose medical cannabis is difficult. We are not talking about a single active ingredient, but rather a complex of chemical compounds that modulate each other. Up to now, most attention in dose determination has focused on the psychoactive effect of THC. It is now obvious that the other (non-psychoactive) cannabinoids may be of greater therapeutic importance, depending on the ailment to be treated. Unfortunately, scientific research in dosing of these cannabinoids is still in its infancy.

Since the psychoactive effects of THC remain the main determinant of normal or "altered" daily functioning for most people, it is wise to continue to refer to the THC content of a strain when discussing dose of medicine. Some patients will want and need a high percentage of THC effect, while others will want and need a low percentage of THC effect. Determining the therapeutic dose of medical cannabis remains a very personal determination. The patient has the final say as to how much is enough. In addition, one person may react differently than another person to the same strain.

In this regard, route of administration will also be an important consideration in determining dose. For example, due to liver metabolism, cooked edibles may be 3-5 times more psychoactive than inhaled cannabis.

In trying to understand dosage, there are a few helpful rules-of-thumb:

1. Normal adult dosage of THC for beginners is 15 mg; more experienced patients: 30 mg.
2. Converting percentage to milligrams: move decimal one place over to the right. For example, 21.23% THC = 212.3 mg of THC per gram of cannabis. The same conversion can be done for other cannabinoids and terpenoids (e.g., 0.39%  $\beta$ -caryophyllene = 3.9 mg per gram of cannabis).
3. Under ideal conditions, only about 63% of the cannabinoids will get absorbed when smoked. Multiplying the milligrams of THC by 0.63 will result in a more accurate calculation of dose.

Beginners

15 mg

30 mg  
Experienced Patients

21.23% = 212.3 mg

212.3 mg

0.39% = 3.9 mg

$\beta$ -caryophyllene

per gram of cannabis

## CANNABINOIDS

CBCA	Cannabigerolic Acid
CBGVA	Cannabigerivarinic Acid
CBG	Cannabigerol
CBGV	Cannabigerivarin
THCA	Tetrahydrocannabinolic Acid
THCVA	Tetrahydrocannabivarinic Acid
THC ( $\Delta^9$ )	$\Delta^9$ -tetrahydrocannabinol
THCV	Tetrahydrocannabivarin
CBNA	Cannabinolic Acid
THC ( $\Delta^8$ )	$\Delta^8$ -tetrahydrocannabinol
CBN	Cannabinol
CBDA	Cannabidiolic Acid
CBDVA	Cannabidivarinic Acid
CBD	Cannabidiol
CBDV	Cannabidivarin
CBCA	Cannabichromic Acid
CBCVA	Cannabichromivarinic Acid
CBC	Cannabichromene
CBCV	Cannabichromivarin
CBLA	Cannabicyclol Acid
CBL	Cannabicyclol

# MEDICINE INFORMATION SHEET

MEDICINE INFORMATION SHEET

## Cannabis

Pronunciation: kan-UH-bis

### This medicine is USED FOR:

Although cannabis is used for a wide variety of ailments, rigorous clinical research is still relatively limited due to federal government regulations. Around the globe, however, clinical trials are taking place and more scientific information on the therapeutic effects of cannabis is being established.

Some of the more accepted medical uses of cannabis are for the following ailments:

- Alzheimer's Disease:** reduce agitation and nighttime tossing and turning, stimulate weight gain
- Amyotrophic Lateral Sclerosis:** slow disease progression, reduce pain, appetite loss, depression, drooling
- Chronic Pain:** reduce nerve-related (neuropathic) pain, allow opioid treatment at lower doses
- Diabetes Mellitus:** slow disease progression, protect from eye disease, reduce neuropathic (nerve) pain, reduce symptoms of heart muscle disease (cardiomyopathy)
- Dystonia:** reduce muscle tension and involuntary, painful muscle contractions
- Fibromyalgia:** reduce pain and muscle stiffness, improve sleep quality
- Gastrointestinal Disorders:** reduce cramping, abdominal pain, acid reflux, intestinal secretion, disease activity
- Glaucoma:** reduce intraocular (eye) pressure. **Glossal/Carotid:** inhibit tumor growth, reduce nausea and vomiting from cancer chemotherapy
- HIV/AIDS:** reduce neuropathic pain, anxiety, nausea, appetite, and weight loss
- Incontinence:** improve bladder control, reduce bladder inflammation/irritation
- Multiple Sclerosis:** reduce pain, spasticity, depression, fatigue, incontinence
- Parkinson's Disease:** alleviate L-dopa induced dyskinesias (LIC), reduce tremor, rigidity and psychosis symptoms
- Preeclampsia:** reduce itching in conditions such as kidney and liver diseases
- Rheumatoid Arthritis:** reduce joint pain and swelling, suppress joint destruction and disease worsening
- Insomnia:** reduce sleep onset and improve sleep quality
- Tourette's Syndrome:** improvement of tic and obsessive-compulsive behavior

### What the active compounds might be:

Cannabidiol (CBD), Cannabidiol (CBD), Cannabidiol acid (CBDA), Cannabichrome (CBC), Cannabigerol (CBG), Cannabivarin (CBV), Tetrahydrocannabinol (THC), Tetrahydrocannabinolic acid (THCA), Tetrahydrocannabinol (THCV), Terpenoids

### What the other compounds might be:

There may be more than 60 other cannabinoids and more than 200 terpenoids in cannabis.

### How this medicine is supplied:

Cannabis comes in various forms: dried plant material ('buds', 'top leaves'), concentrate ('hash', 'wax', 'brandy', oil, capsules), topical salve, edible (including drinks)

### Do NOT USE this medicine if:

- You are allergic to any cannabinoid or terpene
- You have a history of serious mental disorder such as schizophrenia or severe depression
- You are pregnant or planning to get pregnant. In addition to the risk of smoking, the use of cannabis when you are pregnant may be a risk factor for sudden infant death syndrome. Uterine exposure to cannabis may also cause behavioral (attention) problems in the child.
- You are nursing
- Important, there may be other conditions where this product should not be used but which are unknown due to limited scientific information.

### BEFORE USING this medicine:

#### ALWAYS TALK TO YOUR PHYSICIAN, PARTICULARLY IF:

- You have heart disease
- You have asthma, chronic obstructive pulmonary disease or other disease of the lungs
- You have a history of alcohol abuse or dependence
- You have a history of drug abuse or dependence
- You have a history of a serious mental disorder

### HOW TO USE this medicine:

Use the medicine as directed by your doctor. Dosage and frequency of administration will vary according to route of administration (smoke, vaporization, ingestion, etc), percentage of therapeutic ingredients, and other medicines taken. Ask your doctor or collective consultant to explain what dosage, route and frequency is best for you. Remember that concentrates have higher dosages per weight of medicine than other forms. Make sure you give the medicine sufficient time to take effect. This is especially important with the edible form of cannabis where therapeutic effect may take up to 1-2 hours before taking effect. Eating too much medicine too fast may easily occur causing unwanted side effects. Use this medicine only for the length of time recommended by your doctor. It is not recommended to use this medicine in combination with tobacco.

### Important SAFETY INFORMATION about this medicine:

- If you have not consumed cannabis before, it would be prudent to have someone with you the first time you use it. It is important to start by using small quantities. Stop if you begin to feel confused or dizzy.
- After you stop using cannabis, it remains in your system for several weeks to months. Therefore, during this time, tests that screen for cannabis may be positive.
- Cannabis may interact with several drugs. Tell your doctor which prescription drugs, non-prescription drugs and herbal products you are currently taking, particularly:
  - Any drugs that slow down the central nervous system, causing drowsiness. This may include sleeping pills, tranquilizers, some pain medications, some anticholinergics or cold medications or sedative medications
  - Anesthetics used in the treatment of HIV/AIDS
- CANNABIS MAY IMPAIR YOUR ABILITY TO DRIVE OR OPERATE HEAVY MACHINERY. This can last up to 24 hours after consuming.

### Possible SIDE EFFECTS of this medicine:

- From initial use:
  - When you first start consuming cannabis, you may experience mood reactions such as euphoria, relaxation, time distortion, perception of enhanced sensory experiences, loss of inhibition, anxiety, paranoia, agitation, omens, delusions or hallucinations.
  - Fast heartbeat, this may be a sign of a problem if you have heart disease
  - Facial flushing or red eyes, dry mouth, headache
  - Right after consuming cannabis you may get dizzy or feel lightheaded when you get up from a lying or sitting position. Try getting up more slowly. If lying down, sit on the edge of the bed and let your feet dangle for 1 to 2 minutes, then stand up slowly.
- From long term use:
  - Worsening of a chronic cough, if the medicine is smoked
  - May impair short-term memory retention and concentration. These effects usually disappear after you stop using cannabis.

### If OVERDOSE is suspected:

It is possible that the above mentioned side effects occur. Usually these will resolve themselves within a short period of time when medication is stopped. Obtain fresh air, staying hydrated and eating will help. Contact your doctor immediately if symptoms persist.

### Proper STORAGE of this medicine:

Store in a tightly closed container in a cool, safe and secure place. Store away from heat, moisture and light.

### GENERAL INFORMATION:

- If you have any questions about the medicine, please talk with your doctor, collective consultant or other health care provider.
- This medicine is to be used only by the patient for whom it is recommended. Do not share it with other people.
- If your symptoms do not improve or if they become worse, check with your doctor.
- Check with your collective consultant about how to dispose of unused medicine.
- This information is a summary only. It does not contain all information about this medicine.

### KEEP THIS MEDICINE OUT OF REACH OF CHILDREN AND PETS.

## PROCESSING AND ADMINISTERING MEDICAL CANNABIS

Medical cannabis is processed for administration in various ways: fresh, dried, cold extractions/concentrates and heated extractions/concentrates.

Although rarely done due to the large quantities usually needed, cannabis can be ingested raw, freshly cut from the plant, in order to primarily benefit from the acid cannabinoids and their anti-inflammatory effects. Terpenoids remain intact. Psychoactivity is minimized.

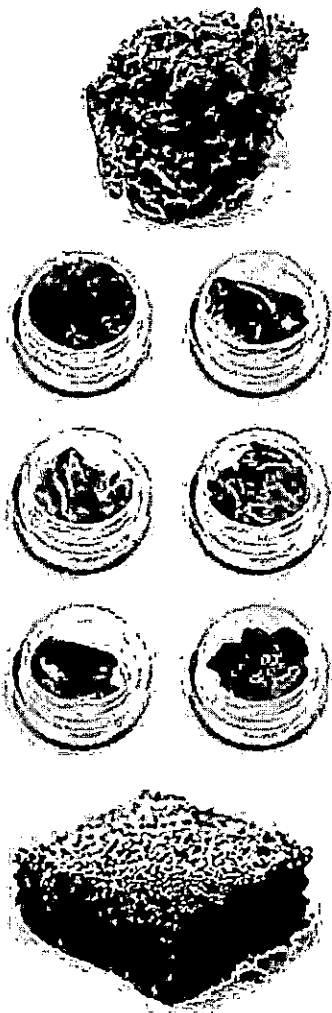
Dried cannabis is most often consumed by inhaling the burned or vaporized buds. Cannabinoid acids are converted to their neutral forms and the amount of terpenoids available will vary according to the method of administration chosen and the instruments used (pipe, joint, vaporizer).

Cold extractions/concentrates result in various products:

1. **Kief**: powder of the trichomes that have fallen off the plant. May be ingested raw but is usually smoked or ingested in cooked edibles.
2. **Slurry**: extraction using olive oil or alcohol. Usually ingested raw.
3. **Hash**: extraction using cold water and ice. May be ingested raw, smoked or used in cooking. Variety names reflect differences in the proportion of plant material to trichomes and how the variety reacts to heat:
  - a. **Bubble** = initially bubbles when exposed to heat.
  - b. **Full bubble** = continues to bubble throughout the heating process.
  - c. **Melt** = melts or turns into goosy oil when exposed to heat.
  - d. **Full melt** = almost pure trichomes, fully melts when exposed to heat leaving little or no residue.
4. **Wax**: extraction using a solvent, most commonly butane, CO<sub>2</sub> or O<sub>2</sub>. Removal ("purging") of the solvent may be through cold or heat evaporation (which changes the compounds available). Waxes are usually burned or vaporized, but may be used in cooking and in topical salves. Variety names usually refer to consistency. Examples:
  - a. **Honeycomb/Crumble** = dry, crumbly texture, often has small holes like a honeycomb.
  - b. **Budder** = more viscous, consistency like butter.
  - c. **Shatter/Glass** = consistency similar to a hard candy.
  - d. **Sap** = sticky texture similar to honey.
  - e. **Taffy** = firmer than sap but not brittle like shatter.

Heated extractions/concentrates convert the cannabinoid acids into their neutral forms and usually removes the terpenoids. Various products:









1. **Tea**: extraction into hot water and then drunk.
2. **Tincture**: heated cannabis that is extracted in alcohol. Usually administered directly under the tongue.
3. **Edible**: extraction into a fat (butter, oil) and then used in cooking food.
4. **Oil**: slow heating of cannabis in olive or coconut oil. Usually used in food or topically on skin.
5. **Salve/Cream/Lotion**: low heating of cannabis oil with beeswax. Used topically on skin.





# TERPENOIDS

## Smells and Therapeutic Effects

<b><math>\alpha</math>-PINENE</b>	 Pine needles	Anti-bacterial Anti-fungal Anti-inflammatory Bronchodilator
<b><math>\beta</math>-CARYOPHYLLENE</b>	 Black Pepper  Clove	Anti-bacterial Anti-cancer Anti-fungal Anti-inflammatory Anti-septic
<b>BORNEOL</b>	 Camphor	Analgesic Anti-insomnia Anti-septic Bronchodilator
<b>CARYOPHYLLENE OXIDE</b>	 Eucalyptus	Anti-fungal Anti-ischemic
<b>CINEOL</b>	 Tea Tree	Anti-bacterial Anti-depressant Anti-inflammatory Anti-ischemic Bronchodilator
<b>CITRONELLOL</b>	 Rose	Anti-cancer Anti-inflammatory Anti-insomnia Anti-spasmodic
<b>HUMULENE</b>	 Hops	Anorectic Anti-cancer Anti-bacterial Anti-inflammatory

**LIMONENE**



Citrus

Anti-bacterial  
Anti-cancer  
Anti-depressant  
Anti-fungal  
Anxiolytic  
Bronchodilator

**LINALOOL**



Lavender

Anti-bacterial  
Anti-convulsive  
Anti-depressant  
Anti-insomnia  
Anxiolytic

**MYRCENE**



Lemongrass

Analgesic  
Anti-cancer  
Anti-inflammatory  
Anti-insomnia  
Anti-spasmodic



Mango

**NEROLIDOL**



Wood

Anti-fungal  
Anti-insomnia



Citrus rind

**PHYTOL**



Green Tea

Anti-insomnia

**TERPINOLENE**



Lilac

Anti-bacterial  
Anti-fungal  
Anti-insomnia  
Anti-septic



Apple



## NOTES ON CHARTS 1, 2 and 3

The following charts reflect most of what is presently known on the potentially therapeutic chemical compounds in cannabis, how they are formed, and how they relate to each other. Only 21 cannabinoids and 13 terpenoids are listed. There is still much to be learned.

The charts should be read horizontally and vertically:

**Horizontally:** which cannabinoids can be found in which physical state of cannabis (raw, heated, aged). Raw refers to the fresh plant. Aged refers to the effects of UV-light, oxidation, and isomerization; in other words: degradation.

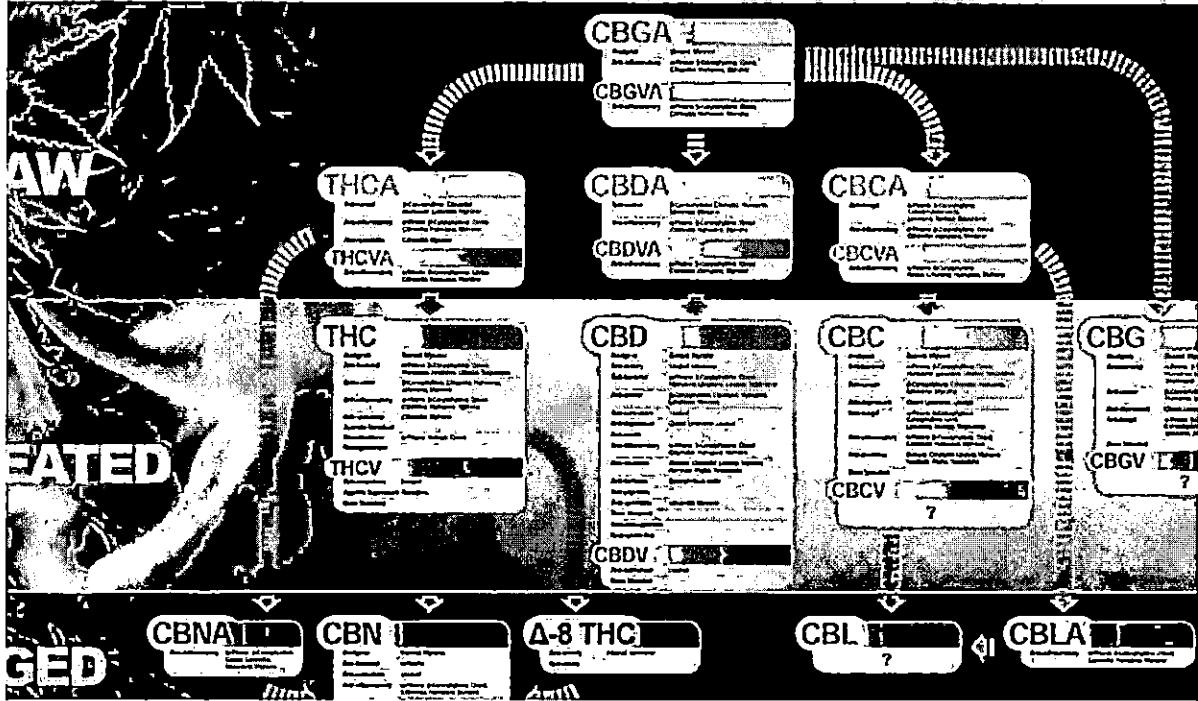
**Vertically:** how do the cannabinoids relate to each other; where do they come from?

In general, the amount of divarinic cannabinoid (those with "V" in the acronym) is always less than the olivetolic cannabinoid. In the charts, this is reflected in the smaller font size of the acronym.

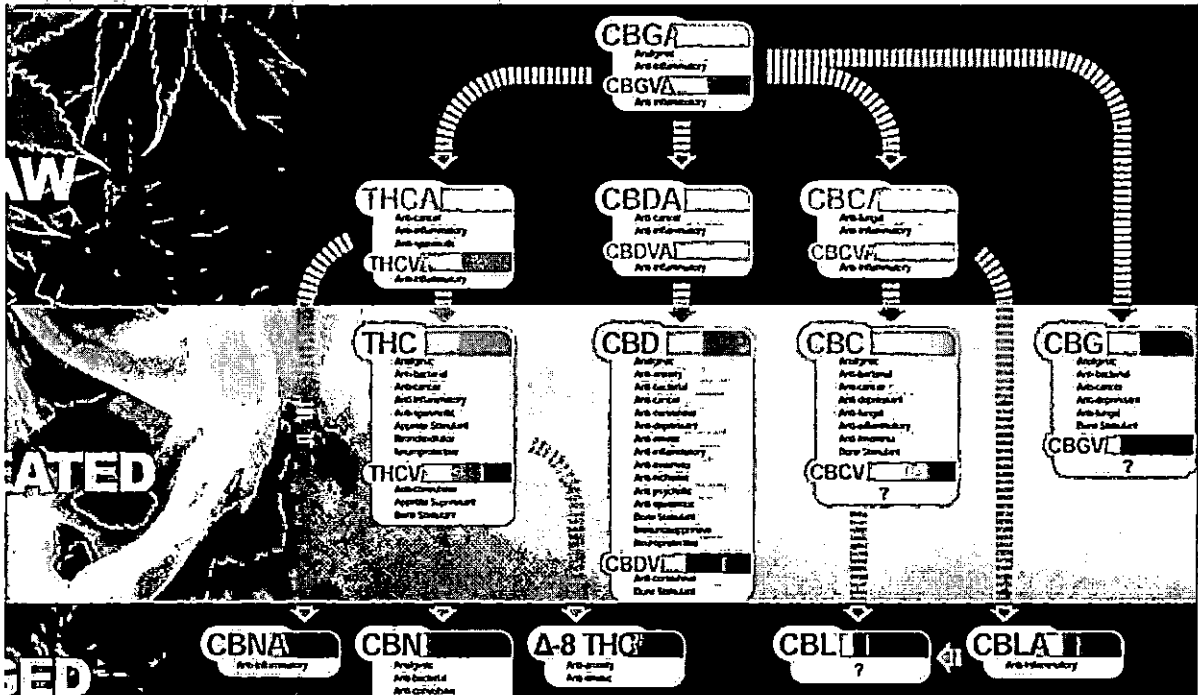
The charts do not imply that all cannabinoids listed are always detectable in the various strains currently available. Breeding has mainly focused on increasing the amount of THC. Recently CBD has come under attention and strains high in CBD are now being bred. Hopefully other strains with significant amounts of other cannabinoids will be available soon.

Since terpenoids are more volatile than cannabinoids, their presence is more closely related to freshness and temperature. The fresher and cooler the cannabis (upper part of the chart), the more the terpenoids peculiar to the strain are preserved. Therefore, as one goes down the chart, terpenoids listed in the different physical states of cannabis may or may not be available in amounts of therapeutic significance.

**Cannabinoids, Therapeutic Effects and Synergistic Terpenoids**



### Cannabinoids and Their Therapeutic Effects





releaf   
recovery  
of Stamford

## EMPLOYEE HANDBOOK

Releaf Recovery of Stamford

## EMPLOYEE HANDBOOK (Table of Contents)

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**(1) Welcome Page\_**

Dear Employee,

Welcome to Releaf Recovery of Stamford, going forward know as RR. We are excited to have you as part of our company. We are committed to quality work and superior customer service in all aspects of our business.

The success of our company is determined by providing great products and service to our patients every day. We value our employees and encourage them to make productive suggestions. We want every employee to succeed at his or her job.

This employee handbook sets forth the general administrative policies, goals, and benefits of RR.

You should use this employee handbook as a reference as you pursue your career with us, it applies to all employees. Each of the policies is dated and is current as of that date. When there is a change in a policy we will update this handbook as soon as possible. Feel free to discuss with us any questions you may have.

Sincerely,

Angela D'Amico, CEO  
Thomas J. Nicholas COO  
Releaf Recovery of Stamford



## (2) Acknowledgement Form

This employee handbook has been prepared for your information and understanding of the policies, practices, and benefits of RR. It is important to read this entire handbook. We reserve the right to make changes at any time without notice and to interpret these policies and procedures at the discretion of the company. This employee handbook supersedes all prior handbooks and previously-issued policies.

After you finish reading this employee handbook, please sign, date, and return this acknowledgement form. We ask that you do this within 7 days of your receiving this employee handbook to read.

---

I have received and read a copy of the RR Employee Handbook that outlines the goals, policies, benefits, and expectations of The Company as well as my responsibilities as an employee. I have familiarized myself, at least generally, with the contents of this handbook.

By signing below I acknowledge that it is my responsibility to have read and understood the policies outlined in this employee handbook. I understand this handbook is intended only as a general reference and is not intended to cover every situation that may arise during my employment. This handbook is not a full statement of company policy. No provision in this employee handbook is intended to create a contract between RR and any employee or to limit the rights of the employee and RR to terminate the employment relationship at any time, for any reason, not prohibited by law.

I agree to keep this handbook in my possession during my employment and to update it whenever new information is provided to me. I understand that each handbook is the property of RR and agree to return the book upon the termination of my employment.

---

(Employee's name – printed)

\_\_\_\_\_  
(Employee signature)

Date: \_\_\_\_\_

### **(3) Equal Opportunity**

RR is an Equal Opportunity Employer. This means that we will extend equal opportunity and provide employment advancement on the basis of merit within the context of its unique business environment to all Individuals without regard for race, religion, color, sex, national origin, age, disability, or veteran status.

This policy affirms that RR's commitment to fair employment and will comply with all applicable laws governing equal employment opportunity. This policy extends to all applicants and employees and to all aspects of the employment relationship.

### **(4) Employment – Classification**

As an employee of RR, you are an "employee-at-will". This means that either you or RR may choose to terminate the employment relationship at any time, with or without good cause.

Regular Full-Time is an employee who has no termination date and who is regularly scheduled to work (forty) 40 or more hours per week.

Regular Part-Time is an employee whose position has no termination date and who is scheduled to work (ten) 10 or more hours, but less than (forty) 40 hours per week.

Temporary Employee is an employee who is hired for a certain length of time and who is paid only for their hours worked. A temporary employee will not receive any benefits or be paid for holidays.

## **(5) Confidentiality**

RR requires all employees to adhere to our confidentiality agreement (31) as a condition of employment due to the possibility of being privy to information that is confidential or intended for company use only.

As the result of your employment at RR, you will acquire and have access to confidential information belonging to The Company of special and unique value. This includes such matters as the company's personnel information, suppliers, procedures, cost of merchandise, sales data, price lists, financial information, records, business plans, prospect names, business opportunities, confidential reports, customer lists and contracts, as well as any other information specific to the company.

As a condition of employment, you must agree that all such information is the exclusive property of the company, and you will not at any time disclose to anyone, except in the responsible exercise of your job, any such information whether or not it has been designated specifically as "confidential." If you are ever unsure of your obligations under this policy it is your responsibility to consult with your supervisor for clarification.

## **(6) PERSONAL INFORMATION**

It is important that the personnel records of RR be accurate at all times. In order to avoid problems with your benefit eligibility, tax liability, or contact information RR expects that employees will promptly notify your personnel representative of any change in your name, home address, telephone number, number of dependents, or any other pertinent information that may change.

## **(7) Attendance**

Employees are expected to arrive at work when they are scheduled to start and be at their workstation in DB by the scheduled start time. If you are unable to report for work for any reason, notify your supervisor before regular starting time. You are responsible for speaking directly with your supervisor about your absence if you are unable to start work at your scheduled time. You can leave a voice mail message, but another call is required to actually speak to a supervisor.

All time off must be requested in advance and should be submitted in writing as outlined in the appropriate categories, except sick leave. See Sick Leave and other

categories for specific details. RR views attendance and punctuality as two of the most important components of your job review. Excessive absences and lateness could result in disciplinary action, up to and including termination.

Excused hourly time off is limited to 5 hours a year.

#### (8) Work Hours

The normal workday is eight (8) hours, and forty (40) hours being a normal workweek. While you are generally expected to work the number of hours stated above, RR does not guarantee that you will actually work that many hours in any given day or week.

Overtime work is only performed when approved in advance by your supervisor. You are expected to work necessary overtime when requested to do so, and you will receive time and one-half regular pay for time worked exceeding forty (40) hours in any given work week.

#### (9) Lunch Period

Employees are allowed a 30-minute lunch break. Lunch breaks will be taken between the hours of 12:00pm to 12:30pm.

### **(10) Safety and Accident Rules**

Safety is a priority at RR. RR strives to provide a clean, hazard free, and safe environment in accordance with the Occupational Safety and Health Act of 1970.

As an employee, you are expected to take part in maintaining this environment. You should observe all posted safety rules; adhere to all safety instructions provided by your supervisor and use safety equipment when required. It is your responsibility to learn the location of all safety and emergency equipment as well as the safety & emergency phone numbers. A copy of the Emergency Procedures will be kept in each work area.

All safety equipment will be provided by RR/ Any problems with safety equipment should be reported to your immediate supervisor. As an employee, you have a duty to comply with the safety rules of RR assist in maintaining the hazard free environment, to report any accidents or injuries, and to report any unsafe equipment or working conditions to your supervisor.

All work related accidents are covered by Worker's Compensation Insurance pursuant to the laws of the state or states in which we operate.

(11) Use of Company Property RR, . will provide you with the necessary equipment to do your job. None of this equipment should be used for personal use, nor should any equipment be removed from The Company grounds unless approved your supervisor. This would also include company phones and two-way communication equipment.

## **(12) Using Company Computers**

Employee use of company computers should only be used for job related or approved activities. Inappropriate use of company computers, which may be defined from time to time at the discretion of RR may subject you to discipline, up to and including termination.

Inappropriate use would include, but not limited to the following:

- A) Use of company computers to send or receive messages, pictures, or computer files which are illegal, pornographic, sexist, racist, harassing, or discriminatory. If you receive such material you should notify your supervisor immediately.
- B) Loading software that is not approved in advance by management.
- C) Making illegal copies of licensed software.
- D) Using software that would provide unauthorized access to the company's computers or would disrupt our equipment in any way.
- E) Using The Company computers for personal use unless authorized by your immediate supervisor.

Any message or file created, or emailed using the company's computer is the property of the company. Employees should have no expectation of privacy in any message that is created, stored, or sent using the computers or other communication equipment belonging to RR.

## **(13) Substance Abuse Policy**

RR takes seriously the problem of drug and alcohol abuse and is committed to providing a work place free of such substances. This policy applies to all employees of RR

No employee is allowed to consume, possess, sell, or purchase any alcoholic beverage and if a MM patient their meds, on any property owned by RR, or in any vehicle owned or leased by RR. No employee may use, possess, sell, transfer or purchase any drug or other controlled substance that may alter an individual's mental or physical capacity. The exceptions are aspirin or ibuprofen based products and any other legal prescription drugs that have been prescribed to that employee which are being used as prescribed by their doctor.

RR will not tolerate employees that report for work that are impaired by or under the influence of alcohol or drugs.

In cases where the use of alcohol or drugs poses a threat to the safety of other people or property, an employee must report the violation. Employees who violate our Substance Abuse Policy will be subject to disciplinary action, up to and including termination.

It is our policy at RR to assist employees who suffer from drug or alcohol abuse. You may be eligible for a medical leave of absence or other benefits. We encourage employees with a substance abuse problem to contact your supervisor or company representative for details and help.

As a part of our company's policy to ensure a drug and alcohol free workplace, RR employees may be asked to submit to drug and alcohol testing.

Within the limits of federal and state laws, we reserve the right, at our discretion, to test for drugs and alcohol. Some such situations may include, but not be limited, to the following:

All employees offered employment with RR

Where there are reasonable grounds for believing an employee is under the influence of alcohol or drugs;

- C) As part of an investigation of any accident in the workplace in which there are reasonable grounds to suspect alcohol and/or drugs contributed to the accident;
- D) On a random basis, where allowed by statute;
- E) As a follow-up to a rehabilitation program, where allowed by statute;
- F) As necessary for the safety of employees, customers, or the general public where allowed by statute.

All tested employees will be able to receive a copy of the laboratory results that certify the results or the testing being done. It is a condition of your continued employment with RR that you comply with the Substance Abuse Policy.

## **(14) Sexual Harassment or Inappropriate Sexual Behavior**

RR will not under any circumstance tolerate conduct that may constitute sexual harassment on the part of its management, supervisors, or non-management personnel. It is our policy that all employees have the right to work in an environment free from any type of illegal discrimination, including sexual harassment. Any employee found to have engaged in such conduct will be subject to immediate discipline and possible discharge.

Sexual harassment is defined as but not limited to:

- A) Making submission to unwelcome sexual advances or requests for sexual favors as a term or condition of employment.
- B) Basing an employment decision on submission or rejection by an employee of unwelcome sexual advances, requests for sexual favors or other physical contact of a sexual nature.
- C) Creating an intimidating, hostile or offensive working environment by either by verbal actions, including using vulgar or demeaning language; or physical conduct that interferes with an employee's job performance.

If you believe that you have been the victim of sexual harassment, you should take the following steps:

- D) Discuss the matter with your supervisor or manager. If you believe your supervisor or manager to be the source or a participant in the sexual harassment, report this to another supervisor or member of management.
- E) Inappropriate sexual conduct or conversation towards other employees, vendors, or customers/patients is grounds for immediate discipline and or possible termination. RR will investigate and attempt to resolve your complaint as soon as possible. If for any reason you believe this has not occurred within a reasonable period of time, refer this problem to any other supervisor in the company, up to and including the President.

## **(15) Performance & Salary Reviews**

Each new or promoted employee will be given a job description that details the requirements and expectations of the new position. Performance reviews will

normally be conducted every six (6) months from the date you were hired with the exception of the three (3) month review at the end of your probationary period.

Employee reviews are based on job description and work performance. Wage increases will be based upon reviewing these results as well as the following: Dependability, cooperation, attitude, and any disciplinary actions that have been taken. Your supervisor will review and discuss with you your salary and your job position during your review.

### **(16) Payroll**

All employees are paid on Friday on a bi-weekly schedule. If a regular payday falls during an employee's vacation, the employee's paycheck will be available upon his or her return from vacation.

RR will deduct Federal Social Security and Income Tax from your payroll check each pay period. Group Insurance premiums (if applicable) will be deducted from your payroll check each pay period

### ***(17) Holidays***

RR, Recognizes the following holidays:

- A) New Year's Day (January 1)
- B) Memorial Day (last Monday in May)
- C) Independence Day (July 4)
- D) Labor Day (first Monday in September)
- E) Thanksgiving (fourth Thursday in November)
- F) Christmas (December 25)

When a holiday falls on a weekend, RR will designate the Friday preceding or Monday following as the observed holiday at the discretion of The Company. Regular full-time employees are paid eight (8) hours for each holiday. Regular part-time employees and temporary employees are not paid for holidays.

### ***(18) Vacation***



RR full-time employees are entitled to the following vacation schedule based on length of employment.

Less than one year, after 6 months. One (1) week of vacation  
At least one year but less than 5.... Two (2) weeks of vacation  
Over 6 years..... Three (3) weeks of vacation

Vacations should be substantially earned before they are taken. However, the President may approve an individual's request to take vacation before it is earned. If unearned vacation is taken, such vacation would be deducted from final pay should an individual separate from RR before the vacation has been earned, or before they have completed six months.

Your requested vacation time must be submitted in writing to your supervisor three weeks prior to the anticipated vacation date. Vacation time must be taken in full days only. Every effort will be made by RR to accommodate vacation requests, unless special business circumstances do not permit us to do so. Unused vacation days will not carry forward for use the following year.

### **(19) Sick Leave**

RR provides income for (sick leave) for eligible employees when that employee is away from work due to illness. Employees will be eligible for sick leave after completion of ninety (90) calendar days of service, and if they work at least forty (40) hours per week. Sick days are payable as same as the employee's regular salary.

Sick leave will be accrued at the rate of one half (1/2) day for each month of service for eligible employees. Unless approved by RR employees will be limited to five (5) sick days per year. Sick days may be used for your own illness or to care for a sick child. Sick timed cannot be cashed out upon the termination of your employment.

All sick leave used by employees will be charged against the employee's total sick leave balance. If an employee is unable to work due to illness, the employee must notify his immediate supervisor as soon as possible and by the time the employee was to report to work.

RR permits use of available sick days for absence due to the birth or adoption of a child to an employee.

Industrial accidents and illness are covered by Worker's Compensation Insurance pursuant to the requirements of the laws in the various states in which RR operates. The sick leave policy outlined above does not apply to those illnesses or injuries that are covered by a worker's compensation policy.

***(20) Maternity Leave***

RR employees who work a minimum of thirty (30) hours per week and have been employed by RR for twelve (12) months are allowed up to six (6) weeks of unpaid leave after they have given birth to or in conjunction with the adoption of a child. Additional time may be allowed under unusual circumstances and with the permission of your supervisor.

***(21) Funeral Leave***

RR allows two (2) days off each year with pay for a death in your immediate family. Immediate family includes parents, spouse, children, brothers, sisters, mother-in-law, father-in-law, grandparents, or grandchildren. For unusual circumstances you may request up to two (2) additional days without pay, these additional days must be approved by your supervisor.

Funeral leave for the death of anyone other than an immediate family member will require prior approval from your immediate supervisor. Funeral leave for such a death is limited to two (2) days and will be unpaid.

***(22) Jury Duty***

RR will provide time off work without pay for any employee who has been assigned jury duty. Please provide your immediate supervisor with a copy of the jury summons as soon as possible after you receive it.

***(23) Time Off For School Conferences***

In accordance with laws in our state, unpaid time off, up to a maximum of 12 hours each year is available to all employees for attending school conferences and activities, and preschool activities which cannot be scheduled during non working hours. Employees must meet some work eligibility requirements. Please see your supervisor for details concerning this policy.

