

Affidavit Allard #3

No. T-2030-13

FEDERAL COURT

SERVICE OF A TRUE COPY  
HEREOF ADMITTED

BETWEEN:

JAN 09 2015

NEIL ALLARD  
TANYA BEEMISH  
DAVID HEBERT  
SHAWN DAVEY

WILLIAM F. PENTNEY *WFP*  
Solicitor for  
A.G.C.

PLAINTIFFS

FEDERAL COURT  
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JAN 09 2015

Date \_\_\_\_\_  
Registrar \_\_\_\_\_  
Greffier \_\_\_\_\_

AND:

HER MAJESTY THE QUEEN IN RIGHT OF CANADA

DEFENDANTS

AFFIDAVIT OF NEIL ALLARD

I, NEIL ALLARD, Disability pensioner, c/o Conroy & Company, 2459 Pauline Street, Abbotsford, British Columbia, MAKE OATH AND SAY AS FOLLOWS, THAT:

1. I am one of the Plaintiffs herein and as such I have personal knowledge of the matters and facts hereinafter deposed to save and except where same are stated to be made on information and belief in which case I verily believe them to be true.
2. That my evidence in chief as a Plaintiff in this case consists of my affidavit, sworn January 10<sup>th</sup>, 2014 at the City of Nanaimo, BC before Albert E. King QC, and containing Exhibits "a" through "s" that was filed in these proceedings on January 31<sup>st</sup>, 2014 in support of the application for an interim/interlocutory injunction pending trial, and my Affidavit, sworn August 13<sup>th</sup>, 2014 at Duncan, BC before Kirk Tousaw, responding to the Defendants examination for discovery questions, to which my first affidavit of January 10<sup>th</sup>, 2014, referred to above is attached as Exhibit "A" together with all of its Exhibits

("a" through "s") and then to which are further attached as exhibits to that Affidavit "B" through "M".

3. I hereby confirm my evidence in both of those Affidavits as my evidence in chief in these proceedings with one small amendment to paragraph 30 (e) of my affidavit of August 13, 2014 to add the words "Household items, bedding and" to that estimate of \$71.43 per month, so that that estimate is not limited to "clothing".

4. Consequently, now produced and marked as Exhibit "A" to this affidavit is a true copy of my affidavit of August 13<sup>th</sup>, 2014 with all of its exhibits, including my affidavit of January 10, 2014 with all of its exhibits, as my evidence.

5. I have also been juicing raw cannabis legally having read several articles about it and the benefits I experience from juicing raw cannabis are similar to those I receive from cannabis oils, baked goods, vaporizing, and smoking. Raw juicing helps to reduce my levels of nausea, cramping and gastro-intestinal problems, headaches, muscle and joint pain, and fatigue. It also improves my sleep and my energy and cognitive abilities during the day. I consider it to be an essential dietary food source and a prevention of illnesses such as cancer, due to its anti-oxidant and anti-inflammatory properties.

6. The article that I rely upon in particular is at the following link

<http://blog.liftcannabis.ca/2014/10/24/former-lp-applicants-seek-expand-access-raw-cannabis/>

7. The article is by Dr. Kenneth Taylor and essentially explains how cannabis in its raw form is loaded with beneficial compounds and he says as follows:

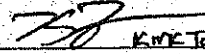
"Drying cannabis flowers converts an amount of both THC-A and CBD-A, present in raw cannabis, to activated THC and CBD in the dried form... Since CBD-A is more potent at treating nausea than CBD, and since THC-A also reduces acute nausea better than THC, I do not consider the MMPR system efficient at helping Canadians who need cannabis to treat their illnesses".

"There are countless reasons why patients should care about this, why people in general should care about this. The MMPR does not permit selling marijuana in

its fresh form, nor do they permit the processing of cannabis into concentrates, like hashish or kief. Both are vital to patients.”