***(24) Time Off For Voting***

At RR we encourage our employees to vote, and you will be permitted the necessary time off to do so. You will be allowed a reasonable period of time to vote in case you are unable to vote before or after your regular working hours.

***(25) Military Service***

RR will allow time off work without pay for employees in the National Guard or Military Reserves who take approved leave for training purposes. Employees may also receive pay for any accrued vacation time for this period if they choose.

**(26) Group Insurance**

RR does not offer Health Insurance

***(27) Worker's Compensation***

Employees who are injured while on their job at RR are covered by Worker's Compensation Insurance. It is your responsibility to notify your supervisor immediately of any injuries you sustain while on the job at RR

Injured employees should seek immediate medical attention. All medical expenses related to the treatment of an injury sustained while on the job, are paid in full directly to the medical providers. After a specified waiting period you may be eligible for disability payments as set forth by the laws in your state.

The Worker's Compensation plan is administered by a separate insurance company who will be notified by your company representative should you become eligible.

***(28) Educational Assistance***

RR will pay for courses which are directly related to or improving your present job skills or that will assist you in preparing for more responsibilities. Decisions of classes or courses are decided by RR and are totally discretionary. Only full-time employees are eligible for tuition assistance.

Reimbursement of educational expenses will not begin until you have completed six (6) months of full-time employment. To qualify for reimbursement, the employee must successfully complete the course with a "B" grade or better. The maximum amounts of courses taken and reimbursements made will be determined by a company representative. Contact your company representative for further details.

However, in the event the employee leaves within 8 months of taking the course, if DB has reimbursed the classes, monies are due back to DB.

### **(29) Layoff And Recall**

There may occasions when it becomes necessary for management to reduce staff at RR due to certain business conditions beyond our control. On such occasions we will make decisions on the basis of our business needs related to employee job functions and their performance. Your supervisor or other company official will speak to you personally about your employment status.

### **(30) Non Disclosure Agreement**

#### **EMPLOYEE INTELLECTUAL PROPERTY AND INVENTIONS ASSIGNMENT AGREEMENT (INCLUDING NONDISCLOSURE)**

This employee intellectual property and inventions assignment agreement between Employee, an individual (the "Employee") and RR a State of Connecticut Limited Liability Company (the "Company")

IN CONSIDERATION of the Employee's continuing employment with the Company, as well as the parties agree as follows:

#### **1. CONFIDENTIAL INFORMATION.**

In conjunction with the Employee's employment, the Company may (but is not required to) disclose to the Employee, or the Employee may develop or learn, confidential information.

"Confidential Information" means:

(a) any Company intellectual property, information, or trade secrets (whether or not specifically labeled or identified as confidential), whether provided orally, in writing, or by any other media, that was or will be disclosed to, developed, or learned by the Employee, and that relates to the business, products, services, research, or development of or by the Company or its suppliers, distributor's, investors, partners, and other business associates, and that has not become publicly known. Confidential Information includes:

- (i) internal business information (including information relating to strategy, staffing, business, financial data, training, marketing, promotional and sales plans and practices, costs, bidding activities and strategies, rate and pricing structures, and accounting and business methods);
  - (ii) identities of, negotiations with, individual requirements of, specific contractual arrangements with, and information about the Company's suppliers, distributors, customers, investors, partners, and other business associates, their contact information, and their confidential information;
  - (iii) manufacturing parameters, material specifications, design specifications, design processes, technical drawings, prototypes, testing procedures and technical data, specific program information, trade or industrial practices, engineering practices and methods, techniques, computer programs, formulae, systems, research, records, reports, manuals, documentation, customer and supply lists, data and databases relating to those, and technology and methodology regarding specific projects; and
  - (iv) inventions, whether or not patentable, original works of authorship, trade secrets, know how, other intangible property protectable under federal, state, or foreign law that is not generally available to the public or published by the Company, other information concerning the Company's or its customers' actual or anticipated products or services, business, research, or development, or any information that is received in confidence by or for the Company from any other person, and any other information that was or will be developed, created, or discovered by or on behalf of the Company, or that became or will become known by, or was or is conveyed to the Company, that has commercial value in the Company's business ("Intellectual Property"); and
- (b) all notes, analyses, compilations, studies, summaries, and other material, whether provided orally, in writing, or by any other media, that contain or are based on all or part of the information described in subsection (a) (the "Derivative Materials").

## 2. OBLIGATION TO MAINTAIN CONFIDENTIALITY.

- (a) Confidentiality. At all times during employment, the Employee shall hold in strictest confidence, and not use, except for the benefit of the Company, or to disclose to any person, firm, or corporation without the prior written authorization of the Board of Directors and/or Owners of the Company, any of the Company's Confidential Information.
- (b) Personal. Regarding the nature of employment in regards to rank or status of employee, personal information of owners or board members may be acquired by employee or made privy to. This information must be held in the utmost confidential nature by the employee. This information should never be discussed with patients, employees, customers or vendors.

- (c) Term. The Employee shall maintain the confidentiality and security of the Confidential Information indefinitely. However, to the extent that the Company has disclosed information to the Employee that constitutes a trade secret under law, the Employee shall protect that trade secret for as long as the information qualifies as a trade secret.

### 3. EXCLUSIONS.

The obligations and restrictions of this agreement do not apply to that part of the Confidential Information that the Employee demonstrates:

- (a) was or becomes generally publically available other than as a result of a disclosure by the Employee in violation of this agreement;
- (b) was or becomes available to the Employee on a non confidential basis before its disclosure to the Employee by the Company or a Company Representative, but only if:
- (i) the source of such information is not bound by a confidentiality agreement with the Company or is not otherwise prohibited from transmitting the information to the Employee by a contractual, legal, fiduciary, or other obligation; and
- (ii) the Employee provides the Company with written notice of such prior possession either (A) before the execution and delivery of this agreement or (B) if the Employee later becomes aware (through disclosure to the Employee) of any aspect of the Confidential Information as to which the Employee had prior possession, promptly on the Employee so becoming aware; or
- (c) is requested or legally compelled (by oral questions, interrogatories, requests for information or documents, subpoena, civil or criminal investigative demand, or similar process), or is required by a regulatory body, to be disclosed.

### 4. RETURN OF PROPERTY.

On the termination of the Employee's employment with the Company, the Employee shall promptly (and no later than 5 days after termination):

- (a) return all Confidential Information to the Company; and
- (b) destroy all Derivative Material and within 5 days of this destruction, provide a written certificate to the Company confirming this destruction.

If her employment is terminated or the Company so requests, the Employee shall sign and deliver to the Company the certification attached as Exhibit A.

### 5. THIRD-PARTY INFORMATION.

The Employee recognizes that the Company has received and in the future will receive confidential or proprietary information from third parties, subject to a duty on the Company's

part to maintain the confidentiality of such information and to use it only for certain limited purposes. The Employee also recognizes that the Company may have provided and will provide in the future confidential or proprietary information to third-parties, subject to a duty on the third-party's part to maintain the confidentiality of such information and to use it only for certain limited purposes. During the term of her employment and afterwards, the Employee owes the Company and such third parties a duty to hold all such confidential or proprietary information in the strictest confidence and not to disclose it to any person, firm, or corporation except as necessary in carrying out the Employee's work for the Company (consistent with the Company's agreement with such third party). On termination and afterwards, the Employee owes a duty to the Company to not disclose such information for the benefit of anyone including such third party (unless provided for by the Company's agreement with such third party) without the prior written consent of the Company. Any such information will be *Employee Intellectual Property* and considered Confidential Information for purposes of this agreement.

#### 6. FORMER EMPLOYER OR THIRD PARTY CONFIDENTIAL INFORMATION.

The Employee understands that it is the Company's policy to maintain the rights of any party with which the Employee has a confidentiality or proprietary rights agreement. During employment with the Company, the Employee may not improperly use or disclose any proprietary information or trade secrets of any former or concurrent employer or other person or entity or bring onto the premises of the Company any unpublished document or proprietary information belonging to that employer, person, or entity unless the employer, person, or entity consents in writing. The Employee attests they have no existing obligations to others that are inconsistent with any of the provisions in this agreement at the time of signing.

#### 7. NOTIFICATIONS.

The Employee hereby authorizes the Company to notify others, including customers of the Company and any future or prospective employers of the Employee, of the terms of this agreement and each party's rights and obligations in it.

#### 8. OWNERSHIP RIGHTS.

The Employee acknowledges that the Confidential Information is and will be the Company's sole property, even if suggestions made by the Employee are incorporated into the Confidential Information. The Employee obtains no rights by license or otherwise in the Confidential Information under this agreement. The Employee may not use the Confidential Information as a basis on which to develop or have a third party develop a competing or similar undertaking.

#### 9. CHOICE OF LAW; ATTORNEYS' FEES; EQUITABLE RELIEF.

- (a) Choice of Law. The laws of the state of Connecticut govern this agreement (without giving effect to its conflicts of law principles).
- (b) Choice of Forum. Both parties consent to the personal jurisdiction of the state and federal courts in Fairfield County, Connecticut.

- (c) **Attorneys' Fees.** If either party employs attorneys to enforce any rights arising out of or relating to this agreement, the losing party shall reimburse the prevailing party for its reasonable attorneys' fees and costs.
- (d) **Equitable Relief.** The Employee's breach of this agreement will cause irreparable harm to the Company and monetary damages may not be a sufficient remedy for an unauthorized disclosure of the Confidential Information. If the Employee discloses the Confidential Information in violation of this agreement, the Company may, without waiving any other rights or remedies and without posting a bond or other security, seek an injunction, specific performance, or other equitable remedy to prevent competition or further disclosure, and may pursue other legal remedies.

#### 10. AMENDMENTS.

No amendment to this agreement will be effective unless it is in writing and signed by a party or its authorized representative.

#### 11. ASSIGNMENT AND DELEGATION.

- (a) **No Assignment.** The Employee may not assign any of her rights under this agreement, except with the prior written consent of the Company. All voluntary assignments of rights are limited by this subsection.
- (b) **No Delegation.** The Employee may not delegate any performance under this agreement, except with the prior written consent of the Company.
- (c) **Enforceability of an Assignment or Delegation.** If a purported assignment or purported delegation is made in violation of this section 12, it is void.

#### 12. COUNTERPARTS; ELECTRONIC SIGNATURES.

- (a) **Counterparts.** The parties may execute this agreement in any number of counterparts, each of which is an original but all of which constitute one and the same instrument.
- (b) **Electronic Signatures.** This agreement, agreements ancillary to this agreement, and related documents entered into in connection with this agreement are signed when a party's signature is delivered by facsimile, email, or other electronic medium. These signatures must be treated in all respects as having the same force and effect as original signatures.

#### 13. SEVERABILITY.

If any provision in this agreement is, for any reason, held to be invalid, illegal, or unenforceable in any respect, that invalidity, illegality, or unenforceability will not affect any other provisions of this agreement, but this agreement will be construed as if the invalid, illegal, or



unenforceable provisions had never been contained in this agreement, unless the deletion of those provisions would result in such a material change that would cause completion of the transactions contemplated by this agreement to be unreasonable.

#### 14. NOTICES.

(a) **Writing; Permitted Delivery Methods.** Each party giving or making any notice, request, demand, or other communication required or permitted by this agreement shall give that notice in writing and use one of the following types of delivery, each of which is a writing for purposes of this agreement: personal delivery, mail (registered or certified mail, postage prepaid, return-receipt requested), nationally recognized overnight courier (fees prepaid), facsimile, or email.

(b) **Addresses.** A party shall address notices under this section 15 to a party at the following addresses:

If to the Company:

Angela D'Amico,

Releaf Recovery, LLC

Email: [angela@ccc-ct.com](mailto:angela@ccc-ct.com)

If to the Employee:

(c) **Effectiveness.** A notice is effective only if the party giving notice complies with subsections (a) and (b) and if the recipient receives the notice.

#### 15. WAIVER.

No waiver of a breach, failure of any condition, or any right or remedy contained in or granted by the provisions of this agreement will be effective unless it is in writing and signed by the party waiving the breach, failure, right, or remedy. No waiver of any breach, failure, right, or remedy will be deemed a waiver of any other breach, failure, right, or remedy, whether or not similar, and no waiver will constitute a continuing waiver, unless the writing so specifies.

#### 16. ENTIRE AGREEMENT.

This agreement constitutes the final agreement of the parties. It is the complete and exclusive expression of the parties' agreement with respect to the subject matter of this agreement. All prior and contemporaneous communications, negotiations, and agreements between the parties relating to the subject matter of this agreement are expressly merged into and superseded by this agreement. The provisions of this agreement may not be explained, supplemented, or qualified by evidence of trade usage or a prior course of dealings. Neither party was induced to enter this agreement by, and neither party is relying on, any statement, representation, warranty, or agreement of the other party except those set forth expressly in this agreement. Except as set forth expressly in this agreement, there are no conditions precedent to this agreement's effectiveness.

#### 17. HEADINGS.

The descriptive headings of the sections and subsections of this agreement are for convenience only, and do not affect this agreement's construction or interpretation

18. **EFFECTIVENESS.** This agreement will become effective when all parties have signed it. The date this agreement is signed by the last party to sign it (as indicated by the date associated with that party's signature) will be deemed the date of this agreement.

19. **NECESSARY ACTS; FURTHER ASSURANCES.**

The Employee, the Company, and the Company's officers and directors shall use all reasonable efforts to take, or cause to be taken, all actions necessary or desirable to consummate and make effective the transactions this agreement contemplates or to evidence or carry out the intent and purposes of this agreement.

### ***(31) Termination Of Employment***

You, as an at-will employee, may choose to end your employment with RR at anytime, with or without good cause. And RR has the right to terminate your employment at anytime, with or without good cause.

Any employee who terminates his or her employment (or is terminated by) RR shall return all files of any kind, keys, tools, and any other materials that are the property of RR

Final settlement of an employee's pay will not be made until all property owned by RR is returned in satisfactory condition. The cost of replacing any items not returned will be deducted from the employee's final paycheck.

We have supplied a separate copy of the acknowledgement form on below. Please be sure to sign, date, and return this form to your supervisor after reading your employee handbook. Thank you, we look forward to having you as an employee.

### ***Acknowledgement Form***

This employee handbook has been prepared for your information and understanding of the policies, practices, and benefits of RR it is important to read this entire handbook. We reserve the right to make changes at any time without notice and to interpret these policies and procedures at the discretion of the company. This employee handbook supersedes all prior handbooks and previously-issued policies.

After you finish reading this employee handbook, please sign, date, and return this acknowledgement form. We ask that you do this within 7 days of your receiving this employee handbook to read.

---

I have received and read a copy of the RR Employee Handbook that outlines the goals, policies, benefits, and expectations of The Company as well as my responsibilities as an employee. I have familiarized myself, at least generally, with the contents of this handbook.

By signing below I acknowledge that it is my responsibility to have read and understood the policies outlined in this employee handbook. I understand this handbook is intended only as a general reference and is not intended to cover every situation that may arise during my employment. This handbook is not a full statement of company policy. No provision in this employee handbook is intended to create a contract between RR and any employee or to limit the rights of the employee and RR to terminate the employment relationship at any time, for any reason, not prohibited by law.

I agree to keep this handbook in my possession during my employment and to update it whenever new information is provided to me. I understand that each handbook is the property of RR and agree to return the book upon the termination of my employment.

---

(Employee's name – printed)

---

(Employee signature)

Date: \_\_\_\_\_



















































































































Section D - Number 1 continued:

**YOUR TRUSTED SOURCE  
FOR QUALITY  
MEDICAL CANNABIS  
PRODUCTS**

- Tinctures
- Edibles
- Vaporizers
- Concentrates
- Flowers
- Breath Strips
- Topicals
- And More!



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South Windsor, CT, 06074  
(203)-362-8461



[www.releafrecovery.com](http://www.releafrecovery.com)

INFORMATIONAL BROCHURE ON  
MEDICAL MARIJUANA

## About Medical Marijuana

Medical marijuana (or medical cannabis) refers to the use of marijuana as a physician prescribed therapy to reduce the pain or discomfort associated with some medical conditions or to lessen the side effects of some traditional medical treatments.

Medical marijuana is used for a variety of ailments and conditions, including:

- Easing nausea and vomiting
- Stimulating appetite in chemotherapy and/or AIDS patients
- Reducing eye pressure in glaucoma patients
- Managing chronic pain & illness

## Did You Know?

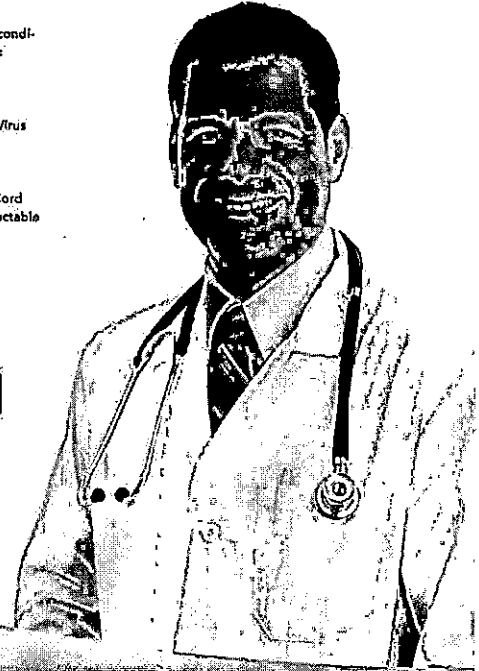
CBD (Cannabidiol) produces many of the medical benefits of cannabis, but suppresses or balances the psychoactive effects of THC. It is a powerful preventative curative medicine for some of the most serious diseases plaguing humankind such as cancer and epilepsy, it's also a great alternative for anybody who wants access to the therapeutic effects of cannabis without its psychoactive properties.

## Connecticut's Medical Marijuana Program

Under Connecticut's program, the following conditions qualify for medical marijuana treatment:

- Cancer
- Glaucoma
- Positive Status for Human Immunodeficiency Virus or Acquired Immune Deficiency Syndrome
- Parkinson's Disease
- Multiple Sclerosis
- Damage to the Nervous Tissue of the Spinal Cord with Objective Neurological Indication of Intractable Spasticity
- Epilepsy
- Cachexia
- Wasting Syndrome
- Crohn's Disease
- Post-Traumatic Stress Disorder.

Visit [www.ct.gov/dcp/](http://www.ct.gov/dcp/) for more info!



[www.releafrecovery.com](http://www.releafrecovery.com)





# UNDERSTANDING CANNABIS

## Understanding Names and Genetics:



### SATIVA

Energetic  
Stimulating  
Cerebral  
Uplifting  
Creative  
Focus  
Fights depression

VS.



### INDICA

Couch-Lock  
Appetite  
Body-High  
Deep Relaxation  
Sleep-Aid  
Pain + Nausea Relief  
Stress + Anxiety Relief



**HYBRID strains are a mix between Sativa + Indica strains**

## Understanding Standard Weights:

*Your pharmacist will use these references of standard weights:*









Gram (1 Gram)	1/8 Ounce (3.5 Grams)	1/4 Ounce (7 Grams)	1/2 Ounce (14 Grams)
Ounce (28 Grams)	1/4 Pound (112 Grams)	1/2 Pound (224 Grams)	Pound (448 Grams)



# WHAT ARE CANNABINOIDS?

## What Exactly Is A Cannabinoid?

Cannabis contains over 70 cannabinoids that interact with receptors throughout your body. Some bind selectively to certain receptors making them candidates for specific medical uses.

- 
**Cannabidiol** - With respect to the medical potential of the cannabis, CBD may hold the most promise for many serious conditions. CBD is a non-psychoactive cannabinoid that is believed to reduce the psychoactive effects of THC. Smokers of cannabis with a higher CBD/THC ratio are less likely to experience anxiety. CBD may also inhibit cancer cell growth.
- 
**Tetrahydrocannabinol** - The most abundant and widely known cannabinoid in cannabis, THC is responsible for the main psychoactive effects patients are familiar with. The compound is a mild analgesic, and cellular research has shown the compound has antioxidant activity. THC is believed to interact with parts of the brain normally controlled by the endogenous cannabinoid neurotransmitter anandamide.
- 
**Tetrahydrocannabinolic Acid** - The main constituent in raw cannabis. THCA converts to D9-THC when burned, vaporized, or heated for a period of time at a certain temperature. THCA holds much of the anti-inflammatory properties, as well as anti-proliferative (inhibiting the cell growth in tumors/cancer cells) as well as anti-spasmodic (suppresses muscle spasms.)
- 
**Cannabigerol** - A non-psychoactive cannabinoid, CBG has antibacterial effects, anti-inflammatory, and anti-cancer properties. CBG can alter the overall effects of Cannabis.
- 
**Cannabinol** - A mildly-psychoactive cannabinoid that comes about from the degradation of THC, there is usually very little CBN in a fresh plant. CBN potentiates the effects of THC and synergistically adds what has come to be known as the "couch-lock" effect. CBN may also cause drowsiness.
- 
**Cannabichromene** - Research suggests that CBC includes: anti-inflammatory, analgesic, bone stimulant, and anti-cancer properties.
- 
**Tetrahydrocannabivarin** - Found in largest quantities in Cannabis varieties indigenous to central Africa, like certain phenotypes from Malawi. It is currently being researched as a treatment for metabolic disorders including diabetes, as well as serving as a potential appetite suppressant.
- 
**Cannabidiolic Acid** - Similar to THCA, is the main constituent in cannabis that has elevated CBD levels. THCA and CBDA hold most of the anti-inflammatory properties that cannabis has to offer.



# INFORMATION PACKET FOR PATIENTS & CAREGIVERS



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COUNT ON



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APPROACH



ADAPTED TO YOUR  
TREATMENT PLAN

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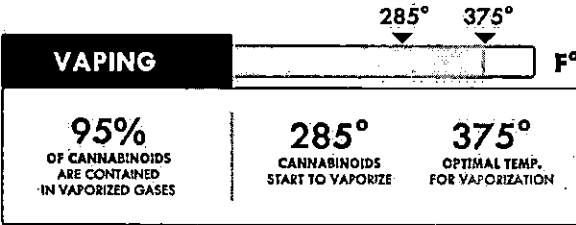
379 Quarry Brook Dr., South Windsor, CT  
**(203)-362-8461**

BEGIN LEARNING



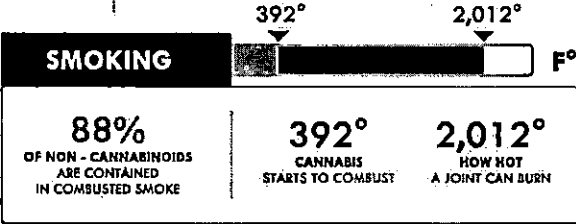
# VAPING vs. SMOKING


Vaping (or vaporization) reduces the amount of harmful toxins when inhaled that are caused from combustion (smoking). Instead, patients inhale vaporized gases rather than smoke, while also inhaling important active cannabinoids in cannabis.







VS.

Smoking (or combustion) is the act of heating up the chemical compounds in cannabis (cannabinoids) to a temperature that results in smoke being released. However, combustion results in less cannabinoids inhaled along with more toxins taken into the body.



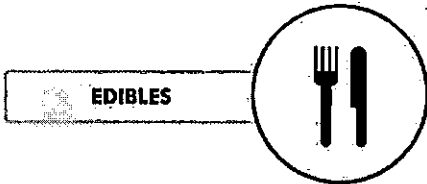
  
We do **NOT** recommend smoking instead of vaporizing medicinal cannabis.

- BENEFITS FROM VAPORIZING**
-  LESS HARM TO LUNGS
  -  FEWER TOXINS
  -  FEWER SIDE EFFECTS
  -  MORE EFFICIENT



# DELIVERY METHODS

There are many ways to ingest medical cannabis, and patients may find that one method is more effective than another for their specific needs. The effects vary with each method, sometimes affecting the length of time it takes for the medicine to take effect, or the length of time that it remains effective. Each patient should find which manner is best for them.



Cannabis can be infused into butter or oil that is then cooked in food. Edibles usually take longer to take effect, often 20 minutes to an hour or more. Doses can be difficult to judge, so start slow and wait at least an hour to assess the effects so you do not over-medicate.

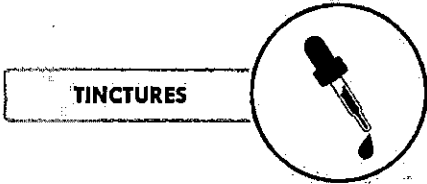
**THINGS TO REMEMBER FOR EDIBLES:**

**SUGGESTED DOSAGES FOR EDIBLES:**

- 1 START SLOW**  
Start with 1 serving, a low-dose or single serving until you know how it will affect you.
- 2 WAIT**  
Edibles can take up to 2 hours or longer to take full effect. Wait before increasing your dose.
- 3 DON'T MIX**  
Do not mix edibles with alcohol or other controlled substances!
- 4 SAFETY**  
Keep away from children & pets. Store your medicine in original child-proof packaging.



- NEW CONSUMER**  
1-5 mg
- OCCASIONAL CONSUMER**  
5-10 mg
- FREQUENT CONSUMER**  
10-15 mg



A tincture is a concentrated form of cannabis in an alcohol solution. They are very concentrated and require careful dosage levels, starting out small and waiting to feel the effects before adding more. They can be taken under the tongue or mixed into water or other beverages.



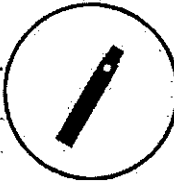
## DELIVERY METHODS

### TOPICALS



Topical cannabis medicines are applied directly to the skin. We provide a wide array of topical cannabis products that include lotions, salves, balms, sprays, oils, and creams.

### VAPORIZERS



A vaporizer is a device that is able to extract the therapeutic ingredients in the plant material (cannabinoids) at a much lower temperature than required for burning. This allows patients to inhale the active ingredients as a vapor and spares them the irritating effects of smoking.

### SMOKING



(Not recommended) - Cannabis can be smoked through a pipe, rolled into a joint, or smoked using a water pipe. Effects can be felt within minutes, and depending on the patient, strain, cannabinoid content, etc. the effects wear off fully within 90 minutes to 4 hours.



Regularly smoking any plant material can have a negative impact and Releaf Recovery recommends patients use vaporizers for medicine when possible (see next page).



# ADDICTION SIGNS



## 10 Common Signs Of Marijuana Addiction

Signs of addiction can vary from person to person. If you are concerned that you or a loved one may be addicted to marijuana, please consult your physician or a local substance abuse program or drug hotline.

1. Tolerance
2. Feeling withdrawal symptoms
3. Loss of control over use
4. Spending too much time getting high
5. Smoking to relax
6. Lack of responsibility
7. Smoking despite the consequences
8. Smoking to escape reality
9. Not able to cut down
10. Ignoring consequences



The Substance Abuse and Mental Health Services Administration (SAMHSA) is pleased to provide this online resource for locating drug and alcohol abuse treatment programs:  
[www.samhsa.gov](http://www.samhsa.gov)

For advice you may call the Referral Helpline:  
1-800-662-HELP (English & Español)  
1-800-487-4889 (TTY)



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### Nutritional Supplementation



We provide our patients with information on and access to highly discounted quality nutritional supplementation to aid in their path to wellness. We provide your individualized plan and easy access to supplements with benefits vital to your health.



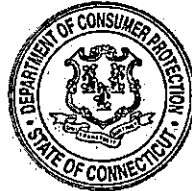
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(203)-362-8461

CONTINUE LEARNING >



# CT MEDICAL MARIJUANA PROGRAM



Connecticut's Legislature is "designed to enable seriously ill patients to engage in the palliative use of marijuana while preventing marijuana from being misused or diverted from its medical purpose. The law provides immunity from state criminal and civil penalties for physicians, patients, caregivers, dispensaries and producers who act responsibly in accordance with the law."



More information can be found by contacting the DCP:  
Phone: (860)-713-6100 or via Email: [dcp.mmrp@ct.gov](mailto:dcp.mmrp@ct.gov)

## Medical Marijuana And Legal Concerns



Legal issues surrounding medical marijuana are very complex since different laws and guidelines exist at federal, state, and local levels.

*It is your responsibility as a patient to know the laws in your area, and to abide by them.*



Section D - Number 1, continued:

**Additional Marketing and Educational Collateral**

## Active Components of Cannabis

Marijuana has several active Chemical Compounds, or 'Cannabinoids'  
 The human body is naturally "Pre-Programmed" with Cannabinoid Receptors  
 Up to 80 Cannabinoids have been discovered so far. Not all Active Components are listed here

**THC- TetraHydroCannabinol** (notably Delta-9) is the Psycho-Active compound, which causes the Euphoric, or "High" feeling that is generally associated with using Marijuana by most patients. THC has Analgesic (Pain Relieving) effects, Neuro-Protective and Anti-Inflammatory qualities; can help stimulate Appetite, relieve Nausea, and more.

**CBD- Cannabidiol** is another physiologically active compound within Cannabis which reduces the psychoactive effects of THC. With qualities ranging from Anti-Inflammatory, to Anti-Anxiety, Anti-Arthritic, Analgesic, Anti-Convulsive and more. CBD works similarly to THC compounds, but has actually been shown to modulate it's Psycho Active effects. Strains rich in CBD are less common than THC rich strains, and many are just now being developed and released specifically for the Medical Marijuana Community as an alternative to Psycho Active medication

**THCA and CBDA** - Anti-Inflammatory agents only available when consumed orally, and the plant has not been heated beforehand

**CBN** - A degradation product of THC, and generally isn't found in fresh flowers

### Terpenes

Terpenes modify the effects of THC, and impact the Medicinal Effect of the strain  
 They are also responsible for some of the smell and taste characteristics

**Pinenes:** Pine odor, bronchodilator that opens the lungs to more THC absorption. It also increases focus, self satisfaction, and energy

**Caryophyllene:** Sweet, woody, clove taste responsible for anti-inflammatory and neuroprotective effects through CB2 receptor activation

**Linalool:** Floral smelling, is believed to provide some anti-cancer effects and is known to cause severe sedation

**Limonene:** Has a citrus scent and may possess anti-cancer, anti-bacterial, anti-fungal, and anti-depression abilities

**Myrcene:** Effects intake of THC by brain cells to increase the overall effects of THC when ingested together

### Common Side Effects

Users of Cannabis have reported these and similar side effects, which generally take 1-3 Hours to wear off  
 In some cases, especially with Overuse, these effects can last up to 10 Hours or more and can be very intense.

Short Term Memory Disruption  
 Slowed Reaction Time  
 Anxiety / Paranoia

Altered Perception  
 Increased Appetite  
 Tiredness/Laziness

Increased Heart Rate  
 Dry and/or Mouth (Cotton-Mouth)  
 Euphoria

\*Take caution, and start with SMALL AMOUNTS when determining YOUR appropriate Cannabis usage  
 Over-using with Natural Cannabis has NOT proven to be lethal

Special Thanks to The Werc Shop for providing information on "Active Components of Cannabis" to Cannasenseurs Inc.  
 Chemical Content of Cannabis is determined by Liquid and/or Gas Chromatography  
 To learn more, check out [TheWercShop.com](http://TheWercShop.com)  
 An Independent Testing Laboratory

 **The Werc Shop**  
 Moving Sustainable Medicines Forward™

CONTENT LABELING  
 SAFETY SCREENING  
[TheWercShop.com](http://TheWercShop.com)

Look for the CC to know your cannabis is tested.



## Understanding Names and Genetics

*Strains can be named anything, for any reason, but are usually related to the: Genetic Parents, Overall Effects, Smell, Taste, Yield, Breeder, Origin, Growth Medium "Hydro/Organic", "Indoor/Outdoor", and/or Appearance*

- Cannabis strains can be interbred or **Crossed**
- Nature has evolved several **Landrace** strains, which are the original building blocks for all modern strains.
- Dominant** and **Recessive** traits are passed down to the offspring seeds  
Establishing a plants **Genotype** (just like you and your parents)
- Breeders then raise and select whichever offspring incorporate the **Phenotypic Expressions** they desire. If you have brothers or sisters you can see how the same parents can produce multiple offspring that reflect different traits
- Offspring that produce a combined effect superior to either parent is said to show **Hybrid Vigor**
- Breeders attempt to Stabilize strains for production and reproduction through a complex "Back-Crossing" process. If they cannot, those Genetics will only be available by taking cuttings from the original plant, called Clones  
Clones can be taken from almost any plant, and are a very common way to reproduce or preserve genetics

*For Example: A breeder develops a strain he calls 'Lemon Kush' by Crossing a Landrace strain from the 'Kush' region of Pakistan called Pakistani Kush (Indica) with a Thai Landrace, (which possessed a lemon taste and smell) called Lemon Thai (Sativa) This breeder selected offspring that mostly incorporated Indica dominant traits of Pakistani Kush, but that also possessed very strong lemon smell and taste, and some Sativa characteristics. The other versions or phenotypes of this breeders 'Lemon Kush' include a Sativa Dominant strain which he calls Lemon Zing, as well as a Hybrid strain he calls Lemonade (Male)(Pakistani Kush Landrace) Pakistani Kush ♂ (Female)(Thai Landrace) Lemon Thai*

Lemon Kush      Lemonade      Lemon Zing

## KEEPING TRACK

*It is important to know which Strains work the best for you*

This section will help you remember your Personal Preferences (along with any that don't work for you) just place the stickers from your Medicine Containers (or write the names) in the spaces below

My Preferences

My Dislikes


### Standard Weight

*Here are the standard weights your Bud-Tender will use*

Gram	1/8 Ounce	1/4 Ounce	1/2 Ounce	Ounce	1/4 Pound	1/2 Pound	Pound
1 Gram	3.5 grams	7 grams	14 grams	28 grams	112 grams	224 grams	448 grams

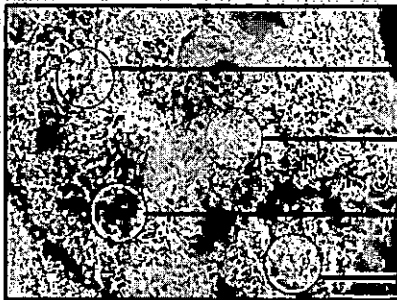
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## Quality Control

### NOT ALL CANNABIS IS CREATED EQUALLY

- The Names/Genetics of a strain only determine the effects that strain will have  
Not the quality or potency of the final product
- The most important factor in the overall quality is the **Grower and their Process**
- The same strain, grown in different conditions will produce  
very different results
- Some Growers and Collectives have turned to Laboratories that can test their  
Marijuana for **Chemical Content**, as well as **Cleanliness** using  
**Gas and or Liquid Chromatography**
- Patients can then see the results in the Bud-Room, and factor them into their  
decision making process

These tests show how much of a chemical compound is present and/or available, and equally importantly, that your medicine is *Clean*. As research in this field continues, patients can be aided in determining what will work the best for them, based on actual Chemical properties. This is a huge step towards *Legitimizing Marijuana as a Medicine*. While it is very important to know these values, there are other variables that determine potency and effect including factors like your *Personal Body Chemistry*. Think of the test results not only as an excellent analysis but also as an overall reflection of the grower and their process



Well Manicured- unnecessary plant material trimmed

Trichomes- main production site of THC(s)/CBD(s)

Mold/Bacteria/Pest Free

Properly Dried and Cured

- Look for an abundance of Trichomes, (shaped like tiny Crystals)
- These Glands along with the plants Oils and Resins, are where the majority of the THC(s) and CBD(s) are formed, mainly in the flower buds (more so than the leaf material) of female plants, in order to catch pollen from Male plants as it goes through the reproductive/flowering process. If no pollen is present the female plant will devote more of its energy towards oil and resin gland production, whereas if pollen does become present, and the plant devotes its energy to producing seeds. Thus, *seedless* or *sin-semilla* flowers generally contain more active Cannabinoids
- Properly Dried and Cured Cannabis should feel lightly moist, even sticky but NOT soaking wet
- Bud Density will vary depending on strain and growth factors.  
In general, a dense, hearty flower insinuates a healthy, well grown plant
- Smell should be clean and crisp, (Regardless of Strain Type/Fragrance)  
Not that of Mildew or Alfalfa (Hay), Chemical Pesticides, or Fertilizers
- Cannabis should burn cleanly and reduce to a thin gray ash. If it turns thick, black, and smells like chemicals, they might still be present in the plant
- Most Cannasseurs agree, it seems best **Not** to ingest Contaminated Cannabis

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## Ways To Medicate

**Marijuana does not have to be smoked to obtain its Medicinal Value**

*Consult your Physician before starting any new medication*

*Especially if you have pre-existing conditions (Heart, Lungs, Kidney, Etc.)*

**Smoking-** Cannabis is generally smoked either in plant or concentrate form (Kief, Hashish, Oils, Waxes, Goo, Etc.) with specially designed Pipes, Bongs, Water Bubblers and other devices, or rolled, with special rolling paper into joints, Blunts, Cones, Etc.