8. That I swear this affidavit as my evidence in chief for the plaintiffs in these proceedings.

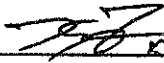
SWORN BEFORE ME at the City )  
of Duncan, in the Province of )  
British Columbia, this 8th day of )  
January, 2015. )

  
K.M.E. Teusen, Barrister )  
A Commissioner for Taking Affidavits in )  
and for the Province of British Columbia )

  
NEIL ALLARD

# EXHIBIT "A"

This is Exhibit "A" referred to in the Affidavit  
of Neil Allard sworn before me at  
Puncen, BC this 07<sup>th</sup> day of  
January, 2015.

  
KYLE TAYLOR, Commissioner

A commissioner for taking affidavits  
For British Columbia

FEDERAL COURT

BETWEEN:

NEIL ALLARD  
TANYA BEEMISH  
DAVID HEBERT  
SHAWN DAVEY

SERVICE OF A TRUE COPY  
HEREOF ADMITTED

THIS.....15.....DAY OF

August 20 14

WILLIAM F. PENTON

Solicitor for  
A.G.C.

PLAINTIFFS

AND:

HER MAJESTY THE QUEEN IN RIGHT OF CANADA

DEFENDANTS

AFFIDAVIT OF NEIL ALLARD

I, NEIL ALLARD, Disability pensioner, c/o Conroy & Company, 2459 Pauline Street, Abbotsford, British Columbia, MAKE OATH AND SAY AS FOLLOWS, IN ANSWER TO THE QUESTIONS ASKED, THAT:

I. Background

1. Please provide answers to the following questions regarding your background information:
  - (a) **What is your level of education?**  
Please see paragraph 2 of my Affidavit of January 10<sup>th</sup>, 2014 attached as Exhibit "A" to this Affidavit.
  - (b) **What is your occupation? If you are currently retired or a disability pensioner, please provide your previous occupation.**  
Please see paragraph 3 to Exhibit "A" attached hereto.

**II. Health and the use of marijuana for medical purposes**

**2. Please generally describe your medical history.**

Please see paragraphs 4 and 5 to Exhibit "A" attached hereto.

**3. When did you first use marijuana for medical purposes? Please fully describe the circumstances of how you decided to use marijuana for medical purposes, including by whom it was recommended/suggested and whether you were authorized by Health Canada to use marijuana for medical purposes at that time**

Please see paragraphs 6-13 and Exhibits "D", "E", "F", "I", "L" and "N" to Exhibit "A" attached hereto.

**4. Please set out the period(s) (month, year) during which you have been authorized by Health Canada to use marijuana for medical purposes and, for each of the period(s), provide the following information:**

**(a) all of the condition(s) and/or symptom(s) the marijuana was intended to address;**

Most if not all of this information has been previously been provided to Health Canada in my applications under the *MMAR* that commenced in 2003. My conditions and symptoms and the doctors I consulted regarding these conditions and symptoms and their names are set out in paragraphs 5, 6, 8, 9, 11, 13, 23, 24, 25, 26, 32, 33, and 34 to Exhibit "A" attached hereto.

**(b) the number of doctor(s) you consulted regarding these condition(s) and/or symptom(s);**

My conditions and symptoms and the doctors I consulted regarding these conditions and symptoms and their names are set out in paragraphs 5, 6, 8, 9, 11, 13, 23, 24, 25, 26, 32, 33, and 34 to Exhibit "A" attached hereto

**(c) the name(s) of the doctor(s) who authorized your use of marijuana for medical purposes;**

My conditions and symptoms and the doctors I consulted regarding these conditions and symptoms and their names are set out in paragraphs 5, 6, 8, 9, 11, 13, 23, 24, 25, 26, 32, 33, 34 to Exhibit "A" attached hereto

- (d) **the name(s) of any doctor(s) who refused to authorize your use of marijuana for medical purposes;**

I have never been refused authorization to use marijuana for medical purposes by any doctor.