**Inhalation of Smoke/Vapor** has the fastest effect on your body

\* Known Carcinogens are released by burning plant material and/or paper

\* Germs and Bacteria can accumulate on the resins left behind by smoke

\* Make sure to keep all glass pieces clean using an approved/safe product (available at most smoke shops)

\* A solution of rubbing alcohol and salt (or rice) can be used as well, remember to rinse thoroughly with water

\* Butane gas is also slightly toxic

**Concentrates-** made by separating THC/CBD from the plant material, then refining and compressing it or "Concentrating" it into another form. This is done with a variety of processes, from 'bubble bags and ice', to 'high tech CO2 extractors'

\* Concentrates have a very high ratio of Active Chemicals to Overall Weight, compared to even the most potent Marijuana buds, making them very powerful. Be careful when medicating with concentrates

**Vaporization-** Specially designed "Vaporizers" heat Cannabis to the point where Cannabinoids are released into the air/lungs, but the rest of the plant material is largely unaffected. Vaporization releases Cannabinoids to the user, without many of the harmful elements created by burning plant material. Studies also show that some Vaporizers produce little to no Carcinogenic (Cancer Causing) effects, and are much more recommended by Physicians versus Smoking

**Edibles-** Cannabis can be combined with almost any type of Food or Drink. There are multiple methods, the most common being to heat plant material with ordinary butter, which releases the plant's Cannabinoids into the Butter's fatty oils, which the user can then ingest. Edibles are available as Foods, Drinks, Candies, Baked Goods and beyond

\* Beware- Edibles are known for having a much different onset of their effects than smoking or vaporizing

If you use an edible, start with no more than 1/2 of the recommended "Dosage"

Wait up to an Entire Hour to determine the full effect it has had on you

**Topicals-** Salves, Lotions, and Ointments can be applied and absorbed directly into the skin

\* Make sure to test for negative reactions on a small area of your skin first, just in case

**Tinctures/Liquid Concentrates-** THC/CBD is chemically extracted from Marijuana Plant Material, usually with Alcohol. Tinctures are generally taken either as a Sublingual (Tonguedrop) or mixed with some food or drink to mask the taste, which can be a little bitter

\* Take the same precautions with Tinctures and Liquids as you would with Edibles

**Synthetics-** Pharmaceutical Companies have discovered how to recreate the effects of Marijuana with drugs like "Marinol" that are only available through your doctor, and are used through an inhaler, pill capsule, and other forms

\* Ask your doctor about using synthetic/pharmaceutical forms

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## Getting What You Need

*There are over 1000 different kinds (strains) of Cannabis  
At first it can be tough knowing which strains work for you  
This section is designed to help you decide which strains to use  
Based on your Medical needs*

Every strain of Marijuana falls into 1 of 3 basic categories.  
Based on the overall effects they give

**Indica**– Indica Dominant strains mainly affect the Body  
They produce a Heavy, Lazy, or Sedative effect  
Commonly used for symptoms like Pain, Lack of Appetite, and Insomnia

**Sativa**– Sativa Dominant strains affect mainly the Mind  
They produce Euphoric, Energizing, or Uplifting type effects.  
Commonly used for symptoms such as Depression, Pain and Stress Relief  
Without the Heavy or Lazy type effects

**Hybrid**- Hybrid strains have balanced Indica and Sativa characteristics  
Known as 50/50 or "all-around" strains

*Note: Most modern Strains have complex family trees. Some are 100% Indica or 100% Sativa  
Most are technically 'Hybrids' that are either Indica or Sativa Dominant*

## The Indica-Sativa Spectrum

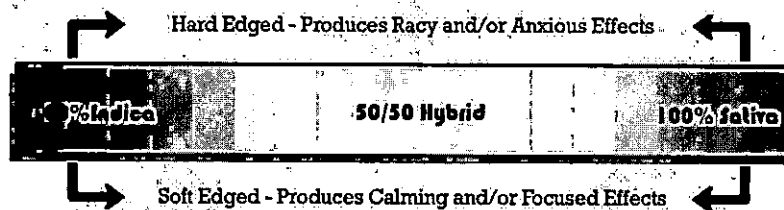
**Every Strain of Marijuana is balanced somewhere between  
100% Indica and 100% Sativa**

**Most Strains have at least one noticeable secondary effect**

**We call this an "Edge" Ranging from "Hard to Soft"**

**Your Bud-Tender should be able to explain where any strain falls onto this spectrum  
(If your not sure, don't hesitate to ask)**

*For Example: Let's say John is a business man, with a busy schedule. He has severe spinal injuries, which cause him great pain. He's also been diagnosed with acute anxiety. During the day he prefers Sativa Dominant or Hybrid strains which help relax his back, but don't slow him down. At night and before bed, he prefers Indica dominant strains because of his anxiety, he always prefers to medicate with strains that have a "Soft Edge"  
John's business partner Nick has mild depression. He also prefers Sativa dominant and Hybrid strains during the day and Indica at night. During the day he generally prefers a strain with a "Hard Edge" which he says "picks him up"*



Once you've determined which balance works best for you,  
it's time to determine your Personal Preferences  
Most patients base their preferences on Effects, Genetics, Taste, Smell, Appearance  
and its Overall Benefit to them as a Medicine

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## Cannabis Throughout History

**F**or thousands of years man has used Marijuana. It has played a role Medicinally and Industrially, traceable as far back as the 28th century BC. Coincidentally, almost every region of the globe has Indigenous or Landrace families of Marijuana which have naturally evolved there.

From the Ancient Chinese, Greeks, Europeans, Persians, Romans and Africans, to King Salomon, Abraham Lincoln, and even Queen Elizabeth, almost every civilization throughout history was known to use or trade Marijuana in some form. Cannabis is a Holy sacrament to the Hindu and Rastafari people of the world, part of the Yin-Yang philosophy, and even a staple of the original Karma Sutra. In fact nearly every major religion has some historical reference to Marijuana. As trade, travel, and empire expanded so did the use and reach of Cannabis, and before long it was an everyday commodity worldwide. Hemp (The fiber, generally stripped from the stalk of Male plants) has been one of nearly every ancient and modern nation's industries, with uses ranging from Rope and Textiles, to Paper, Oils, Clothing, and more. Even America's founding fathers were known for having vast and luscious Hemp fields, nestled among their plantations. As man began discovering the many uses for the plant, he soon also discovered it's Medicinal Qualities. Ancient Medical texts show how to use Cannabis based Anesthetics for complex surgeries, and has been documented for an array of everyday ailments, like Pain Relief to Headaches, Insomnia, Depression, and Menstrual Cramps, used by royalty and peasants alike, much like over the counter medicines of today.

As long as there have been users of Cannabis, there have been those who oppose it. Most Governments throughout history however, have agreed that the Medicinal, Industrial, and overall positive effects of Cannabis far outweighed any negative impact, if any, that it might have. Only in the last century or so has it come under real legal scrutiny here in America, and with the United State's complex legal system, a number of decisions and causes are actually the reason(s) it is illegal here and elsewhere. The most well known modern legal disputes over Marijuana (in America) are traceable back to migrant Mexican workers throughout Texas and California, as well as African and Indian groups, mainly in large cities like New York, San Francisco, or New Orleans, who openly used and/or cultivated it. In 1912, the idea of putting international restrictions on Cannabis emerged at the International Opium Conference, and in 1915 California criminalized it. Marijuana's opponents launched a massive campaign against the "Horrors of Marijuana", and while it was largely based on false propaganda, it still has popular influence in America. Despite the testimony and efforts of groups like the American Medical Association, in 1937 the Marijuana Transfer Tax was levied, but because of a Legal-Loophole farmers could not obtain the necessary Licenses, and the industry as a whole was crippled.

Today, Marijuana is illegal under Federal Law in America, however Individual States and Voters have the right to approve access to Marijuana as a Medicine. In 1996 California Voters passed an initiative, and now a total of 15 states, as well as Washington D.C, have a Medical Marijuana Program. Some states have even De-Criminalized the possession of small amounts. Countries like Holland and Germany have long adopted policies of tolerance toward Cannabis, and in plant form it is available as a prescription in Canada, Italy, the Netherlands, and Spain. Synthetic forms are also prescribed in America and elsewhere. In 2010 the California Voters very nearly passed a bill that would tax and legalize Marijuana in California. With so many questions surrounding Marijuana, we believe many can be answered by looking to the past. One thing we do know is this: *it's up to us as patients to help determine the future of Cannabis*

*\*To learn more about the History and the Future of Medical Marijuana, check out sites like [UKCIA.org](http://UKCIA.org) and [SafeAccessNow.org](http://SafeAccessNow.org)*



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## Additional Information

# INTRODUCTION

In continuing its efforts to provide the best holistic wellness care to its members, Education Planners is pleased to provide this educational material to its members, staff and community physicians. The purpose of this information is to educate us on the latest scientific concepts and understanding of medical cannabis so that we may better benefit from its diverse medicinal properties. Understanding this "pharmaceutical treasure trove" will hopefully make its utilization more efficient and effective (and less daunting for those who are new to this ancient herbal medicine).

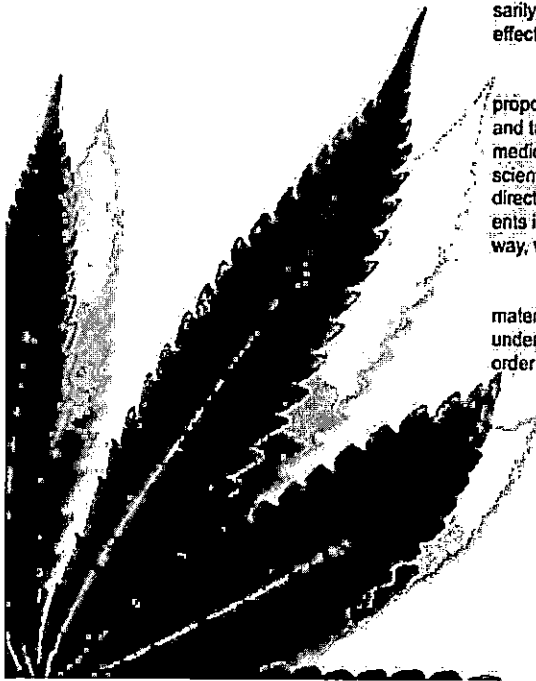
Helping us to better understand medical cannabis are the advances in laboratory analysis (now available to collectives) combined with the ongoing research taking place around the world. Much of this research is aimed at delineating the therapeutic effects of the various chemical compounds in cannabis, especially the cannabinoids and terpenoids. Two recent articles illustrating this development are those by Izzo, et al. (2009) and Russo (2011). An excellent video on medical cannabis and its impact on human health can be found online at: <http://www.youtube.com/watch?v=8Md2WNqgxTQ>.

Another key to better understanding of medical cannabis is awareness that the chemical compounds available in the plant change with how the plant is processed and administered. Potential therapeutic benefits will vary if the cannabis is processed/administered in raw (unheated), heated or aged (degraded) form.

Also knowing that the various compounds in cannabis may modulate each other in synergistic or antagonistic ways is important. For example, the cannabinoid CBD will lessen to some degree the psychotropic effects of the cannabinoid THC, while the terpenoid  $\alpha$ -pinene will synergize the bronchodilator effects of THC. This complexity of interaction means that medical cannabis should be seen in the light of an herbal medicine, where to extract a so-called "active ingredient" will not necessarily result in the full range of therapeutic effects, or may produce unwanted side effects that usually do not occur when the whole herb is administered.

Finally, knowing that each strain of cannabis has potentially vastly different proportions of cannabinoids and terpenoids (often expressed in terms of color, smell and taste) means that one needs to be strain specific when discussing cannabis as medicine. This is a difficult step, but one that modern laboratory analysis and scientific research is now making possible. Education Planners is working in this direction and hopes that this educational material will assist caregivers and recipients in making a choice as to which strain, in what form, and administered in which way, will be most beneficial to them.

As new research in medical cannabis becomes available, this educational material will be revised to reflect the latest insights. In this way we hope that our understanding and use of medical cannabis will continue to grow in effectiveness in order to meet the needs and maximize the wellness of our members.



## DOSING MEDICAL CANNABIS

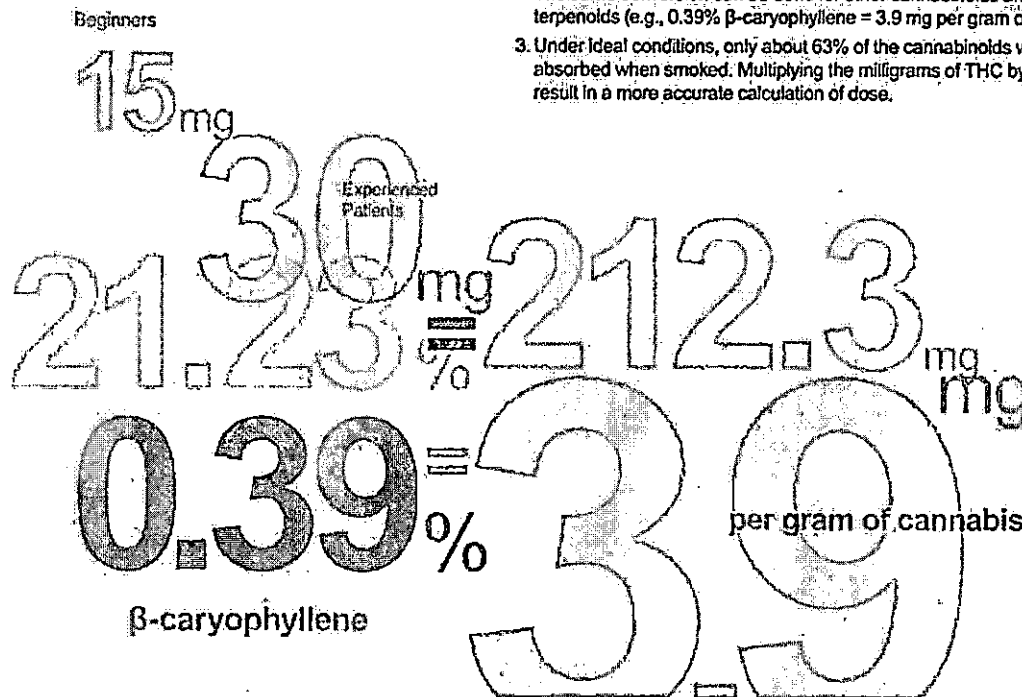
Understanding how to dose medical cannabis is difficult. We are not talking about a single active ingredient, but rather a complex of chemical compounds that modulate each other. Up to now, most attention in dose determination has focused on the psychoactive effect of THC. It is now obvious that the other (non-psychoactive) cannabinoids may be of greater therapeutic importance, depending on the ailment to be treated. Unfortunately, scientific research in dosing of these cannabinoids is still in its infancy.

Since the psychoactive effects of THC remain the main determinant of normal or "altered" daily functioning for most people, it is wise to continue to refer to the THC content of a strain when discussing dose of medicine. Some patients will want and need a high percentage of THC effect, while others will want and need a low percentage of THC effect. Determining the therapeutic dose of medical cannabis remains a very personal determination. The patient has the final say as to how much is enough. In addition, one person may react differently than another person to the same strain.

In this regard, route of administration will also be an important consideration in determining dose. For example, due to liver metabolism, cooked edibles may be 3-5 times more psychoactive than inhaled cannabis.

In trying to understand dosage, there are a few helpful rules-of-thumb:

1. Normal adult dosage of THC for beginners is 15 mg;  
more experienced patients: 30 mg.
2. Converting percentage to milligrams:  
move decimal one place over to the right. For example,  
21.23% THC = 212.3 mg of THC per gram of cannabis.  
The same conversion can be done for other cannabinoids and  
terpenoids (e.g., 0.39%  $\beta$ -caryophyllene = 3.9 mg per gram of cannabis).
3. Under ideal conditions, only about 63% of the cannabinoids will get  
absorbed when smoked. Multiplying the milligrams of THC by 0.63 will  
result in a more accurate calculation of dose.



# CANNABINOIDS

CBGA	Cannabigerolic Acid
CBGVA	Cannabigerivarinic Acid
CBG	Cannabigerol
CBGV	Cannabigerivarin
THCA	Tetrahydrocannabinolic Acid
THCVA	Tetrahydrocannabivarinic Acid
THC ( $\Delta^9$ )	$\Delta^9$ -tetrahydrocannabinol
THCV	Tetrahydrocannabivarin
CBNA	Cannabinolic Acid
THC ( $\Delta^8$ )	$\Delta^8$ -tetrahydrocannabinol
CBN	Cannabinol
CBDA	Cannabidiolic Acid
CBDVA	Cannabidivarinic Acid
CBD	Cannabidiol
CBDV	Cannabidivarin
CBCA	Cannabichromic Acid
CBCVA	Cannabichromivarinic Acid
CBC	Cannabichromene
CBCV	Cannabichromivarin
CBLA	Cannabicyclol Acid
CBL	Cannabicyclol

# MEDICINE INFORMATION SHEET

## Cannabis

Pronunciation: kan-uh-bis

### This medicine is USED FOR:

Although cannabis is used for a wide variety of ailments, rigorous clinical research is still relatively limited due to federal government regulations. Around the globe, however, controlled trials are taking place and more scientific information on the therapeutic effects of cannabis is being established.

Some of the more accepted medical uses of cannabis are for the following ailments:

- Alzheimer's Disease: reduce agitation and nighttime tossing and turning, stimulate weight gain
- Amyotrophic Lateral Sclerosis: slow disease progression, reduce pain, appetite loss, depression, drooling
- Chronic Pain: reduce nerve-related (neuropathic) pain, allow rapid treatment at lower doses
- Diabetes Mellitus: slow disease progression, protect from eye disease, reduce neuropathic (nerve) pain, reduce symptoms of heart muscle disease (cardiomyopathy)
- Dystonia: reduce muscle tension and involuntary, painful muscle contractions
- Fibromyalgia: reduce pain and muscle stiffness, improve sleep quality
- Gastrointestinal Disorders: reduce cramping, abdominal pain, acid reflux, intestinal secretion, decrease activity
- Glaucoma: reduce intraocular (eye) pressure, Glaucoma/Concave: inhibit tumor growth, reduce nausea and vomiting from cancer chemotherapy
- HIV/AIDS: reduce neuropathic pain, anxiety, nausea, appetite and weight loss
- Incontinence: improve bladder control, reduce bladder inflammation/overactivity
- Multiple Sclerosis: reduce pain, spasticity, depression, fatigue, incontinence
- Parkinson's Disease: alleviate L-dopa induced dyskinesias (LD), reduce tremor, rigidity and psychosis symptoms
- Pneuria: reduce itching in conditions such as kidney and liver diseases
- Rheumatoid Arthritis: reduce joint pain and swelling, suppress joint destruction and disease worsening
- Insomnia: induce sleep and/or improve sleep quality
- Tourette's Syndrome: improvement of tic and obsessive-compulsive behavior

### What the active compounds might be:

Cannabichromene (CBC), Cannabidiol (CBD), Cannabicholol and (CBCA), Cannabivarin (CBV), Cannabigerol (CBG), Cannabidiol (CBD), Tetrahydrocannabinol (THC), Tetrahydrocannabinolic acid (THCA), Tetrahydrocannabinol (THC), Terpenoids.

### What the other compounds might be:

There may be more than 60 other cannabinoids and more than 200 terpenoids in cannabis.

### How this medicine is supplied:

Cannabis comes in various forms: dried plant material ('buds', 'wet leaves'), concentrate ('hash', 'wax'), tincture, oil, capsules, topical salve, edible (including drinks).

### Do NOT USE this medicine if:

- You are allergic to any cannabinoid or terpenoid.
- You have a history of serious mental disorder such as schizophrenia or severe depression.
- You are pregnant or planning to get pregnant. In addition to the risk of smoking, the use of cannabis when you are pregnant may be a risk factor for sudden infant death syndrome. Utmost exposure to cannabis may also cause behavioral (attention) problems in the child.
- You are nursing.
- Important, there may be other conditions where this product should not be used but which are unknown due to limited scientific information.

### BEFORE USING this medicine:

#### ALWAYS TALK TO YOUR PHYSICIAN, PARTICULARLY IF:

- You have heart disease.
- You have asthma, chronic obstructive pulmonary disease or other disease of the airways.
- You have a history of alcohol abuse or dependence.
- You have a history of drug abuse or dependence.
- You have a history of a serious mental disorder.

### HOW TO USE this medicine:

Use this medicine as directed by your doctor. Dose and frequency of administration will vary according to route of administration (smoke, vaporization, ingestion, skin), percentage of therapeutic ingredients, and other medicines taken. Ask your doctor or collective consultant to explain what dosage, route and frequency is best for you. Remember that concentrates have higher dosages per weight of medicine than other forms. Make sure you give the medicine sufficient time to take effect. This is especially important with the edible form of cannabis where therapeutic effect may take up to 1-2 hours before taking effect. Eating too much medicine too fast may easily occur causing unwanted side effects. Use this medicine only for the length of time recommended by your doctor. It is not recommended to use this medicine in combination with tobacco.

### Important SAFETY INFORMATION

#### about this medicine:

- If you have not consumed cannabis before, it would be prudent to have someone with you the first time you use it. It is important to start by using small quantities. Stop if you begin to feel confused or agitated.
- After you stop using cannabis, it remains in your system for several weeks to months. Therefore, during this time, tests that screen for cannabis may be positive.
- Cannabis may interact with several drugs. Tell your doctor which prescription drugs, nonprescription drugs and herbal products you are currently taking, particularly:
  - Any drugs that slow down the central nervous system, causing drowsiness. This may include sleeping pills, tranquilizers, some pain medications, some anticholinergics or cold medications or sedative medications.
  - A critical drug used in the treatment of HIV/AIDS.
- CANNABIS MAY IMPAIR YOUR ABILITY TO DRIVE OR OPERATE HEAVY MACHINERY. This can last up to 24 hours after consuming.

### Possible SIDE EFFECTS of this medicine:

- From local use:
  - When you first start consuming cannabis, you may experience mood reactions such as euphoria, relaxation, time distortion, perception of enhanced sensory perception, loss of inhibition, anxiety, paranoia, agitation, nausea, dilators or tachycardia.
  - Fast heartbeat, this may be more of a problem if you have heart disease.
  - Facial flushing or red eyes, dry mouth, headache.
  - Right after consuming cannabis you may get dizzy or feel lightheaded when you get up from a lying or sitting position. Try getting up more slowly if lying down, sit on the edge of the bed and let your feet dangle for 1 to 2 minutes, then stand up slowly.
- From Long term use:
  - Wheezing or a chronic cough, if the medicine is smoked.
  - May impair short-term memory attention and concentration. These effects usually disappear after you stop using cannabis.

### IF OVERDOSE is suspected:

It is possible that the above mentioned side effects occur. Usually these will resolve themselves within a short period of time when medication is stopped. Often fresh air, eating hydrated and resting will help. Contact your doctor immediately if symptoms persist.

### Proper STORAGE of this medicine:

Store in a tightly closed container in a cool, safe and secure place. Store away from heat, moisture and light.

### GENERAL INFORMATION:

- If you have any questions about this medicine, please talk with your doctor, collective consultant or other health care provider.
- This medicine is to be used only by the patient for whom it is recommended. Do not share it with other people.
- If your symptoms do not improve or if they become worse, check with your doctor.
- Check with your collective consultant about how to dispose of unused medicine.
- This information is a summary only. It does not contain all information about this medicine.

**KEEP THIS MEDICINE OUT OF REACH OF CHILDREN AND PETS.**

## PROCESSING AND ADMINISTERING MEDICAL CANNABIS

Medical cannabis is processed for administration in various ways: fresh, dried, cold extractions/concentrates and heated extractions/concentrates.

Although rarely done due to the large quantities usually needed, cannabis can be ingested raw, freshly cut from the plant, in order to primarily benefit from the acid cannabinoids and their anti-inflammatory effects. Terpenoids remain intact. Psychoactivity is minimized.

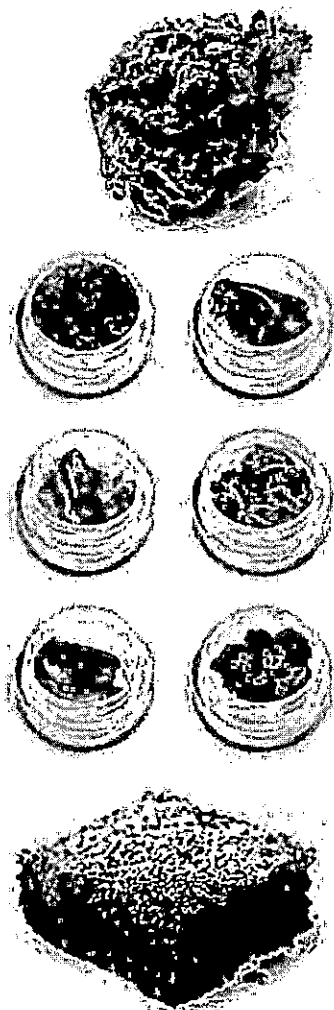
Dried cannabis is most often consumed by inhaling the burned or vaporized buds. Cannabinoid acids are converted to their neutral forms and the amount of terpenoids available will vary according to the method of administration chosen and the instruments used (pipe, joint, vaporizer).

Cold extractions /concentrates result in various products:

1. **Kief**: powder of the trichomes that have fallen off the plant. May be ingested raw but is usually smoked or ingested in cooked edibles.
2. **Slurry**: extraction using olive oil or alcohol. Usually ingested raw.
3. **Hash**: extraction using cold water and ice. May be ingested raw, smoked or used in cooking. Variety names reflect differences in the proportion of plant material to trichomes and how the variety reacts to heat:
  - a. **Bubble** = initially bubbles when exposed to heat.
  - b. **Full bubble** = continues to bubble throughout the heating process.
  - c. **Melt** = melts or turns into gooey oil when exposed to heat.
  - d. **Full melt** = almost pure trichomes, fully melts when exposed to heat leaving little or no residue.
4. **Wax**: extraction using a solvent, most commonly butane, CO<sub>2</sub> or O<sub>2</sub>. Removal ("purging") of the solvent may be through cold or heat evaporation (which changes the compounds available). Waxes are usually burned or vaporized, but may be used in cooking and in topical salves. Variety names usually refer to consistency. Examples:
  - a. **Honeycomb/Crumble** = dry, crumbly texture, often has small holes like a honeycomb.
  - b. **Budder** = more viscous, consistency like butter.
  - c. **Shatter/Glass** = consistency similar to a hard candy.
  - d. **Sap** = sticky texture similar to honey.
  - e. **Taffy** = firmer than sap but not brittle like shatter.








Heated extractions /concentrates convert the cannabinoid acids into their neutral forms and usually removes the terpenoids. Various products:

1. **Tea**: extraction into hot water and then drunk.
2. **Tincture**: heated cannabis that is extracted in alcohol. Usually administered directly under the tongue.
3. **Edible**: extraction into a fat (butter, oil) and then used in cooking food.
4. **Oil**: slow heating of cannabis in olive or coconut oil. Usually used in food or topically on skin.
5. **Salve/Cream/Lotion**: low heating of cannabis oil with beeswax. Used topically on skin.



# TERPENOIDS

## Smells and Therapeutic Effects

<b>α-PINENE</b>	 Pine needles	Anti-bacterial Anti-fungal Anti-inflammatory Bronchodilator
<b>β-CARYOPHYLLENE</b>	 Black Pepper Clove	Anti-bacterial Anti-cancer Anti-fungal Anti-inflammatory Anti-septic
<b>BORNÉOL</b>	 Camphor	Analgesic Anti-insomnia Anti-septic Bronchodilator
<b>CARYOPHYLLENE OXIDE</b>	 Eucalyptus	Anti-fungal Anti-ischemic
<b>CINEOL</b>	 Tea Tree	Anti-bacterial Anti-depressant Anti-inflammatory Anti-ischemic Bronchodilator
<b>CITRONELLOL</b>	 Rose	Anti-cancer Anti-inflammatory Anti-insomnia Anti-spasmodic
<b>HUMULENE</b>	 Hops	Anorectic Anti-cancer Anti-bacterial Anti-inflammatory

**LIMONENE**



Citrus

Anti-bacterial  
Anti-cancer  
Anti-depressant  
Anti-fungal  
Anxiolytic  
Bronchodilator

**LINALOOL**



Lavender

Anti-bacterial  
Anti-convulsive  
Anti-depressant  
Anti-insomnia  
Anxiolytic

**MYRCENE**



Lemongrass

Analgesic  
Anti-cancer  
Anti-inflammatory  
Anti-insomnia  
Anti-spasmodic



Mango

**NEROLIDOL**



Wood

Anti-fungal  
Anti-insomnia



Citrus rind

**PHYTOL**



Green Tea

Anti-insomnia

**TERPINOLENE**



Lilac

Anti-bacterial  
Anti-fungal  
Anti-insomnia  
Anti-septic



Apple

## NOTES ON CHARTS 1, 2 and 3

The following charts reflect most of what is presently known on the potentially therapeutic chemical compounds in cannabis, how they are formed, and how they relate to each other. Only 21 cannabinoids and 13 terpenoids are listed. There is still much to be learned.

The charts should be read horizontally and vertically.

**Horizontally:** which cannabinoids can be found in which physical state of cannabis (raw, heated, aged). Raw refers to the fresh plant. Aged refers to the effects of UV-light, oxidation, and isomerization; in other words: degradation.

**Vertically:** how do the cannabinoids relate to each other; where do they come from?

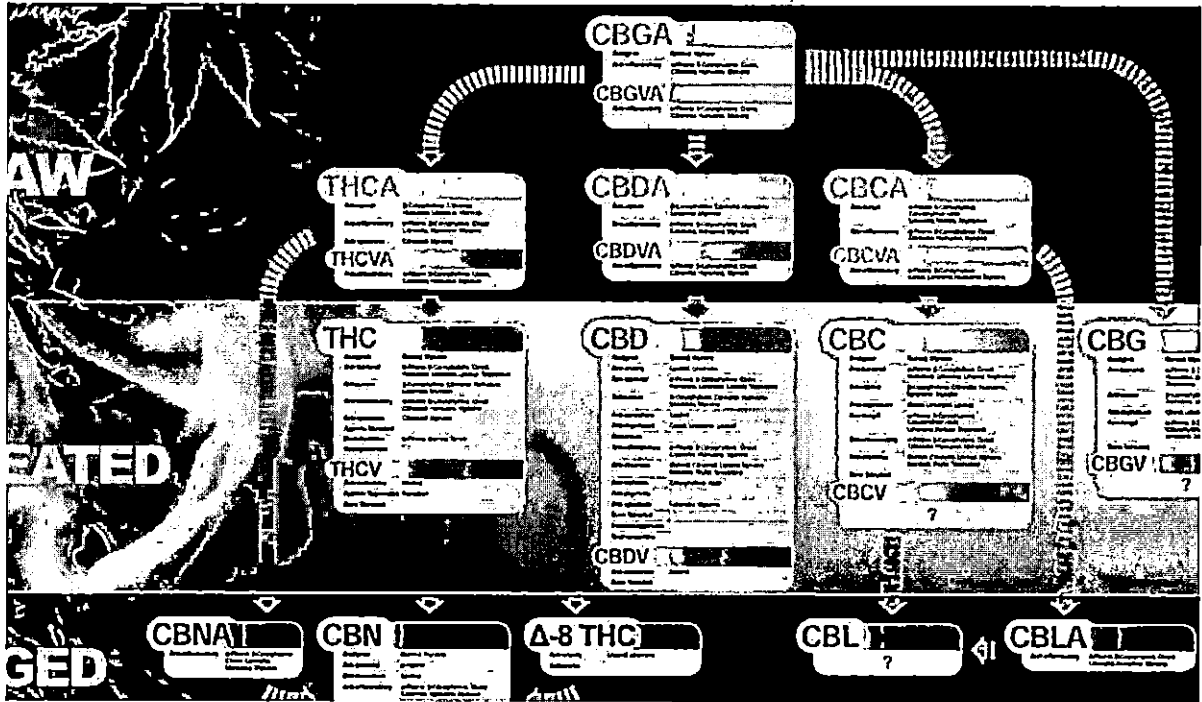
In general, the amount of divaric cannabinoid (those with "V" in the acronym) is always less than the olivetolic cannabinoid. In the charts, this is reflected in the smaller font size of the acronym.

The charts do not imply that all cannabinoids listed are always detectable in the various strains currently available. Breeding has mainly focused on increasing the amount of THC. Recently CBD has come under attention and strains high in CBD are now being bred. Hopefully other strains with significant amounts of other cannabinoids will be available soon.

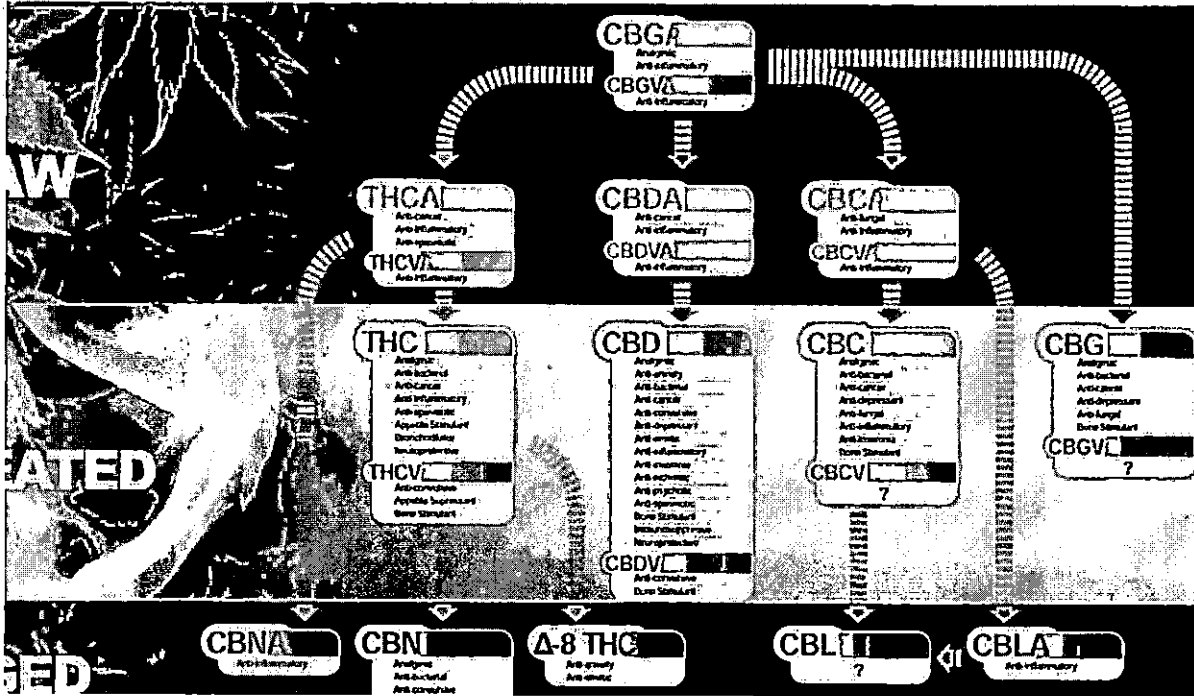
Since terpenoids are more volatile than cannabinoids, their presence is more closely related to freshness and temperature. The fresher and cooler the cannabis (upper part of the chart), the more the terpenoids peculiar to the strain are preserved. Therefore, as one goes down the chart, terpenoids listed in the different physical states of cannabis may or may not be available in amounts of therapeutic significance.



**Cannabinoids, Therapeutic Effects and Synergistic Terpenoids**



## Cannabinoids and Their Therapeutic Effects





# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY - DOMESTIC

C.G.S. §§34-120; 34-121

FILING #0005387563 PG 01 OF 02 VOL B-02096  
FILED 08/26/2015 04:00 PM PAGE 00304  
SECRETARY OF THE STATE  
CONNECTICUT SECRETARY OF THE STATE

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 8 1/2 X

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS)

NAME: Kevin F. Rennle  
ADDRESS: 1708 Ellington Road

MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"

CITY: South Windsor  
STATE: CT ZIP: 06074

1. NAME OF LIMITED LIABILITY COMPANY - **REQUIRED**: (MUST INCLUDE BUSINESS DESIGNATION I.E. LLC, L.L.C., ETC.)  
RELEASE RECOVERY, LLC

2. DESCRIPTION OF BUSINESS TO BE TRANSACTED OR PURPOSE TO BE PROMOTED - **REQUIRED**:  
ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.  
The purpose for which the Limited Liability Company is organized is to engage in any lawful act or activity for which Limited Liability Companies may be formed under the Connecticut Limited Liability Company Act.

3. LLC'S PRINCIPAL OFFICE ADDRESS - **REQUIRED**: (NO P.O. BOX) PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE.  
ADDRESS: 379 Quarry Brook Drive  
CITY: South Windsor  
STATE: Connecticut ZIP: 06074

4. MAILING ADDRESS, IF DIFFERENT THAN #3; PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE.  
ADDRESS:  
CITY:  
STATE: ZIP:

5. APPOINTMENT OF STATUTORY AGENT FOR SERVICE OF PROCESS - **REQUIRED**: (COMPLETE A OR B NOT BOTH)  
 A. IF AGENT IS AN INDIVIDUAL.  
PRINT OR TYPE FULL LEGAL NAME:  
Thomas Nicholas

BUSINESS ADDRESS  
(P.O. BOX NOT ACCEPTABLE) IF NONE, MUST STATE "NONE"

CONNECTICUT RESIDENCE ADDRESS  
(P.O. BOX NOT ACCEPTABLE)

ADDRESS: 379 Quarry Brook Drive  
CITY: South Windsor  
STATE: Connecticut  
ZIP: 06074

ADDRESS: 379 Quarry Brook Drive  
CITY: South Windsor  
STATE: Connecticut  
ZIP: 06074

SIGNATURE ACCEPTING APPOINTMENT:

08/26/2015 16:02

(FAX)

P.004/005

PRINT OR TYPE NAME OF BUSINESS AS IT APPEARS ON OUR RECORDS:

FILING #0005387563 PG 02 OF 02 VOL B-02096  
FILED 08/26/2015 04:00 PM PAGE 00305  
SECRETARY OF THE STATE  
CONNECTICUT SECRETARY OF THE STATE

CT BUSINESS ADDRESS (P.O. BOX UNACCEPTABLE)

ADDRESS:

CITY:

STATE:

ZIP:

SIGNATURE ACCEPTING APPOINTMENT ON BEHALF OF AGENT:

PRINT NAME & TITLE OF PERSON SIGNING:

6. MANAGER OR MEMBER INFORMATION-REQUIRED: (MUST LIST AT LEAST ONE MANAGER OR MEMBER OF THE LLC)  
ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.

NAME	TITLE	BUSINESS ADDRESS (No. P.O Box) IF NONE, MUST STATE "NONE"	RESIDENCE ADDRESS: (No. P.O Box)
Thomas Nicholas	Managing Member	379 Quarry Brook Drive South Windsor, CT 06074	379 Quarry Brook Drive South Windsor, CT 06074

7. MANAGEMENT - PLACE A CHECK NEXT TO THE FOLLOWING STATEMENT ONLY IF IT APPLIES

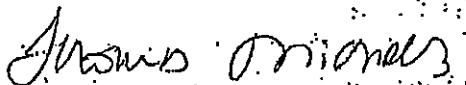
MANAGEMENT OF THE LIMITED LIABILITY COMPANY SHALL BE VESTED IN A MANAGER OR MANAGERS

8. ENTITY EMAIL ADDRESS-REQUIRED: (IF NONE, MUST STATE "NONE")

t.j.nicholas@atl.net

9. EXECUTION: (SUBJECT TO PENALTY OF FALSE STATEMENT)

DATED THIS 26th DAY OF August, 2015.

NAME OF ORGANIZER (PRINT OR TYPE)	SIGNATURE
Thomas Nicholas	

AN ANNUAL REPORT WILL BE DUE YEARLY IN THE ANNIVERSARY MONTH THAT THE ENTITY WAS FORMED/REGISTERED AND CAN BE EASILY FILED ONLINE @ [WWW.CONN-CORP-SOFS.CT.GOV](http://www.conncorp-sofs.ct.gov)  
CONTACT YOUR TAX ADVISOR OR THE TAXPAYER SERVICE CENTER AT THE DEPARTMENT OF REVENUE SERVICES AS TO ANY POTENTIAL TAX LIABILITY RELATING TO YOUR BUSINESS, INCLUDING QUESTIONS ABOUT THE BUSINESS ENTITY TAX.  
TAX PAYER SERVICE CENTER: (800) 382-9463 OR (860) 297-5982 OR GO TO [WWW.CT.GOV/DRS](http://www.ct.gov/drs)

COPY

ARTICLE IDEFINITIONS

The following terms used in this Operating Agreement shall have the following meanings (unless otherwise expressly provided herein);

(a) "Article of Organization" shall mean the Article of Organization of **RELEAF RECOVERY, LLC**, as filed with the Secretary of the State of Connecticut, as the same may be amended from time to time. A copy of the Articles of Organization are attached hereto as Exhibit A.

(b) "Capital Account" as of any given date shall mean the Capital Contribution to the Company by a Member as adjusted up to the date in question pursuant to Article VII.

(c) "Capital Contribution" shall mean any agreed contribution to the capital of the Company in cash, property or services by a Member, whenever made. "Initial Capital Contribution" shall mean the initial contribution to the capital of the Company pursuant to this Operating Agreement as set forth on Exhibit A attached hereto.

(d) "Company Interest" shall mean with respect to each Member, such Member's interest in the profits and losses of the Company as set forth on Exhibit B attached hereto.

(e) "Code" shall mean the Internal Revenue Code of 1986 or corresponding provisions of subsequent superseding federal revenue laws.

(f) "Connecticut Act" shall mean the Connecticut Limited Liability Company Act (P.A. 93-267).

(g) "Company" shall refer to **RELEAF RECOVERY, LLC**.

(h) "Deficit Capital Account" shall mean, with respect to any Member, the deficit balance, if any, in such Member's Capital Account as of the end of the taxable year.

(i) "Distributable Cash" means all cash, revenues and funds received by the Company from Company operations, less the sum of the following to the extent paid or set aside by the Company: (i) all principal and interest payments on indebtedness of the Company and all other sums paid to lenders; (ii) all cash expenditures incurred incident to the normal operation of the Company's business; (iii) such Reserves as the Managers deem reasonably necessary to the proper operation of the Company's business.

(j) "Economic Interest" shall mean a Member's Economic Interest in the Company's Net Profits, New Losses and distributions of the Company's assets pursuant to this Operating Agreement and the Connecticut Act, but shall not include any right to participate in the management or affairs of the Company, including the right to vote on, consent to or otherwise participate in any decision of the Members or Managers.

(k) "Economic Interest Owner" shall mean the owner of an Economic Interest who is not a member.

(l) "Entity" shall mean a general partnership, a limited partnership, a domestic or foreign limited liability company, a trust, an estate, an association, a corporation or any other legal or commercial entity.

(m) "Event of Dissociation" means an event that causes a person to cease to be a Member, as provided in Section 41 of the Connecticut Act.

(n) "Fiscal Year" shall mean the Company's fiscal year, which shall be the calendar year.

(o) "Gifting Member" shall mean any Member or Economic Interest Owner who gifts, bequeaths or otherwise transfers for no consideration (by operation of law or otherwise, except with respect to bankruptcy) all or any part of its Membership Interest or Economic Interest.

(p) "Majority Interest" shall mean one or more Interests of Members which taken together exceed 50% of the aggregate of all Company interests.

(q) "Manager" shall mean one or more managers designated in the manner provided in this agreement.

(r) "Member" shall mean each of the parties who executes a counterpart of this Operating Agreement as a Member and each of the parties who may hereafter become Members as permitted herein. To the extent a Manager has acquired a Membership Interest in the Company, he will have all the rights of a Member with respect to such Membership Interest, and the term "Member" as used herein shall include a Manager to the extent he has acquired such Membership Interest in the Company. If a Person is a Member immediately prior to the purchase or other acquisition by such Person of an Economic Interest, such Person shall have all the rights of a Member with respect to such purchased or otherwise acquired Membership Interest or Economic Interest, as the case may be.

(s) "Membership Interest" shall mean, a Member's entire interest in the Company including such Member's Economic Interest and the right to participate in the management of the business and affairs of the Company, including the right to vote on, consent to, or otherwise participate in any decision or action of or by the Members granted pursuant to this Operating Agreement or the Connecticut Act.

(t) "Net Profits" and "Net Losses" shall mean the income, gain, loss, deductions and credits of the Company in the aggregate or separately stated, as appropriate, determined in accordance with the method of accounting selected by the Managers at the close of each fiscal year on the company's information tax return filed for federal income tax purposes.

(u) "Operating Agreement" shall mean this Operating Agreement as originally executed and as amended from time to time.

(v) "Person" shall mean an individual or Entity, and the heirs, executors, administrators, legal representatives, successors, and the assigns of such "person" where the context so permits.

(w) "Reserves" shall mean, with respect to any fiscal period, funds set aside or amounts allocated during such period to reserves which shall be maintained in amounts deemed sufficient by the taxes, insurance, debt service or other costs or expenses incident to the ownership or operation of the Company's business.

(x) "Selling Member" shall mean any Member or Economic Interest Owner which sells, assigns, or otherwise transfers for consideration all or any portion of its Membership Interest or Economic Interest.

(y) "Transferring Member" shall collectively mean a Selling Member and a Gifting Member.

(z) "Treasury Regulations" shall include proposed, temporary and final regulations promulgated under the Code in effect as of the date of filing the Articles of Organization and the corresponding sections of any regulations subsequently issued that amend or supersede such regulations.

## ARTICLE II

### FORMATION OF COMPANY

Section 2.1 -- Formation. The Company was formed as a limited liability company under the Connecticut Act by the filing of its Articles of Organization with the Secretary of the State of Connecticut on

## ARTICLE III

### BUSINESS OF COMPANY

Section 3.1 -- Permitted Businesses. The business of the Company shall be as set forth in its Articles of Organization.

## ARTICLE IV

### NAMES AND ADDRESS OF MEMBERS

The name and address of the initial Members are:

Thomas Nicholas  
379 Quarry Brook Drive  
South Windsor, CT 06074

Angela D'Amico  
55 Brittany Avenue  
Trumbull, CT 06611

John P. Glowik, Jr.  
44 Independence Lane  
Shrewsbury, MA 01545

High Street Capital Partners  
70 Island Avenue  
Madison, CT 06443

## ARTICLE V

### RIGHTS AND DUTIES OF MANAGERS

Section 5.1 -- Management. The business and affairs of the Company shall be managed by its Managers. The managers shall direct, manage and control the business of the Company to the best of their ability. Except for situations in which the approval of the members is expressly required by this Operating Agreement or by nonwaivable provisions of applicable law, the Managers shall have full and complete authority, power and discretion to manage and control the business, affairs and properties of the

other acts or activities customary or incident to the management of the Company's business. At any time when there is more than one Manager, any one Manager may exercise all of the powers delegated to the managers herein and may take any action permitted to be taken by the Managers, unless the approval of more than one of the Managers is expressly required pursuant to this Operating Agreement.

Section 5.2 -- Number, Identity, Tenure and Qualifications.

The Company shall have one Manager:

**Thomas Nicholas**

The number of Managers of the Company shall be fixed from time to time by the affirmative vote or written consent of Members holding at least two-thirds of all Company Interests, but in no instance shall there be fewer than two Managers. Each Manager shall hold office until his successor shall have been elected and qualified or such earlier time as he may resign or be removed as provided herein. Managers shall be elected by the affirmative vote or written consent of Members holding at least a Majority Interest. A Manager need not be a Member.

Section 5.3 -- Certain Powers of Managers. Without limiting the generality of Section 5.1, the Managers shall have power and authority on behalf of the Company:

- (a) To acquire property from any person as the Managers may designate;
- (b) To borrow money for the Company from banks, other lending institutions, the Managers, Members, or affiliates of the Managers or Members on such terms as the Managers deem appropriate, and in connection therewith, to mortgage, hypothecate, encumber and grant security interests in the assets of the Company to secure repayment of the borrowed sums;
- (c) To purchase liability and other insurance to protect the Company's property and interest;
- (d) To hold and own any Company real and/or personal properties in the name of the Company;
- (e) To invest any company funds temporarily (by way of example but not limitation) in time deposits, short-term governmental obligations, commercial paper or other investments;
- (f) Upon the affirmative vote or written consent Members holding at least two-thirds of all Company Interests, to sell or otherwise dispose of all or substantially all of the assets of the Company as part of a single transaction or plan;
- (g) To execute on behalf of the Company all instruments and documents, including, without limitation, checks; drafts; notes and other negotiable instruments; mortgages or deeds of trust; security agreements; financing statements; documents providing for the acquisition, mortgage or disposition of the Company's property; assignments; bills of sale; leases; partnership agreements, operating agreements of other limited liability companies; and any other instruments or documents necessary or appropriate, in the opinion of the Managers, to the business of the Company;



(h) To employ accountants, legal counsel, managing agents or other experts to perform services for the Company and to compensate them from Company funds;

(i) To enter into any and all other agreements on behalf of the Company, with any other Person for any purpose, in such forms as the Managers may approve; and

(j) To do and perform all other acts as may be necessary or appropriate to the conducts of the Company's business.

Unless authorized to so do by this Operating Agreement or by written authorization of a Manager or Managers of the Company, no attorney-in-fact, employee or other agent of the Company shall have any power or authority to bind the Company in any way, to pledge its credit or to render it liable for any purpose. No Member (other than a Member who is also a Manager) shall have any power or authority to bind the Company unless the Member has been authorized by the Managers to act as an agent of the Company in accordance with the previous sentence.

Section 5.4 -- Managers Have No Exclusive Duty To Company. The Managers shall not be required to manage the Company as their sole and exclusive function and they may have other business interests and may engage in other activities in addition to those relating to the Company.

Section 5.5 -- Bank Accounts. The Managers may from time to time open bank accounts in the name of the Company, and the Managers shall be the sole signatories thereon, unless the Managers determine otherwise.

Section 5.6 -- Company Books. In accordance with Section 9.02 herein, the Managers shall maintain and preserve, during the term of the Company, and for five (5) years thereafter, all accounts, books, and other relevant Company documents. Upon reasonable request, each Member and Economic Interest Owner shall have the right, during ordinary business hours, to inspect and copy such Company documents at the requesting Member's and Economic Interest Owner's expense.

Section 5.7 -- Indemnity of Managers. The Company shall indemnify the Managers, only if they are uncompensated volunteer Managers, from and against any claim by any third party seeking monetary damages against such manager arising out of such Manager's performance of his duties in good faith in accordance with Section 22 of the Connecticut Act. This section shall not apply to Managers who receive compensation for their services.

Section 5.8 -- Resignation. Any Manager of the Company may resign at any time by giving written notice to the Members of the Company. The resignation of any Manager shall take effect upon receipt of notice thereof or at such late time as shall be specified in such notice; and, unless otherwise specified therein, the acceptance of such resignation shall not be necessary to make it effective. The resignation of a Manager who is also a Member shall not, by itself, affect the Manager's rights as a Member and shall not constitute a withdrawal of a Member.

Section 5.9 -- Removal. Any Manager may be removed at any time, with or without cause, by the affirmative vote or written consent of Members holding a Majority Interest. The removal of a Manager who is also a Member, shall not, by itself, affect the Manager's rights as a member and shall not constitute a withdrawal of a Member.

Section 5.10 -- Vacancies. Any vacancies occurring for any reason in the number of Managers of the Company may be filled by the affirmative vote or by written consent of Members holding a Majority Interest.

Section 5.11 -- Compensation of Managers. The Managers shall receive compensation for their services.

## ARTICLE VI

### RIGHTS AND OBLIGATIONS OF MEMBERS

Section 6.1 -- Limitation of Liability. Each Member's liability shall be limited as set forth in this Operating Agreement, the Connecticut Act and other applicable law.

Section 6.2 -- List of Members. Upon written request of any Member, a Manager shall provide a list showing the names, addresses and Membership Interests and Economic Interests of all Members.

Section 6.3 -- Approval of Sale of All Assets. The Members shall have the right, by the affirmative vote or written consent of Members holding majority of all Company interests, to approve the sale, exchange or other disposition of all, or substantially all, of the Company's assets which is to occur as part of a single transaction or plan.

Section 6.4 -- Priority and Return of Capital. Except as may be expressed as provided in Article IX, no Member or Economic Interest Owner shall have priority over any other Member or Economic Interest Owner, either as to the return of Capital Contributions or as to Net Profits, Net Losses or distributions; provided this section shall not apply to repayment of loans (as distinguished from Capital Contributions) which a Member has made to the Company.

## ARTICLE VII

### CONTRIBUTIONS TO THE COMPANY AND CAPITAL ACCOUNTS

Section 7.1 -- Member's Capital Contributions. Each Member shall contribute such cash, property or services as is set forth in Exhibit B hereto as its share of the Initial Capital Contribution.

Section 7.2 -- Additional Contributions. Except as set forth in Section 7.1, no Member shall be required to make any Capital Contribution. The Managers may determine from time to time that additional Capital Contributions are necessary or appropriate in connection with the conduct of the Company's business (including without limitation, expansion or diversification or to meet operating deficits). In such event, the Members shall have the opportunity (but not the obligation), to participate in such additional Capital Contributions on a pro rata basis in accordance with their Company interests.

### Section 7.3 -- Capital Accounts.

(a) A separate Capital Account will be maintained for each Member. In general, each Member's Capital Account will be: (1) increased by (a) the amount of money contributed by such Member to the Company; (b) the agreed fair market value of property or service contributed by such Member to the Company (net of liabilities secured by such contributed property that the Company is considered to assume or take subject to under Section 752 of the Code; and (c) allocations to such Member of Net Profits; and (II) decreased by (a) the amount of money distributed to such Member by the Company; (b) the fair market value of property distributed to such Member by the Company (net of liabilities secured by such distributed property that such Member is considered to assume or take subject to under Section 752 of the Code); and (c) allocations to the account of such Member net Losses. Capital accounts will be maintained in accordance with the requirements of 704(b) of the Code and the Treasury Regulations promulgated thereunder.

(b) In the event of a permitted sale or exchange of a Membership Interest or an Economic Interest in the Company, the Capital Account of the transferor shall become the Capital Account of the transferee to the extent it relates to the transferred Membership Interest or Economic Interest in accordance with Section 1.704-1 (b) (2) (iv) of the Treasury Regulations.

(c) Upon liquidation of the Company (or the Member's Membership Interest or Economic Interest Owner's Economic Interest), liquidating distributions will be made in accordance with the positive Capital Account balances of the Members and Economic Interest Owners, as determined after taking into account all Capital Account adjustments for the Company's taxable year during which the liquidation occurs. Liquidation proceeds will be paid within sixty days of the end of the taxable year (or, if later, within 120 days after the date of the liquidation.) The Company may offset damages for breach of this Operating Agreement by a Member or Economic Interest Owner whose interest is liquidated (either upon the withdrawal of the Member or the liquidation of the Company) against the amount otherwise distributable to such Member.

(d) Except as otherwise required in the Connecticut Act (and subject to Section 7.1 and 7.2), no Member or Economic Interest Owner shall have any liability to restore all or any portion of a deficit balance in such Member's or Economic Interest Owner's Capital Account.

## ARTICLE VIII

### ALLOCATIONS, INCOME TAX AND DISTRIBUTIONS

Section 8.1 -- Allocations of Profits and Losses. The Net Profits and Net Losses of the Company for each Fiscal Year will be allocated to the Members in the manner determined by the Managers to reasonably reflect the Members' interests in accordance with the percentage allocations set forth in Exhibit B attached hereto and in compliance with applicable tax law.

Section 8.2 -- Distributions. Except as provided in Section 7.3(c), all distributions of cash or other property shall be made to the Members pro rata in proportion to the respective Capital Interests of the Members on the record date of such distribution. Except as provided in Section 8.4, all distributions of Distributable Cash

and property shall be made at such time as determined by the Manager. No Member shall have the right to demand and receive property other than cash irrespective of the nature of its Capital Contribution. All amounts withheld pursuant to the Code or any provisions of state or local tax law with respect to any payment or distribution to the Members from the Company shall be treated as amounts distributed to the relevant Member or Members pursuant to this Section 8.2.

Section 8.3 -- Limitation Upon Distributions. No distribution shall be declared and paid unless, after the distribution is made, the assets of the Company are in excess of all liabilities of the Company, except liabilities to Members on account of their contributions.

Section 8.4 -- Interest on and Return of Capital Contributions. No other Member shall be entitled to interest on its Capital Contribution or to return of its Capital Contribution, except as otherwise specifically provided for herein.

Section 8.5 -- Loans to Company. Nothing in this Operating Agreement shall prevent any Member from making secured or unsecured loans to the Company by agreement with the Company.

Section 8.6 -- No Right to Distribution. Anything in this Agreement or in Section 30 of the Connecticut Act to the contrary notwithstanding, no Member shall be entitled to receive any distribution of money or other property in excess of \$1.00 by reason of such persons ceasing to be a member, except (i) upon dissolution of the Company, or (ii) upon affirmative vote or written consent of Members holding a Majority interest.

## ARTICLE IX

### ACCOUNTING, REPORTS

Section 9.1 -- Accounting Period. The Company's accounting period shall be the calendar year.

Section 9.2 -- Records, Audits, and Reports. The Managers shall maintain records and accounts of all operations and expenditures of the Company. At a minimum the Company shall keep at its principal place of business the following records:

- (a) A current and past list setting forth in alphabetical order the full name and last known business, residence, or mailing address of each Member, Economic Interest Owner and Manager, both past and present;
- (b) A copy of the Articles of Organization of the Company and all amendments thereto, together with executed copies of any powers of attorney pursuant to which any articles of amendment have been executed.
- (c) Copies of the Company's federal, state, and local income tax returns and financial statements for the three most recent years, or, if such returns or statements were not prepared for any reason, copies of the information and statements provided to, or which should have been provided to, the Members to enable them to prepare their federal, state and local tax returns for such period.

08/26/2015 16:02



DELIVERY ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, 50 TRINITY STREET, HARTFORD, CT 06103  
PHONE: 800-509-8003 WEBSITE: www.concord-acts.ct.gov

(FAX)

P.003/005

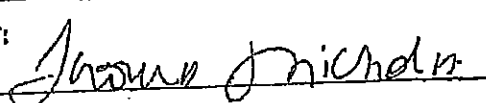
Section E-1

# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY - DOMESTIC

C.G.S. §§34-120; 34-121

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH B1/2 X

FILING #0005387563 PG 01 OF 02 VOL B-02096  
FILED 08/26/2015 04:00 PM PAGE 00304  
SECRETARY OF THE STATE  
CONNECTICUT SECRETARY OF THE STATE

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS) NAME: Kevin F. Rennle ADDRESS: 1708 Ellington Road  CITY: South Windsor STATE: CT ZIP: 06074		MAKE CHECKS PAYABLE TO "SECRETARY OF THE STATE"
1. NAME OF LIMITED LIABILITY COMPANY - REQUIRED: (MUST INCLUDE BUSINESS DESIGNATION I.E. LLO, L.L.C., ETC.) <b>RELEAF RECOVERY, LLC</b>		
2. DESCRIPTION OF BUSINESS TO BE TRANSACTED OR PURPOSE TO BE PROMOTED - REQUIRED: ATTACH B1/2 X 11 SHEETS IF NECESSARY. The purpose for which the Limited Liability Company is organized is to engage in any lawful act or activity for which Limited Liability Companies may be formed under the Connecticut Limited Liability Company Act.		
3. LLC'S PRINCIPAL OFFICE ADDRESS - REQUIRED: (NO P.O. BOX) PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE. ADDRESS: 379 Quarry Brook Drive  CITY: South Windsor STATE: Connecticut ZIP: 06074		
4. MAILING ADDRESS, IF DIFFERENT THAN #3; PROVIDE FULL ADDRESS. "SAME AS ABOVE" NOT ACCEPTABLE. ADDRESS:  CITY: STATE: ZIP:		
5. APPOINTMENT OF STATUTORY AGENT FOR SERVICE OF PROCESS - REQUIRED: (COMPLETE A OR B NOT BOTH) <input checked="" type="checkbox"/> A. IF AGENT IS AN INDIVIDUAL. PRINT OR TYPE FULL LEGAL NAME:  <b>Thomas Nicholas</b>		
BUSINESS ADDRESS (P.O. BOX NOT ACCEPTABLE) IF NONE, MUST STATE "NONE"  ADDRESS: 379 Quarry Brook Drive  CITY: South Windsor STATE: Connecticut ZIP: 06074	CONNECTICUT RESIDENCE ADDRESS (P.O. BOX NOT ACCEPTABLE)  ADDRESS: 379 Quarry Brook Drive  CITY: South Windsor STATE: Connecticut ZIP: 06074	
SIGNATURE ACCEPTING APPOINTMENT: 		

(FAX)

08/26/2015 16:02

PRINT OR TYPE NAME OF BUSINESS AS IT APPEARS ON OUR RECORDS:

FILING #0005387563 PG 02 OF 02 VOL B-02096  
FILED 08/26/2015 04:00 PM PAGE 00305  
SECRETARY OF THE STATE  
CONNECTICUT SECRETARY OF THE STATE

CT BUSINESS ADDRESS (P.O. BOX UNACCEPTABLE)

ADDRESS:

CITY:

ZIP:

STATE:

SIGNATURE ACCEPTING APPOINTMENT ON BEHALF OF AGENT:

PRINT NAME & TITLE OF PERSON SIGNING:

6. MANAGER OR MEMBER INFORMATION-REQUIRED: (MUST LIST AT LEAST ONE MANAGER OR MEMBER OF THE LLC.)  
ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.

NAME	TITLE	BUSINESS ADDRESS (No. P.O Box) IF NONE, MUST STATE "NONE"	RESIDENCE ADDRESS: (No. P.O Box)
Thomas Nicholas	Managing Member	379 Quarry Brook Drive South Windsor, CT 06074	379 Quarry Brook Drive South Windsor, CT 06074

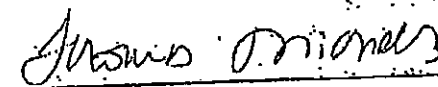
7. MANAGEMENT - PLACE A CHECK NEXT TO THE FOLLOWING STATEMENT ONLY IF IT APPLIES  
 MANAGEMENT OF THE LIMITED LIABILITY COMPANY SHALL BE VESTED IN A MANAGER OR MANAGERS

8. ENTITY EMAIL ADDRESS-REQUIRED: (IF NONE, MUST STATE "NONE")

tj.nicholas@att.net

9. EXECUTION: (SUBJECT TO PENALTY OF FALSE STATEMENT)

DATED THIS 26th DAY OF August, 2015.

NAME OF ORGANIZER (PRINT OR TYPE)	SIGNATURE
Thomas Nicholas	

AN ANNUAL REPORT WILL BE DUE YEARLY IN THE ANNIVERSARY MONTH THAT THE ENTITY WAS FORMED/REGISTERED AND CAN BE  
EASILY FILED ONLINE @ [WWW.GOODCORP-SOFS.CT.GOV](http://WWW.GOODCORP-SOFS.CT.GOV)  
CONTACT YOUR TAX ADVISOR OR THE TAXPAYER SERVICE CENTER AT THE DEPARTMENT OF REVENUE SERVICES AS TO ANY  
POTENTIAL TAX LIABILITY RELATING TO YOUR BUSINESS, INCLUDING QUESTIONS ABOUT THE BUSINESS ENTITY TAX.  
TAX PAYER SERVICE CENTER, (800) 382-9483 OR (860) 297-5962 OR GO TO [WWW.CT.GOV/DTS](http://WWW.CT.GOV/DTS)

COPY

ARTICLE IDEFINITIONS

The following terms used in this Operating Agreement shall have the following meanings (unless otherwise expressly provided herein);

(a) "Article of Organization" shall mean the Article of Organization of **RELEAF RECOVERY, LLC**, as filed with the Secretary of the State of Connecticut, as the same may be amended from time to time. A copy of the Articles of Organization are attached hereto as Exhibit A.

(b) "Capital Account" as of any given date shall mean the Capital Contribution to the Company by a Member as adjusted up to the date in question pursuant to Article VII.

(c) "Capital Contribution" shall mean any agreed contribution to the capital of the Company in cash, property or services by a Member, whenever made. "Initial Capital Contribution" shall mean the initial contribution to the capital of the Company pursuant to this Operating Agreement as set forth on Exhibit A attached hereto.

(d) "Company Interest" shall mean with respect to each Member, such Member's interest in the profits and losses of the Company as set forth on Exhibit B attached hereto.

(e) "Code" shall mean the Internal Revenue Code of 1986 or corresponding provisions of subsequent superseding federal revenue laws.

(f) "Connecticut Act" shall mean the Connecticut Limited Liability Company Act (P.A. 93-267).

(g) "Company" shall refer to **RELEAF RECOVERY, LLC**.

(h) "Deficit Capital Account" shall mean, with respect to any Member, the deficit balance, if any, in such Member's Capital Account as of the end of the taxable year.

(i) "Distributable Cash" means all cash, revenues and funds received by the Company from Company operations, less the sum of the following to the extent paid or set aside by the Company: (i) all principal and interest payments on indebtedness of the Company and all other sums paid to lenders; (ii) all cash expenditures incurred incident to the normal operation of the Company's business; (iii) such Reserves as the Managers deem reasonably necessary to the proper operation of the Company's business.

(j) "Economic Interest" shall mean a Member's Economic Interest in the Company's Net Profits, New Losses and distributions of the Company's assets pursuant to this Operating Agreement and the Connecticut Act, but shall not include any right to participate in the management or affairs of the Company, including the right to vote on, consent to or otherwise participate in any decision of the Members or Managers.

(k) "Economic Interest Owner" shall mean the owner of an Economic Interest who is not a member.

- (l) "Entity" shall mean a general partnership, a limited partnership, a domestic or foreign limited liability company, a trust, an estate, an association, a corporation or any other legal or commercial entity.
- (m) "Event of Dissociation" means an event that causes a person to cease to be a Member, as provided in Section 41 of the Connecticut Act.
- (n) "Fiscal Year" shall mean the Company's fiscal year, which shall be the calendar year.
- (o) "Gifted Member" shall mean any Member or Economic Interest Owner who gifts, bequeaths or otherwise transfers for no consideration (by operation of law or otherwise, except with respect to bankruptcy) all or any part of its Membership Interest or Economic Interest.
- (p) "Majority Interest" shall mean one or more Interests of Members which taken together exceed 50% of the aggregate of all Company interests.
- (q) "Manager" shall mean one or more managers designated in the manner provided in this agreement.
- (r) "Member" shall mean each of the parties who executes a counterpart of this Operating Agreement as a Member and each of the parties who may hereafter become Members as permitted herein. To the extent a Manager has acquired a Membership Interest in the Company, he will have all the rights of a Member with respect to such Membership Interest, and the term "Member" as used herein shall include a Manager to the extent he has acquired such Membership Interest in the Company. If a Person is a Member immediately prior to the purchase or other acquisition by such Person of an Economic Interest, such Person shall have all the rights of a Member with respect to such purchased or otherwise acquired Membership Interest or Economic Interest, as the case may be.
- (s) "Membership Interest" shall mean, a Member's entire interest in the Company including such Member's Economic Interest and the right to participate in the management of the business and affairs of the Company, including the right to vote on, consent to, or otherwise participate in any decision or action of or by the Members granted pursuant to this Operating Agreement or the Connecticut Act.
- (t) "Net Profits" and "Net Losses" shall mean the income, gain, loss, deductions and credits of the Company in the aggregate or separately stated, as appropriate, determined in accordance with the method of accounting selected by the Managers at the close of each fiscal year on the company's information tax return filed for federal income tax purposes.
- (u) "Operating Agreement" shall mean this Operating Agreement as originally executed and as amended from time to time.
- (v) "Person" shall mean an individual or Entity, and the heirs, executors, administrators, legal representatives, successors, and the assigns of such "person" where the context so permits.
- (w) "Reserves" shall mean, with respect to any fiscal period, funds set aside or amounts allocated during such period to reserves which shall be maintained in amounts deemed sufficient by the taxes, insurance, debt service or other costs or expenses incident to the ownership or operation of the Company's business.



(x) "Selling Member" shall mean any Member or Economic Interest Owner which sells, assigns, or otherwise transfers for consideration all or any portion of its Membership Interest or Economic Interest.

(y) "Transferring Member" shall collectively mean a Selling Member and a Gifting Member.

(z) "Treasury Regulations" shall include proposed, temporary and final regulations promulgated under the Code in effect as of the date of filing the Articles of Organization and the corresponding sections of any regulations subsequently issued that amend or supersede such regulations.

## ARTICLE II

### FORMATION OF COMPANY

Section 2.1 -- Formation. The Company was formed as a limited liability company under the Connecticut Act by the filing of its Articles of Organization with the Secretary of the State of Connecticut on

## ARTICLE III

### BUSINESS OF COMPANY

Section 3.1 -- Permitted Businesses. The business of the Company shall be as set forth in its Articles of Organization.

## ARTICLE IV

### NAMES AND ADDRESS OF MEMBERS

The name and address of the initial Members are:

Thomas Nicholas  
379 Quarry Brook Drive  
South Windsor, CT 06074

Angela D'Amico  
65 Brittany Avenue  
Trumbull, CT 06611

John P. Glowik, Jr.  
44 Independence Lane  
Shrewsbury, MA 01545

High Street Capital Partners  
70 Island Avenue  
Madison, CT 06443

## ARTICLE V

### RIGHTS AND DUTIES OF MANAGERS

Section 5.1 -- Management. The business and affairs of the Company shall be managed by its Managers. The managers shall direct, manage and control the business of the Company to the best of their ability. Except for situations in which the approval of the members is expressly required by this Operating Agreement or by nonwaivable provisions of applicable law, the Managers shall have full and complete authority, power and discretion to manage and control the business, affairs and properties of the

other acts or activities customary or incident to the management of the Company's business. At any time when there is more than one Manager, any one Manager may exercise all of the powers delegated to the managers herein and may take any action permitted to be taken by the Managers, unless the approval of more than one of the Managers is expressly required pursuant to this Operating Agreement.

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The Company shall have one Manager:

**Thomas Nicholas**

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- (b) To borrow money for the Company from banks, other lending institutions, the Managers, Members, or affiliates of the Managers or Members on such terms as the Managers deem appropriate, and in connection therewith, to mortgage, hypothecate, encumber and grant security interests in the assets of the Company to secure repayment of the borrowed sums;
- (c) To purchase liability and other insurance to protect the Company's property and interest;
- (d) To hold and own any Company real and/or personal properties in the name of the Company;
- (e) To invest any company funds temporarily (by way of example but not limitation) in time deposits, short-term governmental obligations, commercial paper or other investments;
- (f) Upon the affirmative vote or written consent Members holding at least two-thirds of all Company Interests, to sell or otherwise dispose of all or substantially all of the assets of the Company as part of a single transaction or plan;
- (g) To execute on behalf of the Company all instruments and documents, including, without limitation, checks; drafts; notes and other negotiable instruments; mortgages or deeds of trust; security agreements; financing statements; documents providing for the acquisition, mortgage or disposition of the Company's property; assignments; bills of sale; leases; partnership agreements, operating agreements of other limited liability companies; and any other instruments or documents necessary or appropriate, in the opinion of the Managers, to the business of the Company;

(h) To employ accountants, legal counsel, managing agents or other experts to perform services for the Company and to compensate them from Company funds;

(i) To enter into any and all other agreements on behalf of the Company, with any other Person for any purpose, in such forms as the Managers may approve; and

(j) To do and perform all other acts as may be necessary or appropriate to the conducts of the Company's business.

Unless authorized to so do by this Operating Agreement or by written authorization of a Manager or Managers of the Company, no attorney-in-fact, employee or other agent of the Company shall have any power or authority to bind the Company in any way, to pledge its credit or to render it liable for any purpose. No Member (other than a Member who is also a Manager) shall have any power or authority to bind the Company unless the Member has been authorized by the Managers to act as an agent of the Company in accordance with the previous sentence.