- (e) **how long you had been a patient of each authorizing doctor at the time he/she authorized your use of marijuana for medical purposes;**

**Please refer to all my prior documentation on file with health Canada under the MMAR for these details, if necessary.**

- (f) **how much money you paid to each authorizing doctor for his or her authorization of your use of marijuana for medical purposes; and**

I have never paid a doctor to sign a Health Canada *Medical Marijuana Access Regulation* form.

- (g) **the amount of marijuana you were authorized to use and how that amount was determined.**

The amount of marijuana I was authorized to use is set out on each Authorization to Possess MMAR document and the amount was determined based upon trial and error and the effects upon me and my needs in consultation with my physicians and my methods of ingestion and my last authorized dosage was 20 grams per day as set out in paragraphs 18, 33 and 34 and Exhibits "R" and "S" to Exhibit "A" attached hereto.

On the advice of counsel I objected to providing any further information with respect to my medical history than has already been provided on grounds of irrelevancy to the issues in these proceedings.

5. **Please provide details of the condition(s) and/or symptom(s) set out in your answer to question 4(a) above, including when you were first diagnosed**

and by whom, who recommended marijuana for medical purposes as treatment for these condition(s) and/or symptom(s), and the impact of these condition(s) and/or symptom(s) on your quality of life.

Once again this information is contained in my Applications to Health Canada and the annual renewals commencing in 2003 and the nature of my illness is set out in paragraphs 4 and 5 of Exhibit "A" attached hereto, my first diagnosis in October 1998 as set out in paragraph 6 of Exhibit "A" attached hereto and the impact of these conditions and symptoms on my quality of life are set out in Exhibit "A" attached hereto at paragraphs 2, 3, 4, 5, 6, 8, 9, 11, 20, 23-28, 31-34.

6. **Please fully describe how the effect(s) of the condition(s) and/or symptom(s) set out in your answer to question 4(a) above impact your ability to cultivate marijuana and how you deal with this.**

In answer to this question please see paragraphs 4, 6, 10, 13, 14, 15, 17, 19, 30 and 31 to Exhibit "A" attached hereto and in particular Exhibit "P". The internal medicine specialist who diagnosed me and examined me a number of times has established that growing cannabis indoors during these difficult cloudy, damp B.C. winters, is highly therapeutic. See Exhibit "L" I also find that I am able to meditate in my garden to calm my body and mind, so that is has become a very important spiritual practice which I have incorporated into my daily routine. See Exhibits "I" and "L" to Exhibit "A" attached hereto.

On the advice of counsel I object to providing any further information with respect to my medical condition that is not already within the possession of Health Canada as a result of my various applications since 2007 and otherwise I refer to paragraph 6 of attached Exhibit "A".

7. **Please describe all the treatments you have undertaken to address the condition(s) and/or symptom(s) set out in your answer to question 4(a) above other than marijuana for medical purposes, including: drugs, surgeries, physiotherapy, massage, exercise, acupuncture, etc. Please**



**describe the effectiveness of and any side effects you experienced from these treatment(s).**

The answer to this question is set out in particular in Exhibits "L" and "N" to Exhibit "A" attached hereto, which are referred to at paragraphs 23 and 25, namely the letter of March 11<sup>th</sup>, 2008 from Dr. Carruthers who refers to other therapies and the Report of Dr. Muendel of June 11<sup>th</sup>, 2012 and as I indicate in paragraph 6 of Exhibit "A" I learned I had a profound sensitivity to pharmaceutical medications in terms of their side effects and these side effects and problems from other things are referred to in paragraph 28 of Exhibit "A" and my concerns about contaminants from any other chemicals are set out in paragraph 30 to Exhibit "A", including my desire to avoid cannabis from the street.