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### CONTRIBUTIONS TO THE COMPANY AND CAPITAL ACCOUNTS

Section 7.1 -- Member's Capital Contributions. Each Member shall contribute such cash, property or services as is set forth in Exhibit B hereto as its share of the Initial Capital Contribution.

Section 7.2 -- Additional Contributions. Except as set forth in Section 7.1, no Member shall be required to make any Capital Contribution. The Managers may determine from time to time that additional Capital Contributions are necessary or appropriate in connection with the conduct of the Company's business (including without limitation, expansion or diversification or to meet operating deficits). In such event, the Members shall have the opportunity (but not the obligation), to participate in such additional Capital Contributions on a pro rata basis in accordance with their Company interests.

Section 7.3 -- Capital Accounts.

(a) A separate Capital Account will be maintained for each Member. In general, each Member's Capital Account will be: (I) increased by (a) the amount of money contributed by such Member to the Company; (b) the agreed fair market value of property or service contributed by such Member to the Company (net of liabilities secured by such contributed property that the Company is considered to assume or take subject to under Section 752 of the Code; and (c) allocations to such Member of Net Profits; and (II) decreased by (a) the amount of money distributed to such Member by the Company; (b) the fair market value of property distributed to such Member by the Company (net of liabilities secured by such distributed property that such Member is considered to assume or take subject to under Section 752 of the Code); and (c) allocations to the account of such Member net Losses. Capital accounts will be maintained in accordance with the requirements of 704(b) of the Code and the Treasury Regulations promulgated thereunder.

(b) In the event of a permitted sale or exchange of a Membership Interest or an Economic Interest in the Company, the Capital Account of the transferor shall become the Capital Account of the transferee to the extent it relates to the transferred Membership Interest or Economic Interest in accordance with Section 1.704-1 (b) (2) (iv) of the Treasury Regulations.

(c) Upon liquidation of the Company (or the Member's Membership Interest or Economic Interest Owner's Economic Interest), liquidating distributions will be made in accordance with the positive Capital Account balances of the Members and Economic Interest Owners, as determined after taking into account all Capital Account adjustments for the Company's taxable year during which the liquidation occurs. Liquidation proceeds will be paid within sixty days of the end of the taxable year (or, if later, within 120 days after the date of the liquidation.) The Company may offset damages for breach of this Operating Agreement by a Member or Economic Interest Owner whose interest is liquidated (either upon the withdrawal of the Member or the liquidation of the Company) against the amount otherwise distributable to such Member.

(d) Except as otherwise required in the Connecticut Act (and subject to Section 7.1 and 7.2), no Member or Economic Interest Owner shall have any liability to restore all or any portion of a deficit balance in such Member's or Economic Interest Owner's Capital Account.

ARTICLE VIII

ALLOCATIONS, INCOME TAX AND DISTRIBUTIONS

Section 8.1 -- Allocations of Profits and Losses. The Net Profits and Net Losses of the Company for each Fiscal Year will be allocated to the Members in the manner determined by the Managers to reasonably reflect the Members' interests in accordance with the percentage allocations set forth in Exhibit B attached hereto and in compliance with applicable tax law.

Section 8.2 -- Distributions. Except as provided in Section 7.3(c), all distributions of cash or other property shall be made to the Members pro rata in proportion to the respective Capital Interests of the Members on the record date of such distribution. Except as provided in Section 8.4, all distributions of Distributable Cash

and property shall be made at such time as determined by the Manager. No Member shall have the right to demand and receive property other than cash irrespective of the nature of its Capital Contribution. All amounts withheld pursuant to the Code or any provisions of state or local tax law with respect to any payment or distribution to the Members from the Company shall be treated as amounts distributed to the relevant Member or Members pursuant to this Section 8.2.

Section 8.3 -- Limitation Upon Distributions. No distribution shall be declared and paid unless, after the distribution is made, the assets of the Company are in excess of all liabilities of the Company, except liabilities to Members on account of their contributions.

Section 8.4 -- Interest on and Return of Capital Contributions. No other Member shall be entitled to interest on its Capital Contribution or to return of its Capital Contribution, except as otherwise specifically provided for herein.

Section 8.5 -- Loans to Company. Nothing in this Operating Agreement shall prevent any Member from making secured or unsecured loans to the Company by agreement with the Company.

Section 8.6 -- No Right to Distribution. Anything in this Agreement or in Section 30 of the Connecticut Act to the contrary notwithstanding, no Member shall be entitled to receive any distribution of money or other property in excess of \$1.00 by reason of such persons ceasing to be a member, except (i) upon dissolution of the Company, or (ii) upon affirmative vote or written consent of Members holding a Majority interest.

## ARTICLE IX

### ACCOUNTING, REPORTS

Section 9.1 -- Accounting Period. The Company's accounting period shall be the calendar year.

Section 9.2 -- Records, Audits, and Reports. The Managers shall maintain records and accounts of all operations and expenditures of the Company. At a minimum the Company shall keep at its principal place of business the following records:

(a) A current and past list setting forth in alphabetical order the full name and last known business, residence, or mailing address of each Member, Economic Interest Owner and Manager, both past and present;

(b) A copy of the Articles of Organization of the Company and all amendments thereto, together with executed copies of any powers of attorney pursuant to which any articles of amendment have been executed.

(c) Copies of the Company's federal, state, and local income tax returns and financial statements for the three most recent years, or, if such returns or statements were not prepared for any reason, copies of the information and statements provided to, or which should have been provided to, the Members to enable them to prepare their federal, state and local tax returns for such period.

(d) Copies of the Company's current effective written Operating Agreement and all amendments thereto and copies of any written operating agreements no longer in effect.

(e) A writing setting forth the amount of cash, if any, and a statement of the agreed value of other property or services contributed by each Member and the times at which or the events upon the happening of which any additional contributions are to be made by each Member.

(f) A writing stating events, if any, upon the happening of which the Company is to be dissolved and its affairs wound up.

(g) Other writings, if any, prepared pursuant to a requirement in this Agreement.

Section 9.3 -- Returns and Other Elections.

(a) The Manager shall cause the preparation and timely filing of all returns required to be filed by the Company pursuant to the Code and all other tax returns deemed necessary and required in each jurisdiction in which the Company does business. Copies of such returns, or pertinent information therefrom, shall be furnished to the Members as soon as practical after the end of the Company's fiscal year but in any event prior to the date upon which Federal and Connecticut State tax returns are required to be filed by Members.

(b) All elections permitted to be made by the Company under federal or state laws shall be made by the Manager in his sole discretion, provided that the Manager shall make any tax election requested by Members owning a Majority Interest.

ARTICLE X

TRANSFERABILITY

Section 10.1 -- General. Neither a Member nor an Economic Interest Owner shall have the right to:

(a) sell, assign, transfer, pledge, hypothecate, exchange or otherwise transfer for consideration (collectively, "sell"), or

(b) gift, bequeath or otherwise transfer for no consideration (whether or not by operation of law, except in the case of bankruptcy)

all or any part of its Membership Interest or Economic Interest without the vote or written consent of Members holding a Majority Interest.

(c) In the event of either the purchase of the Selling Member's interest in the Company (including an Economic Interest), and as a condition to recognizing one or more of the effectiveness and binding nature of any such sale or gift and (subject to Section 10.2, below) substitution of a new Member as against the Company or otherwise, the remaining Members may require the Selling Member or Gifting Member and the proposed purchaser, donee or successor-in-interest, as the case may be, to execute, acknowledge and deliver to the remaining Members such instruments of transfer, assignment and assumption and such other certificates, representations and

documents, and to perform all such other acts which the remaining Members may deem necessary or desirable to:

(i) constitute such purchaser, as a Member, donee or successor-in-interest as such;

(ii) confirm that the person desiring to acquire an interest or interests in the Company, or to be admitted as a Member, has accepted, assumed and agreed to be subject and bound by all of the terms, obligations and conditions of the Operating Agreement, as the same may, have been further amended (whether such Person is to be admitted as a new Member or will merely be an Economic Interest Owner);

(iii) preserve the Company after the completion of such sale, transfer, assignment, or substitution under the laws of each jurisdiction in which the Company is qualified, organized or does business;

(iv) maintain the status of the Company as a partnership for federal tax purposes; and

(v) assure compliance with any applicable state and federal laws including securities laws and regulations.

(d) Any sale or gift of a Membership Interest or Economic Interest or admission of a Member in compliance with this Article X shall be deemed effective as of the last day of the calendar month in which the remaining Members' consent thereto was given.

(e) The Selling Member hereby indemnifies the Company and the remaining Members against any and all loss, damage, or expense (including, without limitation, tax liabilities or loss of tax benefits) arising directly or indirectly as a result of any transfer or purported transfer in violation of this Article X.

(f) A Transferring Member may gift all or any portion of its Membership Interest and Economic Interest without regard to Section 10.1(a) and (b) provided that the donee or other successor-in-interest (collectively, "donee") complies with Section 10.1(c) and further provided that the donee is either the Gifting Member's spouse, former spouse, or lineal descendant (including adopted children). In the event of the gift of all or any portion of a Gifting Member's Membership Interest or Economic Interest to one or more donees who are under 25 years of age, one or more trusts shall be established to hold the gifted interest(s) for the benefit of such donee(s) until all of the donee(s) reach the age of at least 25 years.

Section 10.2 -- Transferee Not Member in Absence of Consent of Holders of Majority Interest. Notwithstanding anything contained herein to the contrary (including, without limitation, Section 10.2 hereof), if Members holding a Majority Interest do not approve, by written consent, of the proposed sale or gift of the Transferring Member's Membership Interest or Economic Interest to a transferee or donee which is not a Member immediately prior to the sale or gift, then the proposed transferee or donee shall have no right to participate in the management of the business and affairs of the Company or to become a Member. The transferee or donee shall be merely an Economic Interest Owner. No transfer of a Member's interest in the Company (including any transfer of the Economic Interest or any other transfer which has not been approved by written consent of the Members holding a Majority Interest) shall be effective unless and until written notice (including the name and address of the



proposed transferee or donee and the date of such transfer) has been provided to the Company and the non-transferring Members.

(b) Upon and contemporaneously with any sale or gift of a Transferring Member's Economic Interest in the Company which does not at the same time transfer the balance of the rights associated with the Economic Interest transferred by the Transferring Member (including, without limitation, the rights of the Transferring Member to participate in the management of the business and affairs of the Company), the Company shall purchase from the Transferring Member, and the Transferring Member shall sell to the Company for a purchase price of \$100.00, all remaining rights and interests retained by the Transferring Member which immediately prior to such sale or gift were associated with the transferred Economic Interest.

#### ARTICLE XI

##### ADDITIONAL MEMBERS

From the date of the formation of the Company, any person or entity acceptable to Members holding a Majority Interest by their written consent may become a Member in the Company either by the issuance by the Company of Membership Interests for such consideration as Members holding a Majority Interest by their written consent shall determine, or as a transferee of a Member's Membership Interest or any portion thereof, subject to the terms and conditions of this Operating Agreement. No new Members shall be entitled to any retroactive allocation of losses, income or expense deductions incurred by the Company. The Managers may, at their option, at the time a Member is admitted, close the Company books, (as though the Company's tax year had ended) or make pro-rate allocations of loss, income and expense deductions to a new Member for that portion of the Company's tax year in which a Member was admitted in accordance with the provisions of Section 706(d) of the Code and the Treasury Regulations promulgated thereunder.

#### ARTICLE XII

##### DISSOLUTION AND TERMINATION

###### Section 12.1-- Dissolution.

(a) The Company shall be dissolved and its affairs shall be wound up upon the happening of any of the first to occur of the following:

- (i) at the time specified in its Articles of Organization;
- (ii) written consent of Members holding at least a Majority Interest;

or

- (iii) an Event of Dissociation of a Member, unless there are at least two remaining Members and the business of the Company is continued by the written consent of remaining Members holding Majority Interest within 90 days after the Event of Dissociation, and

- (iv) entry of a decree of final dissolution under Section 43 of the Connecticut Act.

Each of the Members hereby agrees that within the 60 days after the occurrence of an Event of Dissociation, they will promptly consent, in writing, to continue the business of the Company. Each of the Members further agrees promptly to consent, in writing, to continue the business of the Company upon a sale or gift either of a Member's entire Economic Interest to which all of the remaining Members do not consent within 45 days after the occurrence of such a sale or gift or upon a sale or gift of a Transferring Member's entire Membership Interest. Such consents shall be mailed or hand-delivered to the principal place of business of the Company set forth in Section 2.3 hereof (or to such other address designated by the Managers) no later than 50 days after each Withdrawal Event or transfer by Member of its entire Economic Interest or Membership Interest.) The sole remedy for breach of a Member's obligation to consent to continue the business of the Company under this Section shall be money damages (and not specific performance.)

(b) Notwithstanding anything to the contrary in this Operating Agreement, if a Member or Members owning Company Interests which in the aggregate constitute not less than two-thirds of the Company Interests vote or consent in writing to dissolve the Company, then all of the Members shall agree in writing to dissolve the Company as soon as possible (but in any event not more than 30 days) thereafter.

(c) As soon as possible following the occurrence of any of the events specified in this Section 12.1 effecting the dissolution of the Company, the Managers shall proceed to wind up the Company's business in accordance with Section 45 of the Connecticut Act.

(d) Except as expressly permitted in this Operating Agreement, a Member shall not voluntarily resign or take any other voluntary action which directly causes an Event of Dissociation. Unless otherwise approved in writing by Members owning a Majority Interest, a Member who resigns (a "Resigning Member") or whose Membership Interest is otherwise terminated by virtue of an Event of Dissociation, regardless of whether such Event of Dissociation was the result of a voluntary act by such Member, shall not be entitled to receive any distributions to which such Member would not have been entitled had such Member remained a Member. Except as otherwise expressly provided herein, a Resigning Member shall become an Economic Interest Owner. Damages for breach of this Section 12.1(e) shall be monetary damages only (and not specific performance), and such damages may be offset against distributions by the Company to which the Resigning Member would otherwise be entitled with.

### ARTICLE XIII

#### MISCELLANEOUS PROVISIONS

Section 13.1 -- Notices. Any notice, demand or communication required or permitted to be given by any provision of this Operating Agreement shall be deemed to have been sufficiently given or served for all purposes if delivered personally to the party or to an executive officer of the party to whom the same is directed or, if sent by registered or certified mail, postage and charges prepaid, addressed to the Member's and/or Company's address, as appropriate, which is set forth in this Operating Agreement. Except as otherwise provided herein, any such notice shall be deemed to be given three business days after the date on which the same was deposited in a regularly

maintained receptacle for the deposit of United States mail, addressed and sent as aforesaid.

Section 13.2 -- Application of Connecticut Law. This Operating Agreement, and the application of interpretation hereof, shall be governed exclusively by its terms and by the laws of the State of Connecticut, and specifically the Connecticut Act.

Section 13.3 -- Waiver of Action for Partition. Each Member and Economic Interest Owner irrevocably waives during the term of the Company any right that it may have to maintain any action for partition with respect to the property of the Company.

Section 13.4 -- Amendments. This Operating Agreement may not be amended except by the unanimous written agreement of all of the Members.

Section 13.5 -- Execution of Additional Instruments. Each Member hereby agrees to execute such other and further statements of interest and holdings, designations, powers of attorney and other instruments necessary to company with any laws, rules or regulations.

Section 13.6 -- Construction. Whenever the singular number is used in this Operating Agreement and when required by the context, the same shall include the plural and vice versa, and the masculine gender shall include the feminine and neuter genders and vice versa.

Section 13.7 -- Headings. The headings in this Operating Agreement are inserted for convenience only and are in no way intended to describe, interpret, define, or limit the scope, extent or intent of this Operating Agreement or any provision hereof.

Section 13.8 -- Waivers. The failure of any party to seek redress for violation or to insist upon the strict performance of any covenant or condition of this Operating Agreement shall not present a subsequent act, which would have originally constituted a violation, from having the effect of an original violation.

Section 13.9 -- Rights and Remedies Cumulative. The rights and remedies provided by this Operating Agreement are cumulative and the use of any one right or remedy by any party shall not preclude or waive the right to use any or all other remedies. Said rights and remedies are given in addition to any other rights the parties may have by law, statute, ordinance or otherwise.

Section 13.10 -- Severability. If any provision of this Operating Agreement or the application thereof to any person or circumstance shall be invalid, illegal or unenforceable to any extent, the remainder of this Operating Agreement and the application thereof shall not be affected and shall be enforceable to the fullest extent permitted by law.

Section 13.11 -- Heirs, Successors and Assigns. Each and all of the covenants, terms, provisions and agreements herein contained shall be binding upon and inure to the benefit of the parties hereto and, to the extent permitted by this Operating Agreement, their respective heirs, legal representatives, successors and assigns.

Section 13.12 -- Creditors. None of the provisions of this Operating Agreement shall be for the benefit of or enforceable by any creditors of the Company.

Section 13.13 -- Counterparts. This Operating Agreement may be executed in counterparts, each of which shall be deemed an original but all of which shall constitute one and the same instrument.

Section 13.14 - - Rule Against Perpetuities. The parties hereto intend that the Rule Against Perpetuities (and any similar rule of law) not applicable to any provisions of this Operating Agreement. However, notwithstanding anything to the contrary of this Operating Agreement, if any provisions in this Operating Agreement would be invalid or unenforceable because of the Rule Against Perpetuities or any similar rule of law but for this Section 13.14, the parties hereto hereby agree that any future interest which is created pursuant to said provisions shall cease if it is not vested within twenty-one years after the death of the survivor of the group composed of the Initial Members who are individuals and their issue who are living on the date of this Operating Agreement and their issue, if any, who are living on the effective date of this Operating Agreement.

IN WITNESS WHEREOF, the undersigned members have hereunto set his hand or caused this instrument to be executed as of the 26<sup>th</sup> day of August, 2015.

Releaf Recovery, LLC

By:


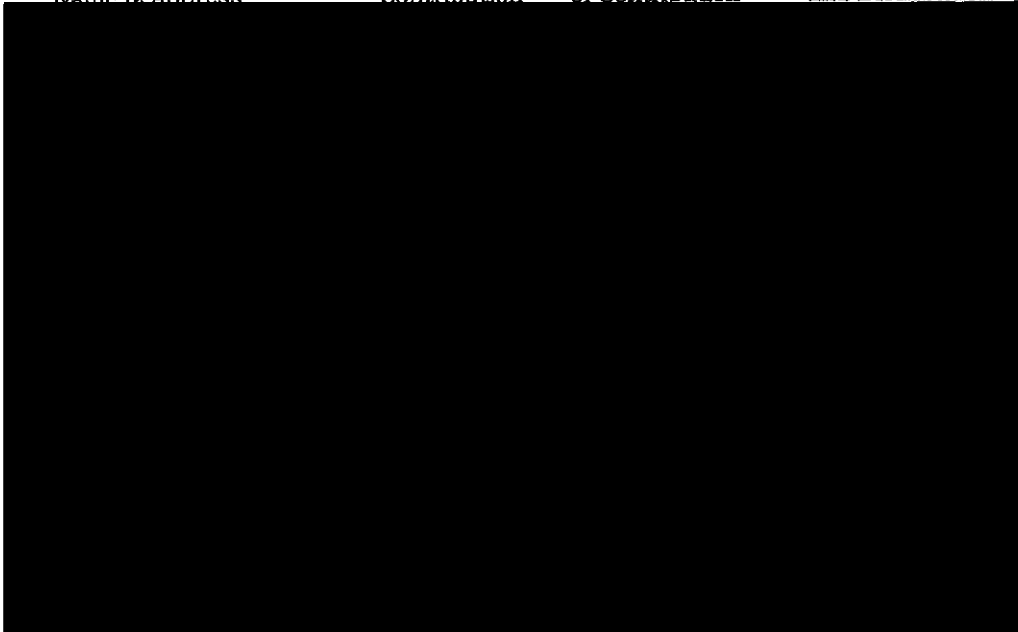
  
Thomas Nicholas

EXHIBIT B

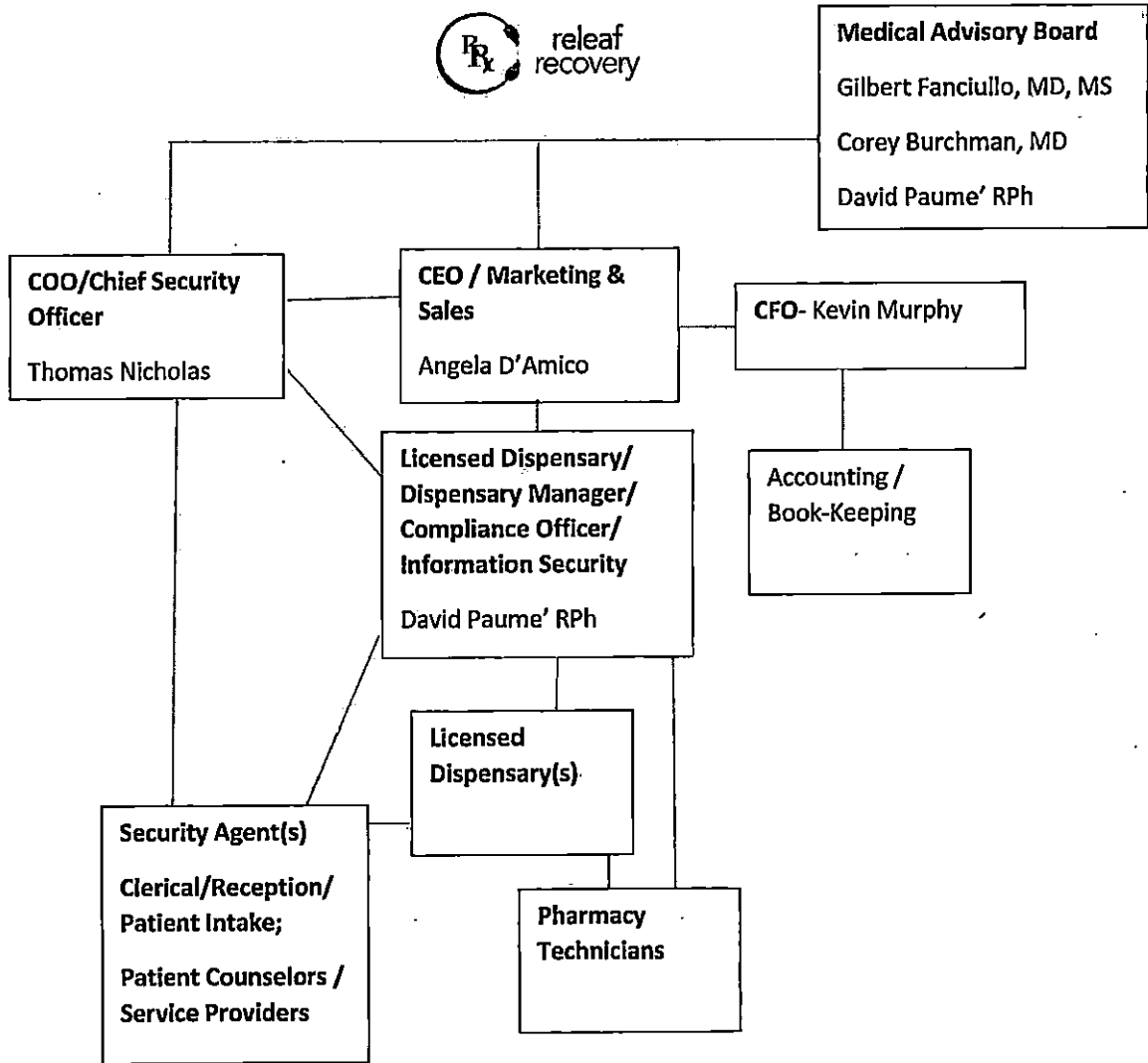
INITIAL MEMBERS OF

RELEAF RECOVERY, LLC

<u>Name &amp; Address</u>	<u>Agreed Contribution</u>	<u>Agreed Value of Contribution</u>	<u>Percentage Interest in Profits, Losses and Distributions</u>
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Organizational Chart



Resumes and relevant experience continued on next page



**Angela  
D'Amico**

55 BRITTANY ROAD  
TRUMBULL, CONNECTICUT 06611  
203.362.8461

RESUME

## CORPORATE BUSINESS OWNER

Dynamic results-oriented professional with over 30 years of broad based experience and visible achievements in business development/startup, strategic business partnerships and emerging markets. Out of the box thinker with visionary leadership strengths; resourceful team player characterized by innovative entrepreneurial spirit.

## CORE COMPETENCIES

Business Start Up and Turnaround, Market Assessment and Research, Customer Relationship Management. Strategic Business Planning. Product Development and Launch. Client Needs Analysis, Productivity and Process Improvement. Training and Development. Major Account and National Sales. Strategic Sales and Marketing.


## CAREER

### **D&B WELLNESS, LLC dba COMPASSIONATE CARE CENTER OF CT - FOUNDER 2013- PRESENT**

Supervise and oversee daily operations of CCC including but not limited to; laws, ordering, paperwork, sales, vendor relationships, patient services, regulatory compliance, patient communication and education. Speak and coordinate all educational classes in dispensary and at support groups for approved diseases. Meet with doctors to educate and hopefully sign up to become a certifying doctor for the program. Train, coach and encourage success of all managers and staff. Maintain daily contact with security specialist to ensure all security measure are current and operational. Maintain all patient lists and communicate with expired card holders to help in the recertification process. Handle all marketing and merchandising for CCC.

### **A.D. LINES EURO GROUP, INC. PRESIDENT/OWNER 1986-PRESENT**

Developed and built business from start up to generate multi million dollar sales annually; established strong account customer base of retailers, manufacturers, and independents. Increased sales year after year by leveraging referenceable accounts to build credibility and introducing new sales tools and marketing collateral. Opened the market ahead of the competitions, persuasively overcoming customers concerns about current economic down trend and belief in our product viability. Created marketing presentation and demo products. Developed all trade show booth design and trend. Hired, trained and supervised all staff, sales team, and independent contractors

 **EDUCATION**  
BARUCH COLLEGE  
THE CITY UNIVERSITY OF NEW YORK  
ZICKLIN SCHOOL OF BUSINESS  
B.S. 1979

  
Angela  
D'Amico

55 BRITTANY ROAD • TRUMBULL, CONNECTICUT 06611 • 203.362.8461

angela@ccc-ct.com

## Thomas J. Nicholas

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379 Quarry Brook Drive  
 South Windsor, CT 06074  
 860.644.9440 - 860.558.4935  
 t.j.nicholas@att.net

### Education

Diploma in Professional Registered Nursing  
 Ellis Hospital School of Nursing  
 Schenectady, New York  
 Graduated with Honors, 1977

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### Professional Profile

#### Prime Wellness of Connecticut, LLC 2013 to Present

- CEO for PWCT which was licensed as a Medical Marijuana Dispensary Facility by CT DCP on 4.10.14. One of only six licenses granted in Connecticut. The first Medical marijuana Dispensary in CT history to pass opening inspection by the department of drug control on 8.8.14 and the only one to do so in the 120 day period as required by regulation.
- PWCT employs 5 full time and 5 part employees ranging from Pharmacists to security officers and is open six days per week to serve the needs of patients.

#### Sustainable Products, Inc. 2003-2014

- Sustainable Products was an Industrial Products Sales, Marketing and Distribution Company.
- Represented a Connecticut company's environmentally friendly product line of industrial lubricants and machining fluids to the machining and fabricating industry in the northeast.
  - Represented a Capital Equipment Manufacturer in the machined parts finishing area.

#### Eastview Dialysis Center, Inc. 1997 - 2011

#### Eastview Dialysis Properties, Inc. 1997 - 2013

- President and CEO of out-patient dialysis facility operating business and properties management business both located at 120 Victor Heights Parkway, Victor, NY. 14564. I was a founding shareholder and participated as CEO in the day to day management of both companies.
- Eastview Dialysis Center provided out-patient dialysis treatments to @120 chronic renal failure patients and was licensed in all treatment modalities. The operations were carried out in an 8,600 sq. ft. building built expressly to serve the needs of the dialysis patients.
- The operating company was responsible for all operations and billing in excess of \$3M to Medicare and Medicaid for patient services on an annual basis. My involvement in Eastview Dialysis Inc. terminated when the company was sold to Fresenius Medical Care in 2011. I'm currently the President and CEO of Eastview Dialysis Properties, Inc. (EDPI). EDPI building and property located at 120 Victor Heights Parkway, Victor, NY was sold in November, 2013.

#### Prime Medical, Inc. 1990 - 1997

- As co-founder and fifty percent owner, operated a successful and well respected medical products sales and distribution company concentrating on dialysis products.
- Developed a medical water purification company called Prime Water. Prime Water engineered, designed, installed and serviced medical grade water purification systems for dialysis units and medical facilities in the eastern United States.



## Thomas J. Nicholas

- My involvement in Prime Medical, Inc. terminated when the company was sold to Fresenius Medical Care in 1997.

### Connecticut Based Dialysis Facilities – 1991 - 2001

- As President and CEO of five Connecticut based dialysis facilities (Enfield Dialysis, East Hartford Dialysis, Central CT Dialysis, Rocky Hill Dialysis and Middlesex Dialysis), I was responsible for operations and day to day management. Our facilities treated in excess of 450 patients on a three time per week basis. Each facility billed between two and four million dollars in annual patient services to Medicare under the ESRD program, Medicaid and private insurers on an annual basis
- Partner and board member in Connecticut businesses as well as ESRD facilities and related businesses in Massachusetts, New Hampshire and New York (12 total). **Please see attached facilities list with specifics.**
- **NO LICENSED MEDICAL FACILITY OR ANY BUSINESS WHERE I HAD CONTROL HAS EVER BEEN ALLEGED OR FOUND TO HAVE VIOLATED ANY FEDERAL, STATE OR LOCAL LAWS OR REGULATIONS DURING THE TIME PERIOD WHEN I WAS ASSOCIATED.**

### National Medical Care, Inc. – 1981 – 1990

- Northeast Area Manager responsible for sales and marketing of manufactured dialysis disposable products and systems to dialysis facilities in New York, New Jersey and New England.
- National Dialysis Sales Specialist Salesman of the year twice and Regional Salesman of the year four times.

### Professional Nursing

- Worked as an R.N./Orthopedic technician and Operating Room assistant in an Orthopedic Practice (Paulsen and Albano, PC) in Schenectady, N.Y. in 1977.
- Worked as an Operating Room Nurse at the Hermann Hospital in Houston, Texas in 1978-1979.
- Worked as an Operating Room Nurse at Hartford Hospital in Hartford, CT in 1980.

### Professional Skills and Business Accomplishments

My medical training and background has allowed me to be very successful during my adult working life. Moreover, the fact that I was trained as a Registered Nurse and have worked in both hospital and private medical businesses has given me a real appreciation and understanding of how to access and attend to the needs of clients and patients alike. We formed a number of dialysis operating businesses with physicians as partners (being mindful of Stark and safe harbors laws).

As President and CEO of six individual dialysis companies in two states, I participated in all aspects of the business from formation to site location and development to regulatory application and day to day operation. I was agent of service for all six companies. I was personally vetted by both state health departments in the states where we operated and the federal government as a billing agency to Medicare and Medicaid.

**Kevin P. Murphy**  
 322 West 57th Street, Apt. 48H  
 New York, NY 10019  
 PH: 917.664.2913

**Professional Summary: Hedge Fund Marketing Expert**

Kevin Murphy is currently Managing Member of Murphy Capital, LLC. Prior to Murphy Capital, he was a Founding Member and Managing Partner of Tandem Global Partners, LLC. Kevin, along with Joseph Petri and other seasoned professionals started the firm in 2007. These entrepreneurs and their vision formed the foundation of Tandem Global Partners and were primary drivers behind its success. Prior to launching Tandem Global Partners, Kevin was a Managing Partner at Stanfield Capital Partners. While at Stanfield, he was instrumental in growing the company from inception to a \$30 billion alternative money management firm. He was a member of the Operating and Management team that oversaw all aspects of Stanfield's business, which included risk management, sales and distribution, client services, legal, compliance and operations. Kevin was integral in spearheading the strategic development of the firm and responsible for attracting key personnel and money management talent.

**Professional History**

- 2012 - Current **High Street Capital Partners, LLC**  
 Managing Member. Engaged in nurturing a variety of legal cannabis companies through their start-up phases, including fiscal analysis, capital investment and financial growth strategies and assessments critical to their success.
- 2012 - Current **Murphy Capital, LLC**  
 Managing Member. Engaged in the investment management of private and public companies for the benefit of family and philanthropic interests.
- 2007-2012 **Tandem Global Partners, Managing Partner**  
 Responsibilities Included: Managing all aspects of the business including distribution, strategic development, structural and risk oversight.
- 1999-2006 **Stanfield Capital Partners, Managing Partner**  
 Responsibilities Included: Managing all aspects of the business including distribution, strategic development, structural and risk oversight.
- 1996-1999 **Gleacher NatWest, Partner**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1994-1996 **Schroders, Senior Vice President**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1992-1994 **Lazard Freres, Vice President**  
 Responsibilities Included: Initiating and selling non-investment corporate debt to traditional money managers and hedge funds.
- 1988-1991 **Cantor Fitzgerald, Vice President**  
 Responsibilities Included: Brokering mortgage-backed securities.

**Kevin P. Murphy**  
322 West 57th Street, Apt. 48H  
New York, NY 10019  
PH: 917.664.2913

**Education**

1985      **The College of the Holy Cross**  
Received a Bachelor of Arts Degree

**Other**

**St. Benedict Joseph Medical Center in Honduras**  
Member of Board of Director

**Business References**

**Joe Petri**  
Former CEO of HSBC Americas  
New York, NY  
973-722-1695

**Mike Vranos**  
CEO Ellington Management Group  
Old Greenwich, CT  
203-698-2422

**Personal Reference**

**Richard Johnson**  
Former Managing Director, Strategic Business Development  
Stanfield Capital  
New York, NY  
203-543-2109

**DAVID PAUMÉ RPh**

A Registered Pharmacist with experience in Project Management of Clinical Operations of various therapeutic areas (i.e. Respiratory, Cardiovascular, Metabolic, Immunology, Oncology and Neurology), Clinical Research experience, Research & Development experience in the formulation of solid dosage forms (i.e. tablets and capsules) and Marketing Sales experience.

**CAREER SUMMARY****10/2014 – Present**

Compassionate Care Center of CT  
4 Garella Road  
Bethel, CT 06801

- Pharmacist providing dispensary oversight and medical marijuana information to patients and healthcare professionals.

**8/1991 – Present**

Boehringer Ingelheim Pharmaceuticals Inc.  
900 Ridgebury Road  
Ridgefield, CT 06877

**Medical Affairs Department**

**(6/2012 – Present) Associate Director – Vendor Quality Management – Medical & Technical Information Group**

- Provide quality management oversight of vendor operations involving the recognition, collection and documentation of adverse event, product complaint and requests for medical information (including On-Label and Off-Label information).
- Oversee and trouble shoot the transfer of Adverse Event data from vendor contact centers to Pharmacovigilance database (ARISg).
- Responsible for overseeing the Corrective Action / Preventive Action (CAPA) process for all non-compliances that occur with vendors and department personnel.

**(6/2006 – 6/2012) Associate Director – Clinical Operations**

- Responsible for providing Clinical Monitor oversight from Final Protocol to Database Lock for studies in the respiratory therapeutic area:
  - Provided Clinical Monitor and financial oversight to numerous Phase 2 and 3 clinical trials,
  - Oversaw central lab data review for Pulmonary Function Tests (PFTs), safety blood tests, ECG & Holter results, IVRS/IXRS Drug Supplies and Quality of Life questionnaires,
  - Responsible for reviewing patient listings for data cleaning purposes including the following: AE & SAE data, concomitant medication, medical history/baseline conditions, protocol violations, etc.
  - Responsible for coordinating cross functional team deliverables for multiple database locks. This included managing team meetings to develop DBL Timelines, assigning data cleaning priorities for each site and troubleshooting when team deliverables or timelines were at risk.