8. **Have you ever used cannabinoid-based medications, such as Nabilone or Sativex to address the condition(s) and/or symptom(s) set out in your answer to question 4(a) above? If no, why?**

Yes I have tried Cesamet and indicated that in my first Application to Health Canada in May 2004 which also contained a list of other ineffective and disturbing medications I had tried. I am attaching a copy of that first application comprising 4 pages as Exhibit "B" to this affidavit. Copies of all subsequent applications are in the possession of health Canada as filed under the *MMAR*.

9. **Please describe the effectiveness of and any side effects you have experienced from using marijuana for medical purposes.**

Please see Exhibit "A" hereto at paragraphs 6, including Exhibit "D", w referred to in paragraph 8, Exhibit "F" referred to in paragraph 9, Exhibit "L" referred to at paragraph 23, Exhibit "M" referred to in paragraph 24, Exhibit "N" referred to in paragraph 25, and paragraph 28 and this information is also contained in all of the applications I made to Health Canada under the *MMAR* commencing in May 2004 that are in the governments possession .

The appropriate strains of cannabis have proven to work well for me with little or no side effects. I have found that the manner in which the plants are grown, dried, and cured has a remarkable effect on the final outcome and suitability of the cannabis herbs. For instance, harvesting the plant at various stages and allowing the buds to dry for some time on a line, helps me control the potency and desirability of the cannabis. I would not have this type of control of my cannabis herbs production with purchased commercially grown cannabis through the mail, nor would the herbs be nearly as fresh and these things are very important to me. Additionally I have problems with sinuses, headaches, sore throats, and a variety of other problems with cannabis grown with petroleum based, commercially available fertilizers, so I must avoid them and continue using organic strains that are suited for me. See Exhibit "O", to Exhibit "A " and in particular, pages 31 to 50 thereof, which describe the "Natural Contaminants and Adulterants" and the pesticides commonly used the cultivation of cannabis. See also the doctor reports: Exhibits "D", "E", "F", "I", "N" and "L", "M", and "N" and all the applications to Health Canada beginning in May, 2004. Also see Exhibit "C" for more detailed information about my diagnosed condition.

10. **During the period(s) for which you were authorized by Health Canada to use marijuana for medical purposes:**
- (a) **How often did you meet with the authorizing doctor(s) to check-in, follow-up and/or consult on your ongoing use of marijuana for medical purposes?**
  - (b) **At these visits, what topics were discussed?**
  - (c) **How long did these visits last, on average?**
  - (d) **Did the doctor(s) recommend any alternative treatments to using marijuana for medical purposes? If so, why?**
  - (e) **Did the doctor(s) ever advise you of any concerns with respect to the use of marijuana for medical purposes? If so, please describe those concerns.**

- (f) Did the doctor(s) ever recommend that you cease the use of marijuana for medical purposes or reduce the dose of marijuana for medical purposes? If so, provide details of the discussion(s) and explain why.
- (g) On what date did you last consult with a doctor regarding your use of marijuana for medical purposes?
- (h) Did you discuss with the doctor(s) the use of a particular strain of marijuana for medical purposes? If so, provide details of the discussion(s) and any recommendation(s) made by the doctor(s).

On the advice of counsel, I generally object to providing any further information or evidence with respect to my medical history on the grounds of irrelevancy to these proceedings. As can be determined from Exhibit "A" attached hereto, initially from 1995 until 1999 I visited many doctors and the visits lasted from 5 minutes to over an hour but since 1999 I have visited them less often and further details are contained in Exhibit "M" referred to at paragraph 24 of Exhibit "A" attached hereto, as well as all of the other medical reports attached to Exhibit "A", including Exhibits "D", "E", "F", "I", "L", "M", "P" and "Q". I did attempt to discuss strains with my doctors but they did not appear to be knowledgeable nor interested.

11. **When you began using marijuana for medical purposes, how, on what basis, and by whom was it determined what the appropriate dose should be?**

Please see paragraphs 6 and 13 to Exhibit "A" attached hereto and over time I determined what strains appeared to have a positive effect and what strains appeared to have a negative effect and how much I required depending upon my methods of ingestion and consequently my dosage was determined over time by trial and error in consultation with my physicians.