**(1/2001 – 6/2006) Associate Director – Project Management Clin Ops**

**(6/1997 – 12/2000) Senior Manager – Project Management Clin Ops**

- Responsible for providing Project Management oversight to timelines, budgets and resources for clinical programs in the following departments:
  - Therapeutic Areas – Immunology + Respiratory (1/2005 – 6/2006)
  - Therapeutic Areas – Cardiovascular + Metabolic + Respiratory (1/2001 – 1/2005)
  - Therapeutic Area – General Medicine [includes Oncology + Neurology] (6/1997 – 12/2000)
- Lead cross functional Clin Ops teams in a matrix environment to provide team deliverables on schedule and within budget.
- Met with cross functional Clin Ops teams on a monthly and prn basis to monitor progress of team deliverables, timelines and budgetary matters. Ensured that issues which impacted milestone dates or the critical path were addressed promptly with the teams to develop contingency plans of action.
- Fostered an environment of teamwork and cross functional collaboration to support project goals.
- Responsible for negotiating with the Executive Directors of various support groups (Data Management, Pharmaceuticals, Statistics, CRA Monitoring, etc.) for resources and on time execution of deliverables when conflicts occurred.
- Primary point of contact to provide upper management with the status of each trial/program in the Therapeutic Area Department and to communicate management priorities to trial team members. Presented trial status updates to upper management at Quarterly Review Meetings.
- Ensured that US lead trials had complete study budgets (Investigator costs, centralized core labs, ECGs, spirometry, CROs, etc.) in place in the Clinical Trial Management System (CTMS) before Operating Unit (OPU) commitment was provided.

- Responsible for overseeing all resource, timeline and cost variables in the CTMS database for US trials.
- Provided management with an FTE resource needs assessment for planned clinical trials on a quarterly basis.
- Responsible for the development and oversight of the annual budget in the department for all trial related and personnel expenses.

(1/1996 - 6/1997) - Manager MRA

(8/1991 - 12/1995) - Senior Medical Research Associate

- Managed multiple Phase II and international pivotal Phase III trials. This includes the approval of a Parkinson's disease medication (Mirapex® - pramipexole) with a co-development partner (The Upjohn Company).
- Managed CRO activities for an international Phase II/III stroke trial (Cerestat® - aptiganel HCL). The stroke trial involved 156 sites across 5 countries (Australia, Canada, South Africa, UK and US).
- Recruited investigators, oversaw regulatory document tracking and designed drug supplies for trials (oral and IV dosage forms).
- Provided technical and scientific guidance to international clinical monitors and study site personnel to ensure consistency in interpretation and exchange of scientific information.
- Responsible for writing annual reports, SAE narratives and sections of clinical trial reports.

8/1981 - 7/1991

DuPont - Merck Pharmaceuticals  
Wilmington, DE 19880

(9/1987 - 7/1991) - Clinical Research Associate (CRA) to Senior CRA

- Supported the NDA submissions through writing patient narratives and reviewing lab data.
- Assisted in the design, initiation and implementation of cardiovascular and Alzheimer's disease studies.
- Conducted on site monitoring visits to Investigators for pre-initiation, initiation, ongoing site visits and study close outs.
- Collected, tracked and maintained required regulatory documents for monitored sites.
- Presented clinical protocols, CRFs and administrative information at investigators' meetings and at clinical study sites.
- Served as a liaison between the Medical and Pharmacy Departments for designing drug packaging and labeling of clinical supplies.

(7/1985 - 8/1987) - Professional Sales Representative - Southwest Florida Territory

DuPont's product line required extensive hospital contacts with anesthesiologists, surgeons and emergency room physicians to provide product information and develop new relationships to increase sales in the territory. Developed and delivered product presentations to office-based and hospital based practitioners to promote product line. After the first 3 months, I increased the performance sales index of my territory and was able to continue to grow the business every quarter thereafter while sales for the district as a whole dropped.

(7/1983 - 7/1985) - Scientist - Pharmacy R&D

Served in the Technical Services Group as an interface between the development and production groups for new drug implementation. Specific highlights include:

- Coordinated scale up pilot batches from development to production facilities.
- Supervised the manufacture and packaging of batches for Phase I, II & III clinical trials.
- Production Troubleshooting.

(8/1981 - 6/1983) - Associate Scientist - Pharmacy R&D

Worked in the formulation group for solid dosage forms, responsibilities included:

- Formulated solid dosage forms (tablets & capsules) for new drugs and process improvement of existing formulas and procedures.
- Inventory coordinator for ordering, sampling and releasing of quarantined raw materials and finished clinical study supplies.
- Responsible for color formulation of numerous development and marketed compounds.
- Oversaw the packaging and labeling of clinical supplies.

**EDUCATION:**

- Bachelor of Science in Pharmacy (BSP)  
The University of Connecticut School of Pharmacy  
Storrs, Connecticut

**CURRICULUM VITAE****NAME:** Corey Burchman, MD**ADDRESS:** Office:  
Department of Anesthesiology, DHMC  
One Medical Center Drive  
Lebanon, NH 03756  
(603) 650-5922  
Corey.A.Burchman@Hitchcock.orgHome:  
One Storrs Road  
Hanover, NH 03755**EDUCATION:**

<u>DATE</u>	<u>INSTITUTION</u>	<u>DEGREE</u>
1983	George Washington University Washington, DC	MD
1979	Cornell University Ithaca, NY	BA

**POSTDOCTORAL TRAINING:**

<u>DATE</u>	<u>SPECIALTY</u>	<u>INSTITUTION</u>
1988	Fellowship, Ambulatory Anesthesia	Massachusetts General Hospital Boston, MA
1988	Fellowship, Obstetrical Anesthesia	Brigham & Women's Hospital Boston, MA
1987	Fellowship, Neurosurgical Anesthesia	Massachusetts General Hospital Boston, MA
1984	Resident in Anesthesiology	Massachusetts General Hospital Boston, MA
1983	Intern, Internal Medicine	US Naval Hospital Oakland, CA
1979	Research Associate, Histopharmacology	National Institutes of Health Bethesda, MD
1978	Research Fellow, Department of Neurosurgery	University of Maryland College Park, MD

**LICENSURE AND CERTIFICATION:**

<u>DATE</u>	<u>LICENSURE/CERTIFICATION</u>
2009	Recertification, American Board of Anesthesiology
2005	Medical License, State of New Hampshire
2005	Diplomate, American Board of Pain Medicine
2005-present	PALS Provider

Curriculum Vitae

1991 ACLS Provider and Instructor, American Heart, current  
1988 Diplomate, American Board of Anesthesiology  
1983 Diplomate, National Board of Medical Examiners

**ACADEMIC APPOINTMENTS:**

<u>DATE</u>	<u>ACADEMIC TITLE</u>	<u>INSTITUTION</u>
2006-present	Assistant Professor of Anesthesiology	Dartmouth Medical School Hanover, NH
1992-1993	Assistant Professor of Anesthesiology	University of Maryland School of Medicine College Park, MD
1989-1991	Clinical Associate in Anesthesiology	Massachusetts General Hospital Boston, MA
1988	Instructor in Anesthesiology	Harvard Medical School Boston, MA
1985-1988	Clinical Fellow in Anesthesiology	Harvard Medical School Boston, MA

**HOSPITAL APPOINTMENTS:**

<u>DATE</u>	<u>HOSPITAL TITLE</u>	<u>INSTITUTION</u>
2006-present	Attending Staff Anesthesiologist	Dartmouth-Hitchcock Medical Center Lebanon, NH
1993-2005	Attending Staff Anesthesiologist	York Hospital York, PA
1993-2005	Attending Staff Anesthesiologist	Apple Hill Medical Center York, PA
1993-2005	Medical Director	York Hospital Pain Relief Center York, PA
1993-2005	Attending Physician in Pain Medicine	York Hospital York, PA

**OTHER PROFESSIONAL POSITIONS:**

<u>DATE</u>	<u>POSITION TITLE</u>	<u>INSTITUTION/ORGANIZATION</u>
2014	Co-Medical Director	The Brain Trust, LLC Henniker, NH

Curriculum Vitae

2012-Present	Medical Director, PACU, Same-Day Surgical Program	Dartmouth-Hitchcock Medical Center Lebanon, NH
2011-Present	Principal Scientist	BBR Medical Innovations, Inc
2009	Founder, Board Member	Global Children's Art Programme Hanover, NH
2006-Present	Division Director, Neurosurgical Anesthesia	Dartmouth-Hitchcock Medical Center Lebanon, NH
1995-Present	Member, Board of Directors	Anesthesia Associates of York, PA, Inc. York, PA
1995-Present	Senior Managing Partner	Anesthesia Associates of York, PA, Inc. York, PA
1992-1993	Chief, Department of Anesthesiology	James Lawrence Kernan Hospital (UMMS) Baltimore, MD
1992-1993	Director, PACU, ICU, Respiratory Services, Pain Service	James Lawrence Kernan Hospital Baltimore, MD
1989-1991	Chairman, Department of Anesthesiology	US Naval Hospital Roosevelt Roads, Puerto Rico
1988-1991	Director, PACU, ICU, Respiratory Services, Pain Service	US Naval Hospital Roosevelt Roads, Puerto Rico
1984-1985	Fleet General Medical Officer	USS Roanoke United States Navy
1983-1984	Executive Board Member	USS Roanoke (AOR-7) United States Navy

**MAJOR COMMITTEE ASSIGNMENTS AND CONSULTATIONS:**

**Institutional:**

<u>YEAR</u>	<u>COMMITTEE</u>	<u>ROLE</u>	<u>INSTITUTION</u>
2009	Cost Containment	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2008-present	Acute Pain Service	Clinical Consultant	Dartmouth-Hitchcock Medical Center Lebanon, NH
2008-2011	Executive Committee	Voting Member	NH Medical Society Concord, NH
2008-present	Veteran's Health Task Force	Member	NH Medical Society Concord, NH



Curriculum Vitae

2008	Anesthesiology Executive Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2007	Task Force: Patient Hand-Offs	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2006-present	OR Improvement Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2006-present	Neurosurgery Faculty Search Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2006-present	Neurology Faculty Search Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2006-present	Anesthesiology Resident Practice Management Seminars	Director	Dartmouth-Hitchcock Medical Center Lebanon, NH
2003-2004	Medical Education Committee	Member	York Hospital York, PA
1992-1993	Senior Management Directorate	Member	James Lawrence Kernan Hospital Baltimore, MD
1992-1993	Pharmacy & Therapeutics Committee	Chairman	James Lawrence Kernan Hospital Baltimore, MD
1992-1993	Executive Committee of the Medical Staff	Member	James Lawrence Kernan Hospital Baltimore, MD

**MEMBERSHIP, OFFICE & COMMITTEE ASSIGNMENTS IN PROFESSIONAL SOCIETIES:**

<u>DATE</u>	<u>SOCIETY</u>	<u>ROLE</u>
1985-present	American Society of Anesthesiologists	Member
1991	American Medical Association	Member
1991	Society for Ambulatory Anesthesia	Member
1992	Pennsylvania Society of Anesthesiologists	Member
1992	Pennsylvania Medical Society	Member
2002-present	New England Pain Society	Member
2002-present	American Pain Society	Member
2003-present	American Society of Interventional Pain Physicians	Member

Curriculum Vitae

2005-present	Society of Neuro Anesthesia and Critical Care	Member
2005-present	NH Medical Society	Member
2008-present	European Society of Anaesthesiology	Affiliate Member
2009-present	Global College of Neuroprotection and Neuroregeneration	Member
2009-present	Poetry Society of Vermont	Member
2010-present	National Collegiate Inventors and Innovators Alliance	Member
2011-present	Society of Obstetrical Anesthesiology and Perinatology	Member
2012-present	Society for Perioperative Assessment and Quality Improvement	Member
2013	Posterior Fossa Society	Member

**AWARDS AND HONORS:**

<u>DATE</u>	<u>AWARD NAME</u>
1982	William Beaumont Society Inductee

**MAJOR RESEARCH INTERESTS:**

My research interests are many, but have a fundamental basis in patient safety. Along that theme, with reference in particular to the prevalence of opportunistic and nosocomial infection, many of my projects have a basis in identifying microorganisms in the workplace, and suggestions for eradicating them.

From this, guidelines for hand sanitation of anesthetic providers have been elucidated, the development of a novel intravenous fluid sterilizer has been described, and development of single-use ECG wire/pad equipment is in the planning stages.

While not trained as an engineer, I look at problem-solving mechanistically, and employ engineering principles often to solve clinical problems. I saw clinicians struggle with endoscopic approaches to direct visualization, whether it is the airway or gastrointestinal tract. I felt a robotically assisted approach would be novel, safe, and more efficient. The early prototype turned out to be remarkable, and further refinements will probably see commercial applications in both anesthesiology and other disciplines. Current talks involve possible establishment of a medical robotics program here at DHMC.

I also have an interest in serum chemistry and real-time examination thereof. I designed an indwelling spectrophotometric assembly to ascertain serum chemical values, including gas tensions. This was initially in collaboration with University of Strathclyde, in Glasgow, Scotland. The prototype for the catheter system has been awarded a US Patent.

Curriculum Vitae

I further recently applied for a US patent on a device utilizing ET CO2 as the marker for blind intubation. While the market for intubation devices has all gone to direct visualization, this single-use, inexpensive system has a niche in the clinical realm.

I am currently involved in design and patenting of a single-use micro-video camera to be incorporated into an intubating bougie.

I am involved in a project designed to utilize high energy reactive particles to sterilize an entire operating room between surgical cases. Plasmatrete Corporation, the world's leaders in plasma technology, is undergoing review of the collaborative proposal.

A further medical research project involves medical waste disposal. I am in the preliminary stages of outlining a study to identify its disposition, into composites to be used by the construction industry.

**RESEARCH FUNDING:**

**Present:**

1. 2009; Thayer School of Engineering, Dartmouth College Materiel Grant; PI Burchman CA 5%; Karl Storz Corporation, El Segundo, CA, for Robotics Project 190/290; \$75,000.

**In Preparation:**

1. Hitchcock Clinic; Translational Science Pilot Grant; PI Burchman CA; \$30,000.

**TEACHING EXPERIENCE/CURRENT TEACHING RESPONSIBILITIES:**

**Dartmouth Medical School:**

<b><u>DATE</u></b>	<b><u>TEACHING</u></b>
2008	Faculty Sponsor Engineering Sciences 190/290 Working bench-side with senior students at the Thayer School of Engineering to deliver a working prototype of an intravenous fluid sterilizer. Patent protection acquired
2009	Faculty Sponsor Engineering Sciences 190/290 Working bench-side with senior students at the Thayer School of Engineering to deliver a working prototype of a robotic intubation device Patent protection in acquisition process
2009	Faculty Sponsor, First Year Project, Tuck School of Business, Dartmouth College Working in concert with first year business students in moving the Intravenous Sterilization Device to market
2009-present	On Doctoring, mentor to students for clinical patient interaction

Curriculum Vitae

**Dartmouth-Hitchcock Medical Center:**

<b><u>DATE</u></b>	<b><u>TEACHING</u></b>
2002-2005	Pre-operative Anesthesia Assessment Monthly rounds with senior students at Penn State Hershey & University of Pennsylvania Schools of Medicine, York Hospital, York, PA.
2002-present	Postoperative Considerations of Regional Anesthesia Senior Students at Penn State Hershey & University of Pennsylvania Schools of Medicine, York Hospital, York, PA.
2006-present	Attending Anesthesia Physician for Residency Training Program Division Director, Neurosurgical Anesthesia Daily intra-operative teaching anesthesia residents, Dartmouth-Hitchcock Medical Center; assisting in research project design; preparing didactic lectures. Clinical interaction with medical students, Dartmouth College students, CRNA students. Section Chief, neurosurgical anesthesia
2006	Anesthesiology Resident Lecture Series, "Evoked Potentials"

**Regional:**

<b><u>DATE</u></b>	<b><u>TEACHING</u></b>
2009	Faculty Sponsor, First year Project, Tuck School of Business, Dartmouth College Working in concert with first year business students in moving the Intravenous Sterilization Device to market

**INVITED PRESENTATIONS:****Regional:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
2014	Symposium: Evidence-Based Efficacy Medical Marijuana	Same Day Program Nursing, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2014	Hospital Grand Rounds: Biopharmaceuticals	Weeks Medical Center	Lancaster, NH
2014	The Neurobiology of Creativity	Tuck Executive Institute	Hanover, NH
2014	International Symposium on Medical Cannabis, Therapeutics Co-Director	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2014	History of Cannabis as Medicine	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2013	Hospital Grand Rounds: Biopharmaceuticals	St Joseph's Hospital	Nashua, NH
2013	Pre Anesthesia Assessment	Springfield Hospital	Springfield, VT
2013	Medicine Grand Rounds: The Neurobiology of Creativity	York Hospital	York, PA
2013	The Neurobiology of Creativity	Tuck Executive Institute	Hanover, NH
2013	Spinal Cord Injury	Department of Anesthesiology, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2012	Anesthesiology Grand Rounds: Art & Medicine	Department of Anesthesiology, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2012	Neurology Grand Rounds: The Neurobiology of Creativity	Department of Neurology, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2012	Evoked Potential Monitoring	Department of Anesthesiology, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2011	Herbal Medicine	Northeast Medical	Sunday River, ME

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		Association Winter Conference	
2011	Anesthesiology Grand Rounds: Herbal Medicine	Penn State Milton S. Hershey Medical Center	Hershey, PA
2008	Anesthesiology Grand Rounds: Herbal Medicine-Perioperative Considerations	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2007	Anesthesiology Practice Management Seminar: Conflict Resolution	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Spinal Cord Injury	Department of Anesthesiology, Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Anesthesiology Practice Management Seminar: Operating Room Administration	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Anesthesiology Practice Management Seminar: Rural Anesthesia	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Anesthesiology Practice Management Seminar: Anesthesia in Lesser Developed Countries	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Anesthesiology Grand Rounds: Hemorrhagic Shock	Dartmouth-Hitchcock Medical Center	Lebanon, NH
2006	Spinal Anesthesia	Department of Anesthesiology, Dartmouth-Hitchcock Medical Center	Lebanon, NH

National:

Curriculum Vitae

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
2014	International Symposium on Medical Cannabis, Therapeutics Co-Director		
2009	Medical/Surgical Grand Rounds: Herbal Medicine- Perioperative Considerations	York Hospital	York, PA
2009	Surgical Resident Visiting Professor Lecture: Amplification of multi-drug Resistant Organisms in the Operating Room	York Hospital	York, PA
2007	Medical/Surgical Grand Rounds: Hemorrhagic Shock Update	York Hospital	York, PA
2003	Medical Grand Rounds: Pain Medicine	York Hospital	York, PA
2002	Anesthesia Dinner Lecture: Adverse Effects of Analgesic Management	York Hospital	York, PA
2002	Surgery Grand Rounds: Optimizing Opioid Therapy for Chronic Non-malignant Pain	York Hospital	York, PA
2002	Internal Medicine Grand Rounds: Optimizing Opioid Therapy for Chronic Non-malignant Pain	York Hospital	York, PA
2002	Family Medicine Grand Rounds: Optimizing Opioid Therapy for Chronic Non-malignant Pain	York Hospital	York, PA
2002	Surgery Grand Rounds: Misuse of Prescription Drugs	York Hospital	York, PA
2002	Internal Medicine Grand Rounds: Misuse of Prescription Drugs	York Hospital	York, PA
2002	Family Medicine Grand Rounds: Misuse of Prescription Drugs	York Hospital	York, PA
2002	Misuse of Prescription Drugs	York County Medical Society	York, PA
2002	Wellness	Apple Hill Surgical Center	York, PA
2002	Postoperative Pain Control- PACU	Department of Anesthesiology, York	York, PA

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		Hospital	
2002	Internal Medicine Grand Rounds: Impact of a Successful Pain Management Program	York Hospital	York, PA
2002	Family Medicine Grand Rounds: Impact of a Successful Pain Management Program	York Hospital	York, PA
2002	Surgery Grand Rounds: Impact of a Successful Pain Management Program	York Hospital	York, PA
2002	Anesthetic Considerations for Obstetrical Patients	Department of Obstetrics, York Hospital	York, PA
2002	Hypermagnesemia	Department of Anesthesiology, York	York, PA

**International:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
2008	A Prospective Observational Study of Handwashing Behavior in Anesthesia Providers: Analysis and Implications	European Society of Anaesthesiology Annual Meeting Euroanaesthesia 2008	Copenhagen, Denmark
2007	Attenuation of Pain Associated with Local Anesthetic Infiltration	European Society of Anesthaesiology Annual Meeting, Euroanaesthesia 2007	Munich, Germany

**Media Appearances:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
2004	Misuse of Prescription Drugs- "Medically Speaking"	Cable Channel 3	York, PA
2003	Pain Management- "Medically Speaking"	Cable Channel 3	York, PA

**COLLABORATIVE ACTIVITY:**



<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
2008	Real-time in vivo spectrophotometric assessment of serum blood chemistries, oximetry, and red cell mass	In collaboration with University of Strathclyde, Institute of Photonics	Glasgow, Scotland

**BIBLIOGRAPHY:****Original Journal Articles:**

1. Burchman CA, Datta S, Ostheimer GW. Delivery temperature of heated intravenous solutions during rapid infusion. *J of Clinical Anesthesiology* 1. 1989; (4):259-261.
2. Burchman CA, Judy K. Application of cold to the skin: Does it effectively attenuate the pain associated with the infiltration of local anesthetic? *Eur J Anaesthesiology* 24. 2007; (S39):95.
3. Loftus R, Koff M, Burchman C, et al. Transmission of Pathogenic Bacterial Organisms in the Anesthesia Work Area. *Anesthesiology*. 2008; Sep;109(3):399-407.
4. Koff M, Loftus R, Burchman C, et al. Reduction in Postoperative Bacterial Contamination of Peripheral Intravenous Tubing Through the Use of a Novel Device. *Anesthesiology*. 2009; 110: 978-985.

**Case Reports:**

1. Johnson MD, Birnbach DJ, Burchman CA, Greene MF, Datta S, Ostheimer GW. Fetal Surgery and general anesthesia: A case report and review. *Journal of Clinical Anesthesiology*, 1989; 1(5): 363-367.

**Letters to the Editor:**

1. Burchman CA, deBros F. How to make tape stick to sandpaper. *J of Anesthesiology*. 1988; 69:147.
2. Burchman CA, Lappas DG. Thermodilution cardiac output provides unanticipated intraoperative diagnosis. *J of Cardiothoracic Anesthesia*. 1988; 2:84-585.

**Abstracts Presented at National/International Meetings:**

1. Burchman CA, Education in Obstetric Anesthesia. Scientific Exhibit, American Society of Anesthesiology Annual Meeting, George Moscone Center, San Francisco, CA, USA, 1988.
2. Koff M, Loftus R, Burchman CA, Hogan D, Beach ML. Microbial Contamination in the Anesthesia Workspace. Are we as Clean as We Think? *Anesthesiology*. 107, A1788. 10-16-2007. Ref Type: Poster and Abstract Presentation, America Association of Anesthesiologists Annual Meeting, San Francisco, CA, 2007.
3. Burchman CA, Application of Cold to the Skin: Does it Effectively Attenuate the Pain Associated with the Infiltration of Local Anesthetic? Poster and abstract presentation, European Society of Anesthesiology Annual Meeting, ICM Convention Center, Munich, Germany, 2007.
5. Koff M, Loftus R, Burchman CA, Beach ML. Reduction in Postoperative Nosocomial Infections through the use of a Novel Device in the Operating Room. Poster and abstract presentation, (accepted) National Patient Safety Foundation Patient Annual Safety Congress, Gaylord Convention Center, Nashville, TN, 2008.

6. **Burchman C, Loftus R, Henry E, Koff M.** A Prospective Observational Study of Handwashing Behavior in Anesthesia Providers: Analysis and Implications. Poster and abstract presentation, (accepted) European Society of Anaesthesiology Annual Meeting, Bella Centre, Copenhagen, Denmark, 2008.

**Book Chapters:**

1. **Burchman CA.** Education in obstetric anesthesia. In: Manual of Obstetric Anesthesia. GW Ostheimer (Ed.) Churchill Livingstone Inc., New York, 1992.
2. **Burchman CA and Ostheimer GW.** Organization of an obstetrical anesthesia teaching service. In Manual of Obstetric Anesthesia. GW Ostheimer (Ed.) Churchill Livingstone Inc., New York, 1992.
3. **Burchman CA.** Anesthesia for fetal surgery. In: Manual of Obstetric Anesthesia. GW Ostheimer (Ed.) Churchill Livingstone Inc., New York, 1992.
4. **Burchman CA.** Maternal Aspiration. In Manual of Obstetric Anesthesia. GW Ostheimer (Ed.) Churchill Livingstone Inc., New York, 1992.
5. **Burchman CA.** Anesthesia for fetal surgery. In: pain relief and anesthesia in obstetrics. A. van Zundert and GW Ostheimer (Eds.) WB Saunders, Philadelphia, 1996.
6. **Burchman CA.** Education in obstetric Anesthesia. In: pain relief and anesthesia in obstetrics. A. van Zundert and GW Ostheimer (Eds.) WB Saunders, Philadelphia, 1996.
7. **Burchman CA and GW Ostheimer.** Organization of an obstetric anesthesia service---USA. In pain relief and anesthesia in obstetrics. WB Saunders, Philadelphia, 1996.
8. **Burchman CA.** Anesthetic management of the pregnant surgical patient. In Ostheimer's Manual of Obstetrical Anesthesia. DJ Birnbach (Ed.) Churchill Livingstone Inc., New York, 2000.

**Books:**

1. **Burchman CA.** Spirits of the Playing Surface, A Collection of Poetry in Four Acts. Shires Press, Manchester, VT, 2010.

**Patent Applications:**

1. US Patent Issued for System and Method for Venous Oximetry using a Catheter, 2006 Issued, 2013
2. US Patent Application for Blind Intubation Component System, 2006
2. US Patent Application for Intravenous Fluid Sterilizer, 2009 Issued, 2014

**Other:**

1. Editor, "A Respite from Pain," a quarterly monograph in South Central Pennsylvania 1995-2005.

Updated: June, 2015  
By: Kathy Gaudette

**CURRICULUM VITAE****NAME:** Gilbert J. Fanciullo, MD, MS**ADDRESS:** Office:  
Department of Anesthesiology  
Pain Management Center  
Dartmouth-Hitchcock Medical Center  
One Medical Center Drive  
Lebanon, NH 03756  
Phone: 603-650-6040  
Fax: 603-650-8199  
Gilbert.J.Fanciullo@Hitchcock.org**EDUCATION:**

<u>DATE</u>	<u>INSTITUTION</u>	<u>DEGREE</u>
1986 - 1988	Russell-Sage College Albany, NY	MS, Health Services Administration
1983 - 1987	Albany Medical College Albany, NY	MD
1969 - 1973	State University of New York, Albany, NY	BS
1965- 1969	Stuyvesant High School	

**POSTDOCTORAL TRAINING:**

<u>DATE</u>	<u>SPECIALTY</u>	<u>INSTITUTION</u>
2008-2009	Executive Education for Section Chiefs and Practice Managers	Amos Tuck School of Business Hanover, NH
1990 - 1991	Fellowship in Pain Management and Vascular, Thoracic, and Obstetric Anesthesia	Brigham and Women's Hospital Boston, MA
1988 - 1990	Residency in Anesthesiology	Brigham and Women's Hospital Boston, MA
1987 - 1988	Internship in Internal Medicine	Albany Medical Center Hospital Albany, NY

**LICENSURE AND CERTIFICATION:**

<u>DATE</u>	<u>LICENSURE/CERTIFICATION</u>
2012	Recertification, Pain Medicine
2010	Board Certification, Hospice and Palliative Medicine
2002 - 2004	Medical License, State of Vermont
2001	Recertification, Pain Medicine
2000-2008	Board Certification, Hospice and Palliative Medicine
1996	Medical License, State of NH
1993	Board Certification, Pain Management
1993	Board Certified Consultant, Anesthesiology

Curriculum vitae

**ACADEMIC APPOINTMENTS:**

<u>DATE</u>	<u>ACADEMIC TITLE</u>	<u>INSTITUTION</u>
2006 - present	Professor of Anesthesiology	Dartmouth Medical School Hanover, NH
2000 - 2006	Associate Professor of Anesthesiology	Dartmouth Medical School Hanover, NH
1997 - 2000	Assistant Professor of Anesthesiology	Dartmouth Medical School Hanover, NH
1991 - 1995	Instructor in Anesthesia	Harvard Medical School Boston, MA
1988 - 1991	Fellow in Anesthesia	Harvard Medical School Boston, MA

**HOSPITAL APPOINTMENTS:**

<u>DATE</u>	<u>HOSPITAL TITLE</u>	<u>INSTITUTION</u>
1997 - present	Anesthesiologist, Pain Specialist	Mary Hitchcock Memorial Hospital Lebanon, NH
1995 - 1997	Anesthesiologist	Holy Name Hospital Teaneck, NJ
1992 - 1995	Anesthesiologist, Pain Specialist	Dana Farber Cancer Institute Boston, MA
1991 - 1995	Anesthesiologist	Brigham and Women's Hospital Boston, MA
1991 - 1995	Anesthesiologist	Goddard Memorial Hospital Stoughton, MA

**OTHER PROFESSIONAL POSITIONS:**

<u>DATE</u>	<u>POSITION TITLE</u>	<u>INSTITUTION/ORGANIZATION</u>
2014- present	Editor in Chief	International Journal of Medical Cannabinoids
2000 - 2003	Director, Section of Palliative Medicine	Dartmouth-Hitchcock Medical Center Lebanon, NH
1999 - present	Director, Section of Pain Medicine	Dartmouth-Hitchcock Medical Center Lebanon, NH
1995 - 1997	Director, Pain Management Center	Holy Name Hospital Teaneck, NJ
1997 - 2002	Director, Pain Management Fellowship	Dartmouth-Hitchcock Medical Center Lebanon, NH
1995	Director, Pain Management Center	Brigham and Women's Hospital Boston, MA

Curriculum vitae

1995 - 1997	President	Mid-Atlantic Pain Management Associates, Inc.
1994 - 1995	Associate Director, Pain Management Center	Brigham and Women's Hospital Boston, MA
1993 - 1996	President	New England Pain Diagnosis and Treatment
1987 - 1995	Lieutenant Commander	Medical Corp, United States Naval Reserve
1993 - 1995	Advisory Board Member	Syntex Laboratories, Inc.

**MAJOR COMMITTEE ASSIGNMENTS AND CONSULTATIONS:**

**National/International:**

<u>YEAR</u>	<u>COMMITTEE</u>	<u>ROLE</u>	<u>INSTITUTION</u>
2010-2011	Scientific Program Committee	Chair	American Pain Society
2010	Clinical Program Committee	Chair	American Pain Society
2009- 2011	Board of Directors	Member	American Academy of Pain Medicine
2009-present	Clinical Center of Excellence Committee	Member	American Pain Society
2009	Clinical Program Committee	Member	American Pain Society
2006 - 2009	Opioid Clinical Practice Guidelines Committee	Co-Chairman	American Academy of Pain Medicine
2005 - present	Nominating Committee	Member	American Academy of Pain Medicine
2005 - 2007	Board of Directors	Member	American Pain Society
2003 - present	Nominating Committee	Member	American Pain Society
2000 - 2001	Review Course Committee	Chairman	American Academy of Pain Medicine
1998 - 1999	Pain Advisory Committee	Member	Blue Cross Blue Shield
1998 - 2001	Programming Committee	Member and Co-Director	American Academy of Pain Medicine
1997 - 2003	Pain Management Program Directors	Member	Association of Pain Management Program Directors
1997 - 2002	Pain Management Exam Committee	Member	American Board of Anesthesiology
1994 - 1995	Pain Analgesia Investigative Network on Outcomes Research	PAINOR Member	Multicenter research consortium; members appointed by the Morton Society

**Regional:**

Curriculum vitae

<u>YEAR</u>	<u>COMMITTEE</u>	<u>ROLE</u>	<u>INSTITUTION</u>
1998 - 2000	Executive Committee	NH State Representative	New England Pain Association
1994 - 1995	Massachusetts Workman's Compensation Chronic Pain Syndrome Guidelines Committee	Member	Massachusetts Workman's Compensation

Institutional:

<u>YEAR</u>	<u>COMMITTEE</u>	<u>ROLE</u>	<u>INSTITUTION</u>
2013	The Hitchcock Foundation's Scientific Review Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2007 - 2010	Neurology Internal Review Committee	Chair	Dartmouth-Hitchcock Medical Center Lebanon, NH
2007 - present	Opioid Guidelines Committee	Chair	Dartmouth-Hitchcock Medical Center Dartmouth-Hitchcock Alliance Members Lebanon, NH
2006 - present	<u>Department of Anesthesiology Promotions Committee</u>	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2005	Schmerzgruppe	Co-Director	Dartmouth-Hitchcock Medical Center Lebanon, NH
2004 - present	Information Systems Subcommittee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
2000 - 2004	Norris Cotton Cancer Center Oversight	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
1998 - 2004	Neuropathic Pain Committee	Member	Dartmouth-Hitchcock Medical Center Lebanon, NH
1998 - 2000	Multidisciplinary Spine Center Seminar	Co-Director	Dartmouth-Hitchcock Medical Center Lebanon, NH
1998 - 1999	Complementary Therapy Review Committee	Chairman	Dartmouth-Hitchcock Medical Center Lebanon, NH
1997 - 2000	Dartmouth Medical School Pain Science Committee	Co-Chair	Dartmouth Medical School Hanover, NH
1994 - 1995	Anesthesia Department Finance and Management Committee	Member	Brigham and Women's Hospital Boston, MA
1993 - 1995	Operating Room Ethics Committee	Member	Brigham and Women's Hospital Boston, MA
1993 - 1995	Clinical Practice Committee	Secretary	Brigham and Women's Hospital Boston, MA
1992 - 1995	Medical Ethics Committee	Member	Brigham and Women's Hospital Boston, MA

1992 - 1995	Utilization Review Committee	Member	Brigham and Women's Hospital Boston, MA
1991 - 1995	Acute Postoperative Pain Committee	Member	Brigham and Women's Hospital Boston, MA
1985 - 1987	Medical School Admissions Committee	Member	Albany Medical College Albany, NY

**MEMBERSHIP, OFFICE & COMMITTEE ASSIGNMENTS IN PROFESSIONAL SOCIETIES:**

<u>DATE</u>	<u>SOCIETY</u>	<u>ROLE</u>
2009	American Pain Society	Selected as candidate for President
2006 - 2009	American Academy of Pain Medicine, Opioid Clinical Practice Guidelines Committee	Co-Chair
2005 - 2008	American Pain Society, Board of Directors	Member
2005 - 2011	American Academy of Pain Medicine, Ethics Committee	Member
2003 - 2004	American Pain Society, Nominating Committee	Member
2000	American Academy of Pain Medicine, Annual Meeting Review Course Committee	Chairman
1999 - 2011	American Academy of Hospice and Palliative Medicine	Member
1998 - 2000	American Board of Anesthesiology Pain Board Exam Review Committee	Member
1998 - 2000	New England Pain Association	New Hampshire State Representative
1998	American Academy of Pain Medicine, Annual Meeting Planning Committee	Member
1997 - present	American Academy of Pain Medicine	Member
1996 - present	International Neuromodulation Society	Member
1992 - present	New England Pain Association	Member
1989 - present	American Pain Society	Member
1989 - present	International Association for the Study of Pain	Member
1988 - present	American Society of Regional Anesthesia	Member
1988 - present	International Anesthesia Research Society	Member
1987 - present	American Society of Anesthesiologists	Member
1986 - present	Theta Chapter, Alpha Omega Alpha	Member



**EDITORIAL BOARDS:**

<u>DATE</u>	<u>ROLE</u>	<u>BOARD NAME</u>
2013	Editor in Chief	<i>International Journal of Medical Cannabinoids</i>
2006 - 2012	Associate Editor	<i>Pain Physician</i>
2005 - 2012	Section Coeditor- Palliative Medicine	<i>Pain Medicine</i>
2004 - present	Member	<i>Journal of Opioid Management</i>
2004 - 2006	Member	<i>American Journal of Hospice and Palliative Medicine</i>
2003 - present	Member	<i>Pain Medicine</i>

**AWARDS AND HONORS:**

<u>DATE</u>	<u>AWARD NAME</u>
2010-15	Top Doctors in New Hampshire
2005- present	Best Doctors in America
2008	American Pain Society Center of Excellence award for DHMC Pain Center
2007	American Pain Society Center of Excellence award "runner-up" for DHMC Pain Center
1987	Alpha Omega Alpha
1987	Neil Hellman Prize of Albany Medical College
1987	Harold C. Wiggers Award of Albany Medical College for outstanding public service to the college and its students

**JOURNAL REFEREE ACTIVITIES:**

<u>DATE</u>	<u>JOURNAL NAME</u>
2005 - 2012	Section of Palliative Medicine Coeditor, <i>Journal of Pain</i>
2004 - present	Editorial Board, <i>Journal of Opioid Management</i>
2004 - 2006	Editorial Board, <i>American Journal of Hospice and Palliative Medicine</i>
2003 - 2012	Editorial Board, Section Editor, <i>Pain Medicine</i>
2002 - 2010	<i>Annals of Internal Medicine</i>
1999 - 2002	<i>Regional Anesthesia and Pain Medicine</i>
1998 - 2002	<i>Anesthesia &amp; Analgesia</i>
1997 - 2006	<i>Spine</i>
1992 - 1996	<i>Journal of Pain and Symptom Management</i>

**MAJOR RESEARCH INTERESTS:**

Curriculum vitae

1. The use of computers as tools to improve the quality of information generated at patient-provider encounters.
2. The use of opioids in patients suffering from non-terminal pain.
3. The use of cannabinoids to manage pain and other symptoms.