12. **During the period(s) for which you were authorized by Health Canada to use marijuana for medical purposes, did you see any doctor(s) other than**

**the doctor(s) who authorized your use of marijuana for medical purposes?**

**If so:**

- (a) Did any of those other doctors know about your use of marijuana for medical purposes?**
- (b) Did any of those other doctors have any concerns about your use of marijuana for medical purposes? If so, please describe those concerns.**
- (c) Please provide the name(s) of that/those concerned doctor(s) and fully describe the concerns.**

Again, on the advice of counsel, I object to providing any additional information with respect to my medical history that has not already been provided on grounds of irrelevancy to the issues in these proceedings.

While I do not recall all of the doctors that I have consulted over the past 10-20 years, the Applications to Health Canada under the *MMAR* disclose the doctors who did authorize my use for medical purposes and the chronology and history and names of the various doctors that I do recall and have dealt with in connection in this matter are set out in Exhibit "A" attached hereto and I refer in particular to Exhibits "D", "E", "F", "I", "L", "M" and "N" and paragraph 26 thereof as well as Exhibits "Q", "R" and "S".

13. **During the period(s) for which you were authorized by Health Canada to use marijuana for medical purposes:**
- (a) Has your dosage of marijuana for medical purposes changed?**
  - (b) If so, why, how, on what basis, and by whom was it determined that your dose of marijuana for medical purposes should increase or decrease?**
  - (c) If a change in dosage was not authorized by the same doctor who authorized the previous dosage, please explain why the change was authorized by a different doctor.**

Again on the advice of counsel. I object to answering these questions with respect to my medical history on grounds of irrelevancy to the issues in these proceedings. The answer to these questions are, to the extent that I am prepared to answer, contained in Exhibit "A" attached hereto. In particular I refer to paragraphs 4, 6-9 and 11-13 as well as 18, 19, 20, 23 and Exhibit "L", paragraph 24 and Exhibit "M", paragraph 25 and Exhibit "N" and paragraph 26, 32 and Exhibit "Q" and paragraph 33 and Exhibit "R" and paragraph 34 and Exhibit "S".

14. **Will you provide us with authorization to obtain your medical and drug history? If so, please complete the enclosed "Authorization to Release Medical Records" form. If no, why not?**

No, on the advice of counsel, as being irrelevant to these proceedings.

15. **Will you provide us with authorization to speak to all of the doctor(s) referenced in your answers to these questions? If no, why not?**

No, on the advice of counsel, as being irrelevant to these proceedings.

### **III. Particulars of marijuana use**

16. **When did you first use marijuana? Was it for medical or non-medical purposes? If you have ever used marijuana for non-medical purposes, please describe the approximate date(s), frequency, quantity and methods (i.e. smoked, eaten, juiced, etc.) by which you did so.**

I object to answering this question on the advice of counsel on the basis of its irrelevancy to these proceedings and the issues in these proceedings.

17. **Please list the strains of marijuana for medical purposes you presently use and the strains you have used in the past. Do you know the THC/CBD content of the strain(s) you have used or currently use? If so, what is it and how do you know?**

I am presently growing the following strains: Aurora, Papaya, Hash Passion, Hash Bomb, Big Bang, Early Queen, Lemon Skunk, Strawberry Cough Mountain Jam and White Widow. I do not recall all of the strains that I have used in the past as there were so many of them. I did not have any of them tested for THC/CBD content and used the cannabis strains based on their specific effects on me and my condition.

Please Note: I have found that I need to use a number of specific varieties of organic cannabis in order for the cannabis to be the most effective and prevent overstimulation for my nervous system. This has been a long drawn out process of trial and error.

Important: I have observed and experienced that the manner in which the plants are grown makes a great deal of difference to the effects of the final cannabis herbs when consumed, which is an added reason for my need to grow my own. That way I have control over the process and the final result.