**FUNDED RESEARCH PROJECTS:**

- |    |   |                    |          |
|----|---|--------------------|----------|
| 1. | Syntex Laboratories   | 1992               | \$75,000 |
|    | "Ketorolac vs. morphine in a P.C.A. device"   |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 2. | Glaxo, Inc  | 1993               | \$75,000 |
|    | 1993 - 1994 "Ondansetron vs. droperidol for postoperative nausea"   |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 3. | Astra Pharmaceutical  | 1993               | \$20,000 |
|    | "EMLA cream as a pre-emptive analgesic for Cesarean Section"  |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 4. | Syntex Laboratories, Inc  | 1993               | \$15,000 |
|    | "Ketorolac vs. oxycodone for acute low back pain"   |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 5. | Medtronic, Inc  | 1998               | \$72,000 |
|    | "Dorsal column stimulation for intractable angina pectoris"   |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 6. | Astra Merck, Inc  | 1998               | \$40,000 |
|    | "Remacemide for the treatment of neuropathic pain"  |                    |          |
|    | Principal Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 7. | Elan Pharma, Inc.   | 1999               | \$6,000  |
|    | "Ziconotide for the treatment of chronic pain"  |                    |          |
|    | Principle Investigator: <u>Gilbert J. Fanciullo</u>   |                    |          |
| 8. | 1 R43 MH62833-01  | 4/08/01 - 9/07/01  | \$99,484 |
|    | National Institutes of Health, National Institute of Mental Health  |                    |          |
|    | "Customized Pain Assessment" (SBIR, Phase I).   |                    |          |
|    | Development and testing of computer software that allows health professionals to customize their methods for pain assessment (SBIR, Phase I).     |                    |          |
|    | Principal Investigator: John C Baird  |                    |          |
|    | Co-investigator: <u>Gilbert J. Fanciullo</u>  |                    |          |
| 9. | 1 R43 NS42387-01  | 8/01/01 - 01/31/02 | \$99,484 |
|    | National Institutes of Health, National Institutes of Neurological Diseases and Stroke  |                    |          |
|    | "Assessment of Quality of Life by Patients in Pain" (SBIR, Phase I).  |                    |          |
|    | Test-retest reliability of computer software allowing patients and healthy individuals to give clustered ratings about quality-of-life variables. |                    |          |
|    | Principal Investigator: John C. Baird   |                    |          |
|    | Co-investigator: <u>Gilbert J. Fanciullo</u>  |                    |          |



- 1997 - 2008 Lecturer, DMS II Scientific Basis of Medicine Neurology Course. An introductory lecture on clinical assessment, diagnosis and treatment options for the patient presenting with pain as a chief complaint.
- 1997 - present Preceptor, DMS III and IV Pain Management Center Rotation. Medical Students individually rotate on the Pain Service and gain experience rounding on acute, chronic and cancer pain patients within the hospital as well as seeing outpatients in the office.

**Resident:**

<u>DATE</u>	<u>TEACHING</u>
2010	Mentor for resident Ravneet Bhullar whose research manuscript has been submitted for publication.
2005 - 2007	Mentor for Anesthesiology resident Tabitha Washington conducting clinical research project (QGRP Grant).
2003 - 2005	Supervise Anesthesiology resident Ryan Loyd for clinical research project for which he received a QGRP grant and subsequently an NIH-LRP grant for two years and resulted in two publications.
2002 - 2003	Supervise General Surgery resident Freeman Suber for clinical research project for which he received a QGRP grant.
2000 - 2003	Supervise and instruct residents from Anesthesiology, Family Practice, Internal Medicine, and other disciplines in Palliative Medicine.
1997 - present	Supervise and instruct residents from Anesthesiology, Family Practice, Internal Medicine and Neurosurgery in Pain Medicine.
1997 - present	Lecture and supervise resident and fellow pain lecture series which includes a daily (3 days per week) thirty minute lecture on a topic in pain medicine.
1997 - present	Coordinate and supervise monthly multidisciplinary pain seminar which involves an invited local or national speaker.
1991 - 1995	Supervise and teach residents, fellows and medical students from Harvard Medical School and affiliated hospitals.

**PHILANTHROPY:**

Obtained philanthropic support for Palliative Medicine Service totaling approximately \$12 million.

**INVITED PRESENTATIONS:****Regional:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
1983	Pneumococcal Types at Albany V.A. Medical Center: A Four Year Study	Albany V.A.M.C.	Albany, NY
1985	Studies of the Antimicrobial Actions of Quinolones Singly and in Combination with Other Antimicrobial Agents	Upstate Infectious Disease Group	Syracuse, NY

Curriculum vitae

1990	Pain Management	Harvard Medical School	Boston, MA
1991	Parenteral Analgesia in the Emergency Department	Salem Hospital	Salem, MA
1992	Treatment of Chronic Pain	Psychiatry Grand Rounds; Brigham and Women's Hospital	Boston, MA
1992	Epidural Infusions for Postoperative Management	"Schmerzgruppe"; Brigham and Women's Hospital	Boston, MA
1993	Identification of Fluid Aspirated Via Spinal Catheter	Joint Research Seminar, Brigham and Women's Hospital	Boston, MA
1993	Tricyclic Antidepressants for Treatment Of Acute Pain	"Schmerzgruppe"; Brigham and Women's Hospital	Boston, MA
1993	Pain, The Final Frontier	Harvard Medical School Scientific Symposium on Research in Anesthesia Brigham and Women's Hospital	Boston, MA
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Boston, MA
1994	Post Operative Pain Management	Surgical Grand Rounds, West Roxbury VAMC Hospital	Boston, MA
1994	Analgesia For Thoracic Surgical Procedures	Brigham and Women's Hospital Thoracic Staff Retreat, Babson College	Wellesley, MA
1994	Principles Of Pain Management	Berkshire Community College	Pittsfield, MA
1994	Acute Pain Management	Norwood Hospital Anesthesia Department	Norwood, MA
1995	Chronic Pain	Psychiatry Grand Rounds; Holy Name Hospital	Teaneck, NJ
1996	Opioid Pharmacology	Grand Rounds; Holy Name Hospital	Teaneck, NJ
1996	Treatment of Chronic Pain	Bergen County Health Fair	Hackensack, NJ
1997	Epidural Infusions	Anesthesiology Grand	Lebanon, NH

## Curriculum vitae

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 Gilbert J. Fanciullo, MD, MS  
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		Rounds; Dartmouth-Hitchcock Medical Center	
1997	Analgesic Pharmacology	Anesthesiology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1997	Acute Pain Management	General Surgery Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1997	Pain Management After Orthopedic Surgery	Orthopedic Surgery Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Cancer Pain Management	Oncology Rounds Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Diagnosis and Treatment in Clinical Pain Management	Neurology Annual Meeting	Woodstock, VT
1998	Interventional Pain Management	Oncology Rounds Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Complex Regional Pain Syndrome	Orthopedic Surgery Grand Rounds Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Chronic Pain Management	Rheumatology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Implantable Therapies: An Evidence Based Approach	Anesthesiology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1998	Implantable Therapies: An Evidence Based Approach	New Hampshire/Vermont Society of Anesthesiologist Annual Meeting	Lebanon, NH
1998	Implantable Therapies: An Evidence Based Approach	Neurosurgery/Neurology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
1999	Anesthesiology Headache Management:	Dartmouth Medical	Lebanon, NH

Curriculum vitae

	Headache Management for Primary Care Providers	School	
1999	Analgesic Pharmacology	Grand Rounds, Rutland Reg. Medical Center	Rutland, VT
2000	Cutting Edge Pain Management	Keynote Speaker, Practical Pain Management for Practicing Physicians	Durham, NH
2000	Management of Chronic Pelvic Pain	Obstetrics and Gynecology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
2001	Implantable Therapies in the Management of Spinal and Radicular Pain	Spine Center Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
2001	Management of Chronic Pain	Grand Rounds; Alice Peck Day Hospital	Lebanon, NH
2001	Post Anesthesia Care Unit Pain Management	PACU 2001: A Perianesthesia Odyssey Dartmouth-Hitchcock Medical Center	Lebanon, NH
2001	Management of Chronic Pain	Internal Medicine Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
2001	Palliative Medicine	Radiation Oncology Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
2001	Basic Neuroanatomy; Anatomy and Safety and Radiology Implantation Techniques for Neurostimulation	Interventional Training Workshop	Boston, MA
2001	Complications Management and Troubleshooting Algorithms for Neurostimulation Systems	Interventional Training Workshop	Boston, MA
2002	End of Life Care for Patients with Non Cancer Diagnoses	Internal Medicine Grand Rounds; Dartmouth-Hitchcock Medical Center	Lebanon, NH
2002	Treatment of Acute Pain	DHMC Pain Day General Surgery Grand Rounds; Dartmouth-	Lebanon, NH

		Hitchcock Medical Center	
2002	Pediatric Palliative Medicine	Pediatrics Grand Rounds Dartmouth-Hitchcock Medical Center	Lebanon, NH
2002	Palliative Medicine	Psychiatry Grand Rounds; Dartmouth- Hitchcock Medical Center	Lebanon, NH
2002	Uses, History of, and Controversies Surrounding the Use of Opioids	NEPA Annual Meeting	Woodstock, VT
2002	Perioperative Pain Management for Anesthesiologists; End of Life Care	New England Society of Anesthesiologists Annual Fall Conference	Scarborough, ME

*I have stopped recording local and regional lectures in 2002 but have continued to speak locally and regionally approximately ten times per year.*

**National:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
1983	Pneumococcal Capsular Polysaccharide Types: A Four Year Study	Interscience Conference on Antimicrobial Agents and Chemotherapy .	Las Vegas, NV
1990	Celiac Plexus Block	Harvard Medical School Regional Anesthesia Update	Boston, MA
1991	Opiate Pharmacology	American Society of Regional Anesthesia conference on acute pain management	Scottsdale, AZ
1991	Femoral Nerve Block, 3-in-1 Block	American Society of Regional Anesthesia conference on acute pain management	Scottsdale, AZ
1991	Patient Controlled Epidural Analgesia	American Society of Regional Anesthesia conference on acute pain management	Scottsdale, AZ
1991	NSAIDs-Ketorolac	American Society of Regional Anesthesia conference on acute pain management	Scottsdale, AZ
1991	Anesthesia: Approach to Chronic Pain	Tufts, New England Medical Center Hospitals	Boston, MA



Curriculum vitae

1991	Epidural Infusions for Postoperative Pain Relief	Harvard Medical School Regional Anesthesia Update	Boston, MA
1991	Thoracic Analgesia	Harvard Medical School Regional Anesthesia Update	Boston, MA
1991	Pain Management	Harvard Medical School Anesthesia Industry Course	Boston, MA
1991	Treatment of Chronic Pain	Harvard Medical School Intensive Review of Neurology	Boston, MA
1992	Pain Management	Harvard Medical School Anesthesia Industry Course	Boston, MA
1992	Epidural Infusions for Postoperative Pain Relief	Harvard Medical School Anesthesia Industry Course	Boston, MA
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Portland, OR
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Philadelphia, PA
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Marquis, NY
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Nashville, TN
1993	Outpatient Management of Acute Pain	Symposium for Primary Care Providers	Baltimore, MD
1993	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Salt Lake City, UT
1993	Epidural Infusions for Postoperative Pain Relief	Beth Israel Hospital	Boston, MA
1993	Complications of Pain Management Procedures	Anesthesia Grand Rounds, Beth Israel Hospital	Boston, MA
1993	Autonomic Pain Syndromes	Harvard Medical School Comprehensive Review in Pain Management	Boston, MA
1993	Regional Techniques for Thoracic Analgesia	Harvard Medical School Thoracic Anesthesia Update	Boston, MA
1993	Epidural Infusions for Postoperative Pain Relief	Harvard Medical School	Boston, MA

		Regional Anesthesia Update	
1993	Celiac Plexus Block	Harvard Medical School Regional Anesthesia Update	Boston, MA
1994	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Memphis, TE
1994	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Buffalo, NY
1994	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	Garden City, NY
1994	Overview of Agency for Health Care Policy and Research Clinical Practice Guidelines for Acute Pain Management	Symposium for Primary Care Providers	St. Louis, MO
1994	Acute Pain Management	Ordner Medical Society Meeting	Jacksonville, NC
1994	Epidural Infusions for Postoperative Pain Relief	Hospital for Special Surgery	New York, NY
1994	Acute Pain Management	Medical Center at Princeton	Princeton, NJ
1995	Pain Management for the Primary Care Provider	Adirondack Independent Practice Association Annual Conference	Lake Placid NY
1997	Pharmacological Strategies in the Management of Pain	University of Massachusetts Medical Center Symposium on Pain: a Professional Overview	Worcester, MA
1998	Acute Pain Management	Anesthesiology Grand Rounds; Fletcher Allen Hospital University of Vermont	Burlington, VT
1998	"Palm Micros" For Data Collection And Streamlining Clinical Studies	Paperless Clinical Trials Conference	San Diego, CA
1999	Myofascial Pain Syndrome: Diagnosis, Treatment, and Controversies	American Academy of Pain Medicine 15 <sup>th</sup> Annual Meeting	Palm Springs, CA
1999	Acute Pain Management	American Academy of Pain Medicine 15 <sup>th</sup> Annual Meeting	Palm Springs, CA
1999	Workshop: Pros and Cons in the Use of Botulinum Toxin	American Academy of Pain Medicine 15 <sup>th</sup> Annual Meeting	Palm Springs, CA

1999	Spinal Cord Stimulation and Intrathecal Analgesia	American Academy of Pain Medicine 15 <sup>th</sup> Annual Meeting	Palm Springs, CA
1999	Regional Techniques for Postoperative Pain	American Society of Regional Anesthesia Meeting	Boston, MA
1999	Thoracic Epidurals and Neuraxial Techniques	American Society of Regional Anesthesia Meeting	Boston, MA
2000	Anatomy And Neurophysiology of Nociception	The Second Annual Michael Stanton Hicks Pain Management and Regional Anesthesia Symposium	Key West, FL
2000	Cancer Pain Management	The Second Annual Michael Stanton Hicks Pain Management and Regional Anesthesia Symposium	Key West, FL
2000	Neurolytic Blockade	The Second Annual Michael Stanton Hicks Pain Management and Regional Anesthesia Symposium	Key West, FL
2000	Botulinum Toxin for Pain Management	The Second Annual Michael Stanton Hicks Pain Management and Regional Anesthesia Symposium	Key West, FL
2000	Acute Pain Management	American Academy of Pain Medicine 16 <sup>th</sup> Annual Meeting	New Orleans, LA
2000	Spinal Cord Stimulation and Intrathecal Drug Administration Systems	American Academy of Pain Medicine 16 <sup>th</sup> Annual Meeting	New Orleans, LA
2000	Opioids for Nonmalignant Pain	American Academy of Pain Medicine 16 <sup>th</sup> Annual Meeting	New Orleans, LA
2000	Assessing New Technologies in Pain Management	Grand Rounds, New York University Medical Center	New York, NY
2001	Palliative Care	American Academy of Pain Medicine 17 <sup>th</sup> Annual Meeting	Miami Beach, FL
2001	Newer Technologies in the Management of Chronic Pain	Tufts New England Medical Center Anesthesiology Grand Rounds	Boston, MA
2001	Complex Regional Pain Syndromes	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA

2001	Innovative Uses of Spinal Cord Stimulation	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2001	Spinal Cord Stimulation Workshop	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2002	Mechanism Based Pain Diagnosis and Treatment	Eastern Pain Association Scientific Meeting	New York, NY
2002	Spinal Cord Stimulation; Principles and Practice of Pain Medicine	Harvard Medical School	Boston, MA
2002	Complex Regional Pain Syndromes; Principles and Practice of Pain Medicine	Harvard Medical School	Boston, MA
2003	The Use of Opioids for Chronic Noncancer Pain	Massachusetts General Hospital	Boston, MA
2003	Spinal Analgesia	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2003	Cancer Pain and Palliative Care in Adults	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2003	Evidence Based Interventional Pain Treatment	New England Pain Association	Manchester, NH
2004	Palliative Medicine	American Society of Regional Anesthesia	Phoenix, AZ
2004	Spinal Analgesia	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2004	Cancer Pain and Palliative Care in Adults	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2005	Spinal Analgesia	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2005	Complex Regional Pain Syndrome	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2005	Cancer Pain	American Society of Regional Anesthesia	Miami, FL
2005	Palliative Medicine, Overview	American Society of Regional Anesthesia	Miami, FL
2005	Treatment of Nausea and Vomiting in Patients With Cancer	American Society of Regional Anesthesia	Miami, FL

2005	Management of Opioid Induced Constipation	American Society of Regional Anesthesia	Miami, FL
2005	Pain Medicine for Primary Care: Opioid Prescribing	New England Pain Association and Boston Pain Forum	Boston, MA
2006	Theory and Technique- Implantable Pain Therapies	Course Director	Minneapolis, MN
2006	Theory and Technique- Implantable Pain Therapies	Course Director	New York City, NY
2006	Ordering and Interpretation of Urine Toxicology Tests	American Society of Regional Anesthesia	San Francisco, CA
2006	Palliative Medicine, Overview	American Society of Regional Anesthesia	San Francisco, CA
2006	Chronic Pain in the Cancer Survivor	American Society of Regional Anesthesia	San Francisco, CA
2006	Opioids for Chronic Non-Cancer Pain	New England Pain Association	Woodstock, VT
2006	The Use of Opioids for Chronic Musculoskeletal Pain	New England College of Occupational and Environmental Medicine	Bedford, MA
2007	Complex Regional Pain Syndrome	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2007	Spinal Analgesia	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2007	Using Computers to Assist in Substance Screening in Pain Medicine	The Third Annual Dartmouth Symposium on Substance Use; NH Physicians Conference on Addiction Medicine	Hanover, NH
2008	(Moderator and Speaker) Clinical Guidelines on Chronic Opioid Therapy in Chronic Noncancer Pain: Process and Progress Report	American Pain Society 27 <sup>th</sup> Annual Scientific Meeting	Tampa, FL
2008	Advances in Pain Management: Emerging Strategies and Clinical Innovations	American Pain Society 27 <sup>th</sup> Annual Scientific Meeting	Tampa, FL
2008	Is Chronic Opioid Therapy Suitable for the Management of Chronic Pain	American Society of Anesthesiologists Annual Meeting	Orlando, FL
2008	Evidence-based Guidelines for Opioid Therapy of Chronic Nonmalignant Pain	International Association for Pain and Chemical	Philadelphia, PA

		Dependency Annual Meeting	
2009	Evidence-based Guidelines for Opioid Therapy of Chronic Nonmalignant Pain	American Pain Society 28 <sup>th</sup> Annual Scientific Meeting	San Diego, CA
2009	Evidence-based Guidelines for Opioid Therapy of Chronic Nonmalignant Pain	Beth Israel Deaconess Medical Center Invited Lecturer	Boston, MA
2009	Chronic Pain: Clinical and Neurochemical Features	Red Rock Casino, Hershey Medical Center	Las Vegas, NV
2010	Mechanisms and Neuroplasticity of Pain	American Academy of Pain Medicine Annual Meeting	San Antonio, Texas
2010	Spinal Analgesia	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2010	Cancer Pain and Palliative Care	Principles and Practice of Pain Medicine Harvard Medical School	Boston, MA
2011	Pain Outcomes Evaluation Tool (POET)	American Academy of Pain Medicine Annual Meeting	Washington, DC
2011	Pain Outcomes Evaluation Tool (POET)	American Pain Society Annual Meeting	Austin, TX
2011	Opioid Pharmacology	American Pain Society Annual Meeting	Austin, TX
2012	Rational Opioid Management	American Society of Regional Anesthesia and Pain Medicine Annual Meeting	Miami, FL
2012	Pitfalls in Pain Procedures	American Society of Regional Anesthesia and Pain Medicine Annual Meeting	Miami, FL
2013	Chronic Pain and Opioids	Boston University Work Related Injuries	Waltham, MA
2013	Rational Opioid Management	Vermont Ethics Network	Burlington, VT
2013	PROP and the Future of Opioids	International Conference on Opioid Use	Boston, MA
2013	Keynote Speaker- Rational Opioid Prescribing	A Community Approach to Comprehensive Pain Management	St. Albans, VT
2013	Medical Marijuana	NECOEM	Newton, MA
2014	Medical Cannabinoids	International Conference on Opioids	Boston, MA

**International:**

<u>DATE</u>	<u>TOPIC</u>	<u>ORGANIZATION</u>	<u>LOCATION</u>
1995	Chronic Pain Management Sympathetic Blocks in Chronic Pain	McGill Review Course in Anesthesiology	Montreal, Canada

**MEDIA**

- 2014 CATV one hour program on opioids <http://vimeo.com/92955279>
- 2011 Filmed for Physicians for Responsible Opioid Prescribing (PROP)
- 2010 Filmed for Discovery Chanel program on opioids for chronic pain
- 2009-14 Interviewed and cited by Associated Press (Baltimore Sun, Chicago Tribune), Wall Street Journal, New York Times, National Public Radio, JAMA

**BIBLIOGRAPHY:****Journal Articles:****Original Articles:**

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2. Jamison RN, **Fanciullo GJ**, Baird JC. Usefulness of pain drawings in identifying real or imagined pain: Accuracy of pain professionals vs. nonprofessionals. 2<sup>nd</sup> joint scientific meeting of APS and CPS, Vancouver, BC, Canada, 2004.

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Updated: 1/18/12  
By: GF

**Section E – Number 3:**

The name, title and a copy of the resume of the person who will be responsible for all information security requirements, including the requirement that patient information remain confidential

**Response:**

David Paume' RPh

RPh ; Licensed Dispensary ; Dispensary Manager ; Compliance Officer

Resume behind this page

**DAVID PAUMÉ RPh**

A Registered Pharmacist with experience in Project Management of Clinical Operations of various therapeutic areas (i.e. Respiratory, Cardiovascular, Metabolic, Immunology, Oncology and Neurology), Clinical Research experience, Research & Development experience in the formulation of solid dosage forms (i.e. tablets and capsules) and Marketing Sales experience.

**CAREER SUMMARY****10/2014 – Present**

Compassionate Care Center of CT  
4 Garella Road  
Bethel, CT 06801

- Pharmacist providing dispensary oversight and medical marijuana information to patients and healthcare professionals.

**8/1991 – Present**

Boehringer Ingelheim Pharmaceuticals Inc.  
900 Ridgebury Road  
Ridgefield, CT 06877

**Medical Affairs Department****(6/2012 – Present) Associate Director – Vendor Quality Management – Medical & Technical Information Group**

- Provide quality management oversight of vendor operations involving the recognition, collection and documentation of adverse event, product complaint and requests for medical information (including On-Label and Off-Label information).
- Oversee and trouble shoot the transfer of Adverse Event data from vendor contact centers to Pharmacovigilance database (ARISg).
- Responsible for overseeing the Corrective Action / Preventive Action (CAPA) process for all non-compliances that occur with vendors and department personnel.

**(6/2006 – 6/2012) Associate Director – Clinical Operations**

- Responsible for providing Clinical Monitor oversight from Final Protocol to Database Lock for studies in the respiratory therapeutic area:
  - Provided Clinical Monitor and financial oversight to numerous Phase 2 and 3 clinical trials,
  - Oversaw central lab data review for Pulmonary Function Tests (PFTs), safety blood tests, ECG & Holter results, IVRS/IXRS Drug Supplies and Quality of Life questionnaires,
  - Responsible for reviewing patient listings for data cleaning purposes including the following: AE & SAE data, concomitant medication, medical history/baseline conditions, protocol violations, etc.
  - Responsible for coordinating cross functional team deliverables for multiple database locks. This included managing team meetings to develop DBL Timelines, assigning data cleaning priorities for each site and troubleshooting when team deliverables or timelines were at risk.

**(1/2001 – 6/2006) Associate Director – Project Management Clin Ops****(6/1997 – 12/2000) Senior Manager – Project Management Clin Ops**

- Responsible for providing Project Management oversight to timelines, budgets and resources for clinical programs in the following departments:
  - Therapeutic Areas – Immunology + Respiratory (1/2005 – 6/2006)
  - Therapeutic Areas – Cardiovascular + Metabolic + Respiratory (1/2001 – 1/2005)
  - Therapeutic Area – General Medicine [includes Oncology + Neurology] (6/1997 – 12/2000)
- Lead cross functional Clin Ops teams in a matrix environment to provide team deliverables on schedule and within budget.
- Met with cross functional Clin Ops teams on a monthly and pm basis to monitor progress of team deliverables, timelines and budgetary matters. Ensured that issues which impacted milestone dates or the critical path were addressed promptly with the teams to develop contingency plans of action.
- Fostered an environment of teamwork and cross functional collaboration to support project goals.
- Responsible for negotiating with the Executive Directors of various support groups (Data Management, Pharmaceuticals, Statistics, CRA Monitoring, etc.) for resources and on time execution of deliverables when conflicts occurred.
- Primary point of contact to provide upper management with the status of each trial/program in the Therapeutic Area Department and to communicate management priorities to trial team members. Presented trial status updates to upper management at Quarterly Review Meetings.
- Ensured that US lead trials had complete study budgets (Investigator costs, centralized core labs, ECGs, spirometry, CROs, etc.) in place in the Clinical Trial Management System (CTMS) before Operating Unit (OPU) commitment was provided.

- Responsible for overseeing all resource, timeline and cost variables in the CTMS database for US trials.
- Provided management with an FTE resource needs assessment for planned clinical trials on a quarterly basis.
- Responsible for the development and oversight of the annual budget in the department for all trial related and personnel expenses.

(1/1996 - 6/1997) - Manager MRA

(8/1991 - 12/1995) - Senior Medical Research Associate

- Managed multiple Phase II and international pivotal Phase III trials. This includes the approval of a Parkinson's disease medication (Mirapex® - pramipexole) with a co-development partner (The Upjohn Company).
- Managed CRO activities for an international Phase II/III stroke trial (Cerestat® - aptiganel HCL). The stroke trial involved 156 sites across 5 countries (Australia, Canada, South Africa, UK and US).
- Recruited investigators, oversaw regulatory document tracking and designed drug supplies for trials (oral and IV dosage forms).
- Provided technical and scientific guidance to international clinical monitors and study site personnel to ensure consistency in interpretation and exchange of scientific information.
- Responsible for writing annual reports, SAE narratives and sections of clinical trial reports.

8/1981 - 7/1991

**DuPont - Merck Pharmaceuticals  
Wilmington, DE 19880**

(9/1987 - 7/1991) - Clinical Research Associate (CRA) to Senior CRA

- Supported the NDA submissions through writing patient narratives and reviewing lab data.
- Assisted in the design, initiation and implementation of cardiovascular and Alzheimer's disease studies.
- Conducted on site monitoring visits to Investigators for pre-initiation, initiation, ongoing site visits and study close outs.
- Collected, tracked and maintained required regulatory documents for monitored sites.
- Presented clinical protocols, CRFs and administrative information at investigators' meetings and at clinical study sites.
- Served as a liaison between the Medical and Pharmacy Departments for designing drug packaging and labeling of clinical supplies.

(7/1985 - 8/1987) - Professional Sales Representative - Southwest Florida Territory

DuPont's product line required extensive hospital contacts with anesthesiologists, surgeons and emergency room physicians to provide product information and develop new relationships to increase sales in the territory. Developed and delivered product presentations to office-based and hospital based practitioners to promote product line. After the first 3 months, I increased the performance sales index of my territory and was able to continue to grow the business every quarter thereafter while sales for the district as a whole dropped.

(7/1983 - 7/1985) - Scientist - Pharmacy R&D

Served in the Technical Services Group as an interface between the development and production groups for new drug implementation. Specific highlights include:

- Coordinated scale up pilot batches from development to production facilities.
- Supervised the manufacture and packaging of batches for Phase I, II & III clinical trials.
- Production Troubleshooting.

(8/1981 - 6/1983) - Associate Scientist - Pharmacy R&D

Worked in the formulation group for solid dosage forms, responsibilities included:

- Formulated solid dosage forms (tablets & capsules) for new drugs and process improvement of existing formulas and procedures.
- Inventory coordinator for ordering, sampling and releasing of quarantined raw materials and finished clinical study supplies.
- Responsible for color formulation of numerous development and marketed compounds.
- Oversaw the packaging and labeling of clinical supplies.

**EDUCATION:**

Bachelor of Science in Pharmacy (BSP)  
The University of Connecticut School of Pharmacy  
Storrs, Connecticut





## Section E – Number 4

### Response:

All partners shall retain equal equity regardless of their role which shall equate to 25% per person.

Tom Nicholas- 25%

Angela D'amico- 25%

Kevin Murphy- 25%

John Glowik- 25%

**RELEAF RECOVERY, LLC**

**SECTION E.5- Indebtedness issued or executed or to be issued or executed in connection with the opening or operating of the proposed dispensary facility**

The founders of the Company intend to pay for all necessary expenses in connection with the opening and operation of the dispensary through their own personal funds. There will not be any bonds, loans, mortgages, trust deeds, pledges, lines of credit, notes, debentures or other forms of indebtedness issued or executed in connection with the opening and operation of the dispensary.

Section E-5

OFFICIAL USE ONLY

CONFIDENTIAL PERSONAL/FINANCIAL INFORMATION

WITHHOLD UNDER CGS 1-210 (b) (19)

**RELEAF RECOVERY, LLC**

Section E-5

**ANGELA D'AMICO  
STATEMENT OF FINANCIAL CONDITION  
AS OF AUGUST 31, 2015**

**ASSETS**

Cash  
Marketable securities  
Vested balance in retirement plan  
Personal residence  
Rental property - Brooklyn, NY  
Cash surrender value of life insurance  
Personal property  
Ownership interest in AD Lines - Euro Group Inc. (50% owner)  
Ownership interest in D & B Wellness LLC (100% owner)

**TOTAL ASSETS**

\$

REDACTED

REDACTED

REDACTED

\$

**LIABILITIES**

Mortgage on personal residence

**NET WORTH**

**TOTAL LIABILITIES AND NET WORTH**

\$

\$

REDACTED

REDACTED

REDACTED































































































































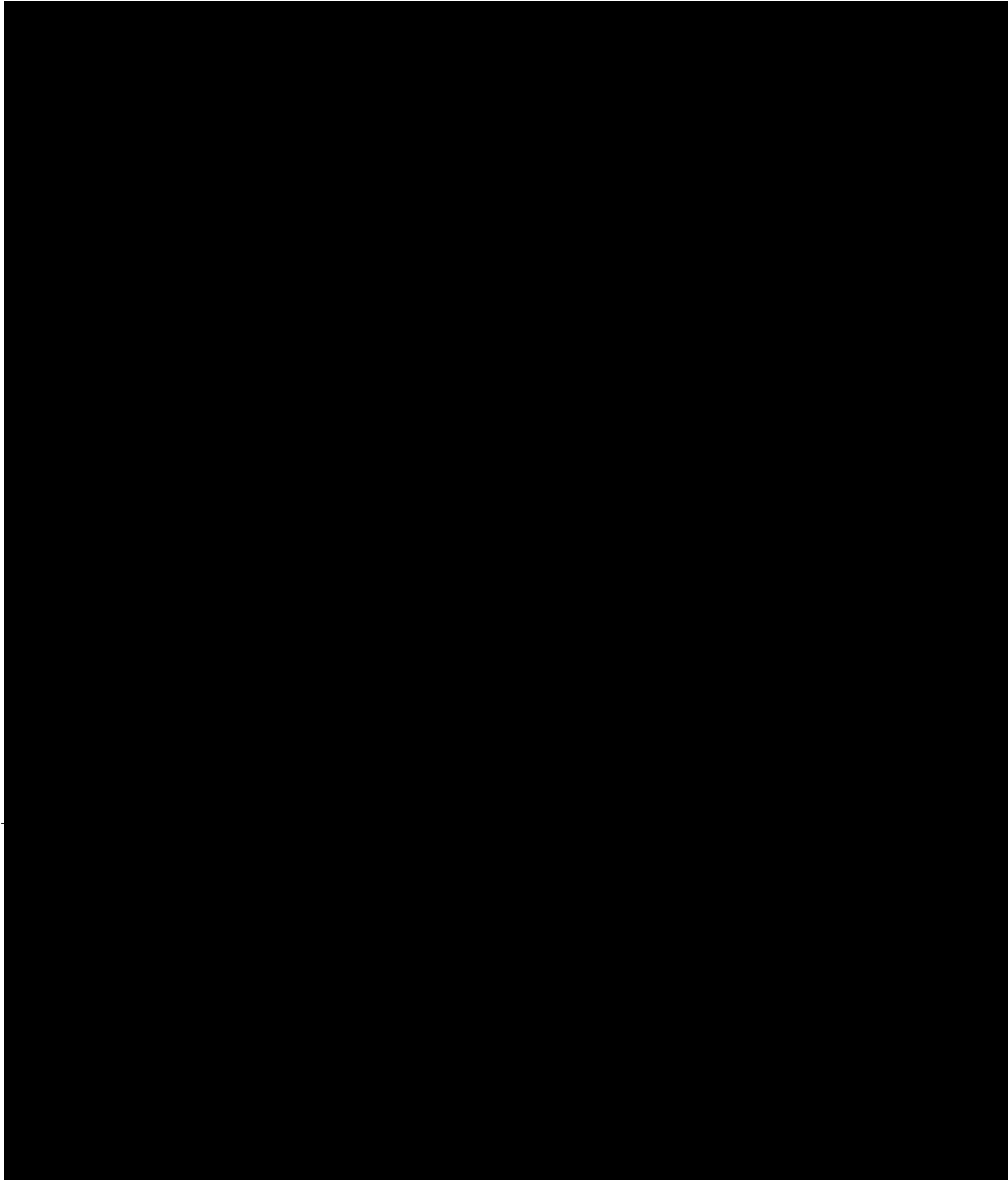






relief  
recovery

Section F:5



April 20, 2015

RE: William MacDonald

DOB 3-29-1973

To Whom It May Concern:

I am the treating physician caring for William MacDonald's aggressive Thyroid cancer. He has been utilizing the medical marijuana program and has had clear results. William has undergone several major complex surgeries, radiation therapy and radioactive iodine treatments without success. He has suffered major lymphedema with several hospitalizations for leg infections.

To date the only thing that has helped stabilize the lymphedema is the medical marijuana. We believe it may be inhibiting the growth of his aggressive cancer as well. He has been following a high dose regimen and needs to continue this to keep his lymphedema in check and hopefully keep his cancer at bay.

The current regimen is 700-900mg/ml of THC and 100-300mg/ml of CBD. This is 86-125 grams a month. This protocol is for 90 days.

I sincerely request that William be provided exception and be allowed to continue this regimen:

Sincerely,



Neal Fischbach, MD

Medical Oncologist

Smilow Cancer Center





April 19, 2015

Brian Tomasulo

4 Autumn Ridge Road

Newtown, CT 06470

DCP:

RE: Trial utilizing RSO (CPS-Concentrated Oil Blend 1401) to kill Brian Cancer.

On October 3, 2013 I was diagnosed with Testicle Cancer that spread to my lungs and lymphatic system. I did 6 months of chemo 5 days a week for 6 hours a day. This treatment almost killed me. This treatment put me in remission. On May 20, 2014 I had a 10 hours seizure, client found me and rushed me to the hospital. I was diagnosed with an egg size tumor in my brain. I had immediate brain surgery on the May 23, 2014. They removed the egg size tumor, following with a partial brain radiation. I was in Danbury Hospital for one month. I learned how to walk and talk, just like being a baby, and thought the road to remission was there. I had radiation for two weeks and was released from the hospital June 20, 2014. Three months later I was retested, and they found 4 tumors in my brain.