Currently I am growing: Aurora, Papaya, Hash Passion, Hash bomb, Big Bang, Early Queen, Lemon Skunk, Big Bang, Strawberry Cough, Mountain Jam and White Widow and Shark (high CBD, low THC).

The information for these strains is available online at <http://www.marijuana-seeds-canada.com/>

I have bred a male Hash Passion plant with Hash Bomb, Mountain Jam, and Big Bang females and I currently have these seeds in the drying stage.

I have grown too many stains to remember and list, but here are some of those varieties: Hash berry, Manado 1, Timewarp, The Church, A.M.S., Shaman, Guerrilla's Gusto, Top Skunk, Satori, Northern Lights, California Hashplant, Swiss Cheese, White Rhino, UBC Chemo, Afghan Kush, Blue Mystic, Mental

Floss, Bubble Gum, as well as many unknown varieties, and a few other varieties bred by me.

The information for these strains is available at the same website place as indicated above.

A number of these stains were not suitable for me.

I have not had any tested. I use the cannabis strains on the basis of their effects on me.

18. **Have you tested the various strains of marijuana that you use to determine their cannabinoid content (THC/CBD)? If so, please explain when and where this testing was done, if the testing was done by a recognized methodology, if the testing was done by an accredited laboratory, and produce any documentary evidence of this testing.**

No.

19. **How did you obtain the strains of marijuana that you have cultivated?**

I obtained the strains of marihuana that I cultivated by acquiring seeds from various sources and clones also from various sources.

20. **Please explain, for each strain of marijuana for medical purposes that you presently use and have used in the past:**

- (a) **Why you chose to use that particular strain; and**

I chose particular strains based on their effects upon me and whether or not they alleviate or mitigate my condition.

- (b) **Whether you discussed the use of the particular strain with a medical practitioner.**

I have discussed the strains with the various doctors and have told them that I am continually trying new strains but they are not generally interested.

21. **How did you and/or your doctor(s) assess the effectiveness of the different strains of marijuana that you have used/cultivated?**

I assessed the effectiveness of the strain by the effect upon me and my condition.

22. **Please describe the efforts you have made, including when you made them, to determine if any licensed producers offer your preferred strain(s) (or an equivalent strain(s) in regard to the THC/CBC content of your preferred strain(s)). Please produce any documentation evidencing these efforts.**

I have received information and gone online and looked at information with respect to Licenced Producers and their costs and determined that I simply could not afford their prices so did not go on to examine what strains they might be offering.

I have gone on the webpages for the different Licenced Producers at different times to see what they are offering by way of strains and the costs thereof and because I cannot afford their prices and have no assurance that their products are organic, I have not gone any further.

I require organic cannabis buds and leaves for vaporizing, and making organic cannabis oils, as well as fresh leaves for juicing.

The licensed commercial producers do not supply any leaves, fresh or dried.

The prices for buds are prohibitive as are the costs for 20 grams, which I exceed on days like today when I am under stress.

I understand that a producer called Whistler Medical provides organic cannabis but charges \$ 10 per gram and is not accepting new patients.



If I could afford it, and if the cannabis was available, it would cost me \$200.00 per day or \$6,000.00 per month just for organic cannabis buds. This would not include dried or fresh leaf, oil, or juice.

I have been provided with a copy of the Affidavit of Mike King sworn July 24, 2014 that I understand is being filed in relation to the cross appeal from the injunction in these proceedings and I have also gone on the webpages for various Licenced Producers and that information seems to confirm my need to continue to be able to grow my own organic cannabis not only because I cannot afford their cost but also because of the non-organic cannabis from most if not the great majority of the Licenced Producers and also I cannot get juice or oil or even fresh leaves from the Licenced Producers that I require. I also refer to paragraphs 18-26 of Exhibit "A" attached hereto and the Exhibits referred to therein as further addressing this question and issues.