I Brian Tomasulo have started at the Compassionate Care Center of CT September 27, 2014, just in time to help me fight this battle. Unaware the cancer in the brain was forming again, I was made aware at CCC of the benefit of Cannabis and brain tumors. I started on flower and tried different products as they became available. In October or November of 2014 I was informed that I have 4 new brain tumors.

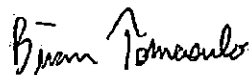
Now the fight began again, I was waiting for the concentrate oil known as Rick Simpson Oil to combat these tumors. On February 19, 2015 I started with CT Pharmaceutical Solutions Concentrated Oil Blend. I know that this trial was offered to me due to the nature of my disease and have been informed to build my tolerance up to 700-900 mL a day. It took me till several weeks to build up to 700 ML per day. On March 4, 2014 I started using 700mL per day.

I went for my brain scan on April 15, 2014, and my results will be in on April 20, 2015.

I am available to the DCP to discuss in needed.

Sincerely,

Brian Tomasulo



April 20, 2015

Re: Tina Ciambriello  
DOB 3/18/1966

To Whom it May Concern,

I am the treating physician caring for Mrs. Ciambriello's breast cancer. She has been utilizing the medical marijuana program for about 6 months and has had some clear benefits. She has an aggressive form of breast cancer and had been off of chemotherapy for more than 6 months now. I think her ability to delay restarting chemotherapy may be due to the effects of her marijuana use and slowing of cancer growth and I recommended she continue with her therapeutic regimen. It is my understanding that she had been following a high-dose regimen that requires 84 - 125 grams of marijuana per month. This regimen is recommended for a period of 3 months and she has an additional 2 months to complete.

I sincerely request that she be provided exception and allowed to continue this regimen and receive up to 125 grams of marijuana monthly for the next 2 months. Please do not hesitate to contact me with any concerns or questions.

Sincerely,



Justin Persico, MD

Smilow Cancer Center Trumbull  
P: 203-502-8400  
F: 203-502-8409  
E: justin.persico@yale.edu





***Certificate of Appreciation***  
**2014 - 2015**

*Presented to:*  
**Compassionate Care Center of CT / D&B Wellness, LLC**

*With sincere appreciation for your efforts to warm your community  
by collecting coats for those in need.*

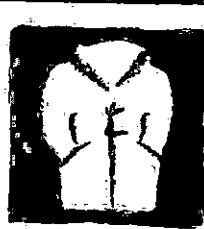
*Jennifer Stockard*

Jennifer Stockard - President & CEO

*Sherri Wood*

Sherri Wood - Chair & National Founder

**ONE WARM COAT®**



***Certificate of Appreciation***  
**2014 - 2015**

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*Jennifer Stockard*

Jennifer Stockard - President & CEO

*Sherri Wood*

Sherri Wood - Chair & National Founder

**ONE WARM COAT®**



**COMPANY VISION and MISSION--- insert from application**

**Build Trust and Credibility**

The success of our business is dependent on the trust and confidence we earn from our employees and patients. We gain credibility by adhering to our commitment, displaying honesty and integrity and reaching company goals solely through honorable conduct. It is easy to say what we must do, but the proof is in our actions. Ultimately, we will be judged on what we do.

When considering any action, it is wise to ask will this build trust and credibility for RR? Will it help create a working environment in which RR can succeed over the long term? Is the commitment I am making one I can follow through with? The only way we will maximize trust and credibility is by answering yes to build our trust and credibility.

**Respect for the Individual**

We all deserve to work in an environment where we are treated with dignity and respect. RR is committed to creating such an environment because it brings out the full potential in each of us, which, in turn, contributes directly to our business success. We cannot afford to let anyone's talents go to waste.

RR is an equal employment/affirmative action employer and is committed to providing a workplace that is free of discrimination of all types from abusive, offensive or harassing behavior. Any employee who feels harassed or discriminated against should report the incident to his or her manager.

**Create a Culture of Open and Honest Communication**

At RR everyone should feel comfortable to speak his or her mind, particularly with respect to ethics concerns. Managers have a responsibility to create an open and supportive environment where employees feel comfortable raising such questions. We all benefit tremendously when employees exercise their power to prevent mistakes or wrong doing by asking the right questions at the right times.

RR will investigate all reported instances of questionable or unethical behavior. In every instance where improper behavior is found to have occurred, the company will take appropriate action. We will not tolerate retaliation against employees who raise genuine ethics concerns in good faith.



## **Create a Culture of Open and Honest Communication continued**

For your information, RR's whistleblower policy is as follows:

Employees are encouraged, in the first instance, to address such issues with their managers, as most problems can be resolved. If for any reason that is not possible or if an employee is not comfortable raising the issue with his manager RR owners operate with an open door policy.

### **Set Tone at the Top**

Management has the added responsibility for demonstrating, through their actions, the importance of this Code. In any business, ethical behavior does not simply happen; it is the product of clear and direct communication of behavioral expectations, modeled from the top and demonstrated by example. Again, ultimately, our actions are what matters.

To make our Code work, managers must be responsible for promptly addressing ethical questions or concerns raised by employees and for taking the appropriate steps to deal with such issues. Managers should not consider employees' ethics concerns as threats or challenges to their authority, but rather as another encouraged form of business communication. At RR we want the ethics dialogue to become a natural part of daily work.

### **Uphold the Law**

RR's commitment to integrity begins with complying with laws, rules and regulations where we do business. Further, each of us must have an understanding of the company policies, laws, rules and regulations that apply to our specific roles. If we are unsure of whether a contemplated action is permitted by law or RR policy, we should seek the advice from the resource expert. We are responsible for preventing violations of law and for speaking up if we see possible violations.

Because of the nature of our business, some legal requirements warrant specific mention here.

### **Competition**

We are dedicated to ethical, fair and vigorous competition. We will sell producers products and services based on their merit, superior quality, functionality and competitive pricing. We will make independent pricing and marketing decisions and will not improperly cooperate or coordinate our activities with our competitors. We will not offer or solicit improper payments or gratuities in connection with the purchase of goods or services for RR or the sales of its products or services, nor will we engage or assist in unlawful boycotts of particular customers.



### **Proprietary Information**

It is important that we respect the property rights of others. We will not acquire or seek to acquire improper means of a competitor's trade secrets or other proprietary or confidential information. We will not engage in unauthorized use, copying, distribution or alteration of software or other intellectual property.

### **Selective Disclosure**

We will not selectively disclose (whether in one-on-one or small discussions, meetings, presentations, proposals or otherwise) any material nonpublic information with respect to RR's securities, business operations, plans, financial condition, results of operations or any development plan.

### **Health and Safety**

RR is dedicated to maintaining a healthy environment. A manual has been designed to educate you on safety in the workplace. If you do not have a copy of this manual, please see your management.

### **Conflicts of Interest**

We must avoid any relationship or activity that might impair, or even appear to impair, our ability to make objective and fair decisions when performing our jobs. At times, we may be faced with situations where the business actions we take on behalf of RR may conflict with our own personal or family interests because of the course of action that is best for us personally may not also be the best course of action for RR. We owe a duty to RR to advance its legitimate interests when the opportunity to do so arises. We must never use RR property or information for personal gain or personally take for ourselves any opportunity that is discovered through our position with RR.

Here are some other ways in which conflicts of interest could arise:

1. Being employed (you or a close family member) by, or acting as a consultant to, a competitor or potential competitor, supplier or contractor, regardless of the nature of the employment, while you are employed with RR.
2. Hiring or supervising family members or closely related persons.
3. Serving as a board member for an outside commercial company or organization.
4. Owning or having a substantial interest in a competitor, supplier or contractor.



5. Having a personal interest, financial interest or potential gain in any RR transaction.
6. Placing company business with a firm owned or controlled by a RR employee or his or her family.
7. Accepting gifts, discounts, favors or services from a customer/potential customer, competitor or supplier, unless equally available to all RR employees.

Determining whether a conflict of interest exists is not always easy to do. Employees with a conflict of interest question should seek advice from management. Before engaging in any activity, transaction or relationship that might give rise to a conflict of interest, employees must seek review from their managers or the HR department.

### **Gifts, Gratuities and Business Courtesies**

RR is committed to competing solely on a merit of our products and services. We should avoid any actions that create a perception that favorable treatment of outside entities by RR was sought, received or given in exchange for personal business courtesies. Business courtesies include gifts, gratuities, meals, refreshments, entertainment or other benefits from persons or companies with whom RR does or may do business. We will neither give nor accept business courtesies that constitute, or could reasonably be perceived as constituting, unfair business inducements that would violate law, regulation or policies of RR or customers, or would cause embarrassment or reflect negatively on RR's reputation.

### **Accepting Business Courtesies**

Most business courtesies offered to us in the course of our employment are offered because of our positions at RR we should not feel any entitlement to accept and keep a business courtesy. Although we may not use our position at RR to obtain business courtesies, and we must never ask for them, we may accept unsolicited business courtesies that promote successful working relationships and good will with the firms that RR maintains or may establish a business relationship with.

Employees who award contracts or who can influence the allocation of business, who create specifications that result in the placement of business or who participate in negotiation of contracts must be particularly careful to avoid actions that create the appearance of favoritism or that may adversely affect the company's reputation for impartiality and fair dealing. The prudent course is to refuse a courtesy from a supplier when RR is involved in choosing or reconfirming a supplier or under circumstances that would create an impression that offering courtesies is the way to obtain RR business.





### **Meals, Refreshments and Entertainment**

We may accept occasional meals, refreshments, entertainment and similar business courtesies that are shared with the person who has offered to pay for the meal or entertainment, provided that:

- They are not inappropriately lavish or excessive.
- The courtesies are not frequent and do not reflect a pattern of frequent acceptance of courtesies from the same person or entity.
- The courtesy does not create the appearance of an attempt to influence business decisions, such as accepting courtesies or entertainment from a supplier whose contract is expiring in the near future.
- The employee accepting the business courtesy would not feel uncomfortable discussing the courtesy with his or her manager or co-worker or having the courtesies known by the public.

### **Gifts**

Employees may accept unsolicited gifts, other than money, that conform to the reasonable ethical practices of the marketplace, including:

- Flowers, fruit baskets and other modest presents that commemorate a special occasion.
- Gifts of nominal value, such as calendars, pens, mugs, caps and t-shirts (or other novelty, advertising or promotional items).

Generally, employees may not accept compensation, honoraria or money of any amount from entities with whom Releaf Recovery does or may do business. Tangible gifts (including tickets to a sporting or entertainment event) that have a market value greater than \$100 may not be accepted unless approval is obtained from management.

Employees with questions about accepting business courtesies should talk to their managers.

### **Offering Business Courtesies**

Any employee who offers a business courtesy must assure that it cannot reasonably be interpreted as an attempt to gain an unfair business advantage or otherwise reflect negatively upon RR. An employee may never use personal funds or resources to do something that cannot be done with RR resources. Accounting for business courtesies must be done in accordance with approved company procedures.



Other than to our government customers, for whom special rules apply, we may provide nonmonetary gifts (i.e., company logo apparel or similar promotional items) to our customers. Further, management may approve other courtesies, including meals, refreshments or entertainment of reasonable value, provided that:

- The practice does not violate any law or regulation or the standards of conduct of the recipient's organization.
- The business courtesy is consistent with industry practice, is infrequent in nature and is not lavish.
- The business courtesy is properly reflected on the books and records of RR.

### **Set Metrics and Report Results Accurately**

#### **Accurate Public Disclosures**

We will make certain that all disclosures made in financial reports and public documents are full, fair, accurate, timely and understandable. This obligation applies to all employees, including all financial executives, with any responsibility for the preparation for such reports, including drafting, reviewing and signing or certifying the information contained therein. No business goal of any kind is ever an excuse for misrepresenting facts or falsifying records.

Employees should inform Executive Management if they learn that information in any filing or public communication was untrue or misleading at the time it was made or if subsequent information would affect a similar future filing or public communication.

#### **Corporate Recordkeeping**

We create, retain and dispose of our company records as part of our normal course of business in compliance with all RR policies and guidelines, as well as all regulatory and legal requirements.

All corporate records must be true, accurate and complete, and company data must be promptly and accurately entered in our books in accordance with Releaf Recovery's and other applicable accounting principles.

We must not improperly influence, manipulate or mislead any unauthorized audit, nor interfere with any auditor engaged to perform an internal independent audit of RR books, records, processes or internal controls.



### **Promote Substance Over Form**

At times, we are all faced with decisions we would rather not have to make and issues we would prefer to avoid. Sometimes, we hope that if we avoid confronting a problem, it will simply go away.

At RR, we must have the courage to tackle the tough decisions and make difficult choices; secure in the knowledge that RR is committed to doing the right thing. At times this will mean doing more than simply what the law requires. Merely because we can pursue a course of action does not mean we should do so. We at RR do communicate the bigger picture, which is answering to a higher judge.

Although RR's guiding principles cannot address every issue or provide answers to every dilemma, they can define the spirit in which we intend to do business and should guide us in our daily conduct.

### **Accountability**

Each of us is responsible for knowing and adhering to the values and standards set forth in this Code and for raising questions if we are uncertain about company policy. If we are concerned whether the standards are being met or are aware of violations of the Code, we must contact the management.

RR takes seriously the standards set forth in the Code, and violations are cause for disciplinary action up to and including termination of employment. Always being aware of where your loyalty lies, which is RR.

### **Confidential and Proprietary Information**

Integral to RR's business success is our protection of confidential company information, as well as nonpublic information entrusted to us by employees, customers and other business partners. Confidential and proprietary information includes such things as pricing and financial data, customer names/addresses or nonpublic information about other companies, including current or potential supplier and vendors. We will not disclose confidential and nonpublic information without a valid business purpose and proper authorization.



## **Use of Company Resources**

Company resources, including time, material, equipment and information, are provided for company business use. Nonetheless, occasional personal use is permissible as long as it does not affect job performance or cause a disruption to the workplace.

Employees and those who represent RR are trusted to behave responsibly and use good judgment to conserve company resources. Managers are responsible for the resources assigned to their departments and are empowered to resolve issues concerning their proper use. Generally, we will not use company equipment such as computers, copiers and fax machines in the conduct of an outside business or in support of any religious, political or other outside daily activity, except for company-requested support to nonprofit organizations. We will not solicit contributions nor distribute non-work related materials during work hours.

In order to protect the interests of the RR network and our fellow employees, RR reserves the right to monitor or review all data and information contained on an employee's company-issued computer or electronic device, the use of the Internet or RR's intranet. We will not tolerate the use of company resources to create, access, store, print, solicit or send any materials that are harassing, threatening, abusive, sexually explicit or otherwise offensive or inappropriate. Questions about the proper use of company resources should be directed to your manager.

## **Media Inquiries**

RR is a high-profile company in our community, and from time to time, employees may be approached by reporters and other members of the media. In order to ensure that we speak with one voice and provide accurate information about the company, we should direct all media inquiries to the owners. No one may issue a press release without first consulting with the owners for approval.

## **Do the Right Thing**

Several key questions can help identify situations that may be unethical, inappropriate or illegal. Ask yourself:

Does what I am doing comply with the RR's Code of Conduct and company policies?

Have I been asked to misrepresent information or deviate from normal procedure?

Would I feel comfortable describing my decision at a staff meeting?

How would it look if it made the headlines?



Releaf Recovery

Section G

Am I being loyal to my family, my company and myself?

What would I tell my child to do?

Is this the right thing to do?

Sincerely,

The Owners of Releaf Recovery

*LIVING OUR CREDO*

*WE ARE MEANT TO INSPIRE*

## **CODE OF ETHICS AND BUSINESS CONDUCT**

### **RELEAF RECOVERY**

At RR we feel it important to have a code of ethics because of the nature of our business, *the dispensing of medical marijuana*.

With medical marijuana having the stigma that it does, it is important we adhere to the following code to help break through the stigma we have lived with surrounding our mission of dispensing MM.

The management and employees of RR might be faced with challenges due to the newness of our industry. It is our intention to prove the “haters” wrong, by offering a safe, secure, reliable, facility for patients to acquire their much needed medication.

With this being our mission we feel this code will be a helpful document for everyone at all levels, surrounding our business.

April 20, 2015

Tina Ciambriello

714 Madison Avenue

Bridgeport, CT 06606

DCP

Re: Trial utilizing RSO (CPS-Concentrated Oil Blend 1401 to treat stage 4 Metastatic Breast Cancer)

In July 2010 I was diagnosed with Breast Cancer. My breast cancer had mediatized to my lung, liver and lymphatic system. I had a mastectomy March 2011, following a lot of chemotherapy cocktails and 5 weeks of radiation, more chemo, which put me into remission. I resumed my life, and prayed for the best.

Unfortunately cancer came back in to my lymphatic system approximately Christmas 2012 or there about. . I am allergic to most types of chemo therefore I need to be on small doses which are complimented with doses of steroids. More chemo put me back into remission, with it returning in the form of lumps in my neck.. Now it being August 2013. More chemo, new drug, Pergetta, this drug after about 8-10 months put me back into remission till July 2014. My cancer came back to my lymphatic systems with additional spots in my neck and lymph nodes.

I have been doing my own research on Cannabis, and felt I would be a perfect candidate. My first visit to the Compassionate Care Center of CT was on October 9, 2014 at that point my cancer was active again. I came into the dispensary, and walked out with no medicine, as my financial situation would not allow me to afford the meds. The owner Angela D'Amico followed me into the parking lot after noticing I left without a purchase, and assured me, by paying for my meds, that they would help. And along with CT Pharmaceutical Solutions has financed my regime of Cannabis.

I decided to give cannabis a shot, with no more chemo. I started with just straight flower, as that is all that was available, once CBD came out, I started with a 1-1 CBD-THC wax, along with Fioraleve flower and additional 1-1 wax. With nothing but cannabis treating my cancer from October 9<sup>th</sup> 2014, to January 2, 2015 PET scan the spots were gone, to quote my doctors Dr Justin Persico, "Right now there is no evidence of cancer". Those words were music to my ears, cannabis and nothing else no chemo, removed those spots in that area.



April 20, 2015

RE: William MacDonald

DOB 3-29-1973

To Whom It May Concern:

I am the treating physician caring for William MacDonald's aggressive Thyroid cancer. He has been utilizing the medical marijuana program and has had clear results. William has undergone several major complex surgeries, radiation therapy and radioactive iodine treatments without success. He has suffered major lymphedema with several hospitalizations for leg infections.

To date the only thing that has helped stabilize the lymphedema is the medical marijuana. We believe it may be inhibiting the growth of his aggressive cancer as well. He has been following a high dose regimen and needs to continue this to keep his lymphedema in check and hopefully keep his cancer at bay.

The current regimen is 700-900mg/ml of THC and 100-300mg/ml of CBD. This is 86-125 grams a month. This protocol is for 90 days.

I sincerely request that William be provided exception and be allowed to continue this regimen:

Sincerely,

Neal Fischbach, MD

Medical Oncologist

Smilow Cancer Center



Smilow Cancer Hospital Care Center  
111 Beach Road  
Fairfield, CT 06824  
203-295-2766  
Fax 203-255-2974





April 20, 2015

Re: Tina Ciambriello  
DOB 3/18/1966

To Whom it May Concern,

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I sincerely request that she be provided exception and allowed to continue this regimen and receive up to 125 grams of marijuana monthly for the next 2 months. Please do not hesitate to contact me with any concerns or questions.

Sincerely,

Justin Persico, MD

Smilow Cancer Center Trumbull  
P: 203-502-8400  
F: 203-502-8409  
E: justin.persico@yale.edu





# FIRST SELECTMAN'S OFFICE

Clifford J. Hurgin Municipal Center, 1 School  
Street, Bethel, CT 06801

Telephone: 203-794-8501 - Fax: 203-778-7520  
Email Address: [firstselectman@bethel-ct.gov](mailto:firstselectman@bethel-ct.gov)

*Matthew S. Knickerbocker, First Selectman  
Richard C. Straiton, Selectman  
Paul R. Szatkowski, Selectman  
Martin J. Lavelor, Town Counsel*

*Wendy Smith, Office Administrator  
Joan Gereg-Bradley, Office Assistant  
Dionne Craig, Office Assistant  
Phyllis Kamsky, HR/Grants Administrator*

June 30, 2015

Dear Sir or Madame,

I am writing today on behalf of D&B Wellness, LLC and its owner and founder, Ms. Angela D'Amico. Ms. D'Amico came to Bethel in the spring of 2014, seeking a suitable location to open a medical marijuana dispensary. D&B Wellness had met all of Connecticut's very strict licensing requirements, and Ms. D'Amico found a suitable location and opened Compassionate Care Center of Connecticut in Bethel in the fall of 2014.

D&B Wellness has been a model citizen and good neighbor throughout the process. The company followed all local zoning regulations explicitly and displayed sensitivity to the surrounding neighborhood by proactively conducting multiple public information forums. Since opening, D&B Wellness has operated Compassionate Care in a thoroughly professional manner.

The center currently serves almost 1,300 patients in Western Connecticut. I have received several calls to my office from patients who are exceedingly grateful to the town for its willingness to allow this valuable service to operate in our community. Some of these callers are military veterans who suffer the effects of chronic pain from combat injuries as well as people battling multiple sclerosis and terminal cancers. Without exception, these patients tell me the products they are able to obtain legally at Compassionate Care are often the only thing that allows them to get through the difficult days. I am happy to give D&B Wellness an unqualified endorsement, and I would encourage you to call me if you have any questions.

Sincerely,

Matthew S. Knickerbocker  
First Selectman



## Town of South Windsor

1540 SULLIVAN AVENUE • SOUTH WINDSOR, CT 06074-2786

AREA CODE 860/644-2511

FAX 860/644-3781

MATTHEW B. GALLIGAN  
Town Manager

June 26, 2015

To Whom It May Concern:

Please be advised that I have been working with Mr. Tom Nicholas, CEO of Prime Wellness of Connecticut, LLC. Mr. Nicholas came to the Town of South Windsor some time ago to talk about opening a medical marijuana dispensary in the Town. We are sending a letter of endorsement because Mr. Nicholas has demonstrated to us that he is very familiar with the operations, security, and importance of such a facility that will help the medical needs of the people they serve.

Prime Wellness came to the Town with plans and specifications and met all of the criteria that the Town Council, Town Manager, Town staff, and Town boards and commissions required. They currently serve approximately 650 patients in the area, and some have traveled from as far as Greenwich, CT. Also, there are some patients here in South Windsor that desperately needed this dispensary as it has helped them to manage their health and lifestyle with their illnesses. I am aware that Prime Wellness has appeared on television and received great reviews from various organizations and the media over the past year that they have operated in Town.

As Town Manager, I have been very happy with the way Prime Wellness runs their dispensary. I do not think you will find a better company to be involved in this business that has helped people in the State of Connecticut.

If you need any additional information or wish to discuss this matter further, please do not hesitate to contact my office.

Sincerely,

A handwritten signature in cursive script that reads "Matthew B. Galligan".

Matthew B. Galligan  
Town Manager  
Town of South Windsor

**SOUTH WINDSOR POLICE DEPARTMENT**

Timothy M. Edwards  
Acting Chief of Police



151 Sand Hill Road  
South Windsor, CT 06074  
860-644-2551 Fax 860-644-0515

June 26, 2015

Mr. Thomas J. Nicholas  
Prime Wellness of Connecticut, LLC  
75 John Fitch Boulevard  
South Windsor, CT 06074

Dear Mr. Nicholas:

Prime Wellness of Connecticut has been open for business in South Windsor since August of 2014. During that time, it appears as though Prime Wellness has established itself in the business community and continues to grow and serve the needs of its clients.

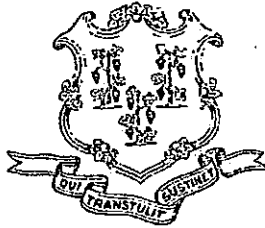
The South Windsor Police Department has worked with the Prime Wellness management team during the preconstruction phase throughout its grand opening. The open communication and working relationship continues to this day. The Prime Wellness business model does not appear to have adversely impacted our service calls or the overall operations of the South Windsor Police Department.

The South Windsor Police Department enjoys the ongoing partnerships that it has with the members of the local business community. Feel free to contact me if you have any concerns or suggestions as to how this partnership can be strengthened. I wish you, and your business, continued success in the future.

Very truly yours,

A handwritten signature in black ink, appearing to read "TME".

Timothy M. Edwards  
Acting Chief of Police



STATE OF CONNECTICUT  
DEPARTMENT OF CONSUMER PROTECTION  
165 CAPITOL AVENUE, HARTFORD, CONNECTICUT 06106

WILLIAM M. RUBENSTEIN  
COMMISSIONER

DANNEL P. MALLOY  
GOVERNOR

September 9, 2014

Thomas Nicholas  
Prime Wellness of Connecticut, LLC  
75 John Fitch Boulevard  
South Windsor, CT 06074

Re: Prime Wellness of Connecticut, LLC – Letter of Good Standing

Dear Mr. Nicholas:

I am writing to confirm that Prime Wellness of Connecticut, LLC's ("Prime Wellness") license to operate dispensary facility in the State's medical marijuana program is in good standing.

After a competitive evaluation process among 28 applicants for a license to operate dispensary facilities, the Department of Consumer Protection ("DCP") announced, on April 3, 2014, that six such dispensary facility licenses would be awarded. Prime Wellness achieved one of the highest scores in the application evaluation process and was selected as one of the six entities entitled to hold a dispensary facility license. The scoring was based upon an evaluation of the company's financial structure and wherewithal, technical abilities, security systems and business plans. After completing the conditions precedent to the issuance of the license, Prime Wellness's dispensary facility license was issued on April 10, 2014.

In addition to the issuance of the dispensary facility license, all financial backers (except those with both (1) less than a 5% financial interest and (2) no role whatsoever in operation or management of the entity), as well as all employees of the company, are required to be licensed by DCP. A background check on all such licensees related to Prime Wellness has been conducted prior to the issuance of any such licenses. We found no information that concerned us about whether the individuals so licensed were suitable persons to hold licenses in the medical marijuana program.

Since the issuance of Prime Wellness's dispensary facility license, Prime Wellness has met all of its target dates for construction and commencement of operations of its dispensary facility in accordance with our regulations. Prime Wellness has been fully certified by our inspectors to be in compliance with our regulations and has, therefore, been authorized to dispense medical marijuana products to qualified registered patients in the State's medical marijuana program.

Sincerely,

William M. Rubenstein

Telephone (860) 713-6050 • Web Site: [www.ct.gov/dcp/](http://www.ct.gov/dcp/)  
An Affirmative Action • Equal Opportunity Employer

April 19, 2015

Brian Tomasulo

4 Autumn Ridge Road

Newtown, CT 06470

DCP:

RE: Trial utilizing RSO (CPS-Concentrated Oil Blend 1401) to kill Brian Cancer.

On October 3, 2013 I was diagnosed with Testicle Cancer that spread to my lungs and lymphatic system. I did 6 months of chemo 5 days a week for 6 hours a day. This treatment almost killed me. This treatment put me in remission. On May 20, 2014 I had a 10 hours seizure, client found me and rushed me to the hospital. I was diagnosed with an egg size tumor in my brain. I had immediate brain surgery on the May 23, 2014. They removed the egg size tumor, following with a partial brain radiation. I was in Danbury Hospital for one month. I learned how to walk and talk, just like being a baby, and thought the road to remission was there. I had radiation for two weeks and was released from the hospital June 20, 2014. Three months later I was retested, and they found 4 tumors in my brain.

I Brian Tomasulo have started at the Compassionate Care Center of CT September 27, 2014, just in time to help me fight this battle. Unaware the cancer in the brain was forming again, I was made aware at CCC of the benefit of Cannabis and brain tumors. I started on flower and tried different products as they became available. In October or November of 2014 I was informed that I have 4 new brain tumors.

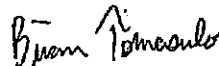
Now the fight began again, I was waiting for the concentrate oil known as Rick Simpson Oil to combat these tumors. On February 19, 2015 I started with CT Pharmaceutical Solutions Concentrated Oil Blend. I know that this trial was offered to me due to the nature of my disease and have been informed to build my tolerance up to 700-900 mL a day. It took me till several weeks to build up to 700 ML per day. On March 4, 2014 I started using 700mL per day.

I went for my brain scan on April 15, 2014, and my results will be in on April 20, 2015.

I am available to the DCP to discuss in needed.

Sincerely,

Brian Tomasulo



Daniel R. Gaita, MA  
27 Kingswood Drive  
Bethel CT 06801  
203-994-2987

9/15/15

To Whom It May Concern:

I write this letter to articulate the benefits of the Compassionate Care Centers' (CCC) compassionate giving program whereby patients without financial ability are provided assistance in covering the cost of CT's Medical Marijuana.

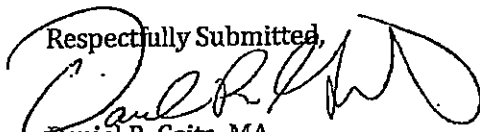
I write this letter of support and testimony as both a combat veteran's advocate, founder of IRS 501(C)(3), CT Public Charity, Operation Vet Fit, Inc. and as a CT Medical Marijuana (MM) patient and benefactor of the program myself.

Since the CT MMP was implemented, CCC has subsidized a substantial portion of my MM cost. The result of this subsidy assistance has led to my nearly complete exodus from taking highly addictive opioid-based pain medications. Additionally, I have nearly gotten off a myriad of prescribed medications to treat my chronic pain, and PTSD. Last September I was taking twelve (12) prescription pills every day. Today, I am happy to report that I am down to less than three (3) and am enjoying greater reduction of symptoms with none of the previous side effects I suffered while on prescription medications.

The importance of the compassionate giving program cannot be over-stated. Since MM is still a federally illegal class 1 drug, no federal insurance program (Medicare/Medicaid) nor any Veterans Affairs (VA) medical centers or VA physicians are authorized to legally prescribe or cover the cost of the medicine. As a result, MM patients are forced to endure cost between \$500-\$1000 and up every month in order to most effectively medicate through their debilitating conditions. In short, this cost is both unsustainable to patients and is arguably inhumane to those with debilitating conditions living on disability or fixed incomes.

Many of our combat veterans suffer from a myriad of symptoms associated with Post Traumatic Stress. I am one of them. While I can obtain the litany of prescriptions opioids, SSRI's, SSNRI's, Tricyclic Anti-Depressants etc etc for FREE from the VA, nearly 20 years on their medications nearly cost me my life, my family, and my future. Today, thanks to the generosity of the CCC and its caring program, I am on a path of repair and regrowth rather than despair and suicide.

Respectfully Submitted,



Daniel R. Gaita, MA  
Veteran, USMC

Section G

April 20, 2015

Tina Ciambriello

714 Madison Avenue

Bridgeport, CT 06606

DCP

Re: Trial utilizing RSO (CPS-Concentrated Oil Blend 1401 to treat stage 4 Metastatic Breast Cancer)

In July 2010 I was diagnosed with Breast Cancer. My breast cancer had mediatized to my lung, liver and lymphatic system. I had a mastectomy March 2011, following a lot of chemotherapy cocktails and 5 weeks of radiation, more chemo, which put me into remission. I resumed my life, and prayed for the best.

Unfortunately cancer came back in to my lymphatic system approximately Christmas 2012 or there about. I am allergic to most types of chemo therefore I need to be on small doses which are complimented with doses of sterolds. More chemo put me back into remission, with it returning in the form of lumps in my neck. Now it being August 2013. More chemo, new drug, Pergetta, this drug after about 8-10 months put me back into remission till July 2014. My cancer came back to my lymphatic systems with additional spots in my neck and lymph nodes.

I have been doing my own research on Cannabls, and felt I would be a perfect candidate. My first visit to the Compassionate Care Center of CT was on October 9, 2014 at that point my cancer was active again. I came into the dispensary, and walked out with no medicine, as my financial situation would not allow me to afford the meds. The owner Angela D'Amico followed me into the parking lot after noticing I left without a purchase, and assured me, by paying for my meds, that they would help. And along with CT Pharmaceutical Solutions has financed my regime of Cannabls.

I decided to give cannabls a shot, with no more chemo. I started with just straight flower, as that is all that was available, once CBD came out, i started with a 1-1 CBD-THC wax, along with Fioraleve flower and additional 1-1 wax. With nothing but cannabls treating my cancer from October 9<sup>th</sup> 2014, to January 2, 2015 PET scan the spots were gone, to quote my doctors Dr Justin Persico, "Right now there is no evidence of cancer". Those words were music to my ears, cannabls and nothing else no chemo, removed those spots in that area.



September 4<sup>th</sup>, 2015

To Whom It May Concern,

I waited anxiously for the opening of the Compassion Center in Bethel. The first day it opened, I talked to the voice on the other end of the phone with hope and anxiety. The voice was Angela D'Amico the dispensary co-owner (at that time. She is now sole owner). After our first conversation I was furious with her and hung up on her, believing that she had no idea how to help patients. I was so afraid that the medical marijuana program was my last hope and she would be a barrier to my cure! I was never more wrong about anything!!!!

Thank you for giving me the opportunity to have my voice be heard. Often when fighting the cancer battle I have to be more of a listener, and the sound of my voice is stifled by fear and being told what to do when and how. I appreciate all the help I have received and I am still afraid; but I have some control now and that has given my voice and my body strength.

I was diagnosed with Thyroid cancer 6 years ago at 35 years old. Initially people and even doctors fool heartily told me 'THROID CANCER IS THE BEST CANCER TO GET' really??? You have your thyroid out and you are done! Not in my case.

Unfortunately my cancer is chemo resistant and radiation resistant. I have had over thirty surgeries, 30+ radiation therapy treatments, radioactive iodine twice and to date no one has told me I am cured.....because I am not.

I have suffered every complication-including having an open hole in my neck for two years from a post-op infection, second and third degree burns from radiation therapy and spending several months in the ICU at Yale for other complications.

I was relentless in researching options for cures. I was losing hope which is not good for any cancer patient!! I started following every detail of what was happening in the medical marijuana world. I read every article I could find, went to every web site, and reached out on Facebook to hundreds of patients fighting the fight. I watched laws changing state by state and I was one of the first patients in Connecticut to get a Medical Marijuana card.

Through my journey Angela Damico has been unwavering in her love, support, compassion and willingness to help me however she can 24/7. Through her generosity she has helped me fight my cancer, and make real progress in my recovery. I am stronger, healthier, and so encouraged. I have lost over 200 lbs., ( 160 pound weight gain when my thyroid shut down) cured my lymphedema, decreased my medications by over 20 pills a day and have real hope for my future. I may actually have a future!!

The oil which I get a weekly supply of for free along with edibles and emotional support has added quality to my life. Angela gets it!! She understands my struggle. I feel like she is the cheerleader for her patients. I can't wait to see her and talk to her. She has been able to help me to see a bigger picture.

It's amazing because she is not a doctor or a nurse, she can't prescribe or talk to me about dosing, she can't tell me what to do for my protocol but what she CAN do is help me to understand that I have a chance at life and that is huge.

I wish she could be granted other opportunities to open more dispensaries so that more patients can feel what I feel.

I spend so much time worrying about patients that don't have the opportunity I have been given. It really is so unfortunate. I would do whatever I could to help convey how important the work is that Angela is doing.

When you make your decision about her being able to open or not open another dispensary I beg of you to please...think of the patients. Angela restores hope, and gives unconditional love!! That is a winning combination for a patient.

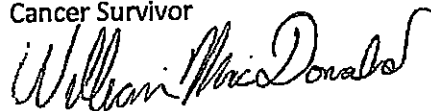
The medical marijuana products really help in the management of many of the side effects of main stream therapy. The more the side effects can be managed, the better it is for us as patients. We can thrive and not just survive.

Please give thoughtful consideration to all aspects of these benefits. Put patients and accessibility of the medical marijuana products in the forefront of decision making. We need patient advocates manning these centers and Angela D'Amico is number one in my book!

Thank you,

Bill MacDonald

Cancer Survivor

A handwritten signature in cursive script that reads "William MacDonald". The signature is written in black ink and is positioned below the typed name and title.



# *Certificate of Appreciation*

## 2014 - 2015

*Presented to:*

Compassionate Care Center of CT / D&B Wellness, LLC

*With sincere appreciation for your efforts to warm your community  
by collecting coats for those in need.*

*Jennifer Stockard*

Jennifer Stockard - President & CEO

*Sherrri Wood*

Sherrri Wood - Chair & National Founder

**ONE WARM COAT®**

SECTION 5