**23. When you began using marijuana for medical purposes, how and on what basis did you determine what method(s) of administration (i.e. smoked, vapourized, juiced, etc.) to use?**

**(a) In particular, did you discuss the method of administration with a doctor and, if so, provide details of the discussion(s) and any recommendation(s) made by the doctor(s).**

When I first began using marihuana for medical purposes I smoked using either rolled cigarette joints or a pipe and over time I learned about different methods of ingestion and now use a variety of them. No doctors provided me with any advice or assistance in relation to methods of administration or ingestion

**(b) Did you discuss this with anyone other than a doctor? If so, with whom?**

I researched information about Cannabis use in all forms online, though friends, other patients and the radio. I learned a great deal about all methods of cannabis ingestion from my membership in the BC

Compassion Club Society to whom I was referred by my doctor as set out in Exhibit "D".

24. **Has your method of administration changed over time? If so, how and why? Was this change discussed with your doctor?**

Over time I learned about using a vapourizer and juicing and making oils and will use these various methods of ingestion depending upon whether I need rapid onset effect in which case I may smoke/vaporize or whether I am seeking a longer term effect in which case I may use an edible or an oil. I did tell my doctors that I was doing this.

25. **Please describe the methods of administration of marijuana that you currently use in a typical day including the frequency and quantities (in grams) in which you use them.**

I primarily use a vapourizer and my usage varies between 10-20 grams per day. I also use a pipe to smoke from time to time. The frequency of use depends upon how I am feeling and that also determines what quantities I use. When I have enough leaves available I also make oils and juice. Please see paragraph 28 and Exhibit "Q" of Exhibit "A" attached hereto.

26. **Please describe any extraction and/or transformation processes that you undertake in respect of your marijuana (for example, to convert dried marijuana into other forms or to produce different kinds of marijuana products such as tea, juice, cookies, etc.) the part(s) of the plant that you use in these processes, and how/where you learned to undertake these processes.**

I extract the cannabis oils into vegetable oil through infusion on the stovetop using organic cannabis leaf and buds and grape seed oil. I let the oil mixture steep overnight, then I screen it and refrigerate it.

I have baked using the leaves and buds as well. See paragraph "28" of Exhibit "A" attached hereto.

The juicing is done with fresh leaves and bud trim. They are mixed together with other greens and water, blended into a smoothie, and put through a screen to remove the pulp. I manage to juice whenever I am able to have enough leaves and trim to do so.

The same applies to the oils which I use both internally and externally. I use what I have available, but I use dried cannabis to make the oil rather than fresh cannabis.

#### **IV. Financial (Income, Expenses, Assets, and Liabilities)**

- 27. What is your yearly household income from all sources for the past five years (i.e., from January 2009 to the present)? Please outline the income by source (including employment, business, investments, rentals, gifts, government assistance [i.e., disability payments, social assistance], etc.) and provide all supporting documentation, including copies of all income tax filings and notices of assessment/reassessment.**

The details of my income from all sources are set out in paragraph 3 of Exhibit "A" attached hereto, including Exhibit "B". I attach as Exhibit "B" to this Affidavit a copy of my T1 General 2013 income tax return with T4As and T5 attached, including a T4(P) having redacted certain personal information to prevent identity theft if this document should become public. I am prepared to sign a consent to release my prior income tax returns if considered relevant and necessary subject only to redactions to prevent identity theft.

My income after taxes is \$33,049.61 or \$3,000.00 per month after taxes and deductions. There has been very little change to my income over the years since my retirement except for taking out all of my RRSPs in order to afford the cost of moving and my new home in 2012. When I turn 65 years of age the Sunlife Wage Loss Benefits will stop and the Canadian Pension Plan Disability will be reduced to a regular Canadian Pension Plan and my income will be substantially lower as a result as indicated in paragraph 3 of Exhibit "A" attached hereto. On April 29, 2013 Service Canada advised me that my CPIC income would fall to \$798.00 per month, my superannuation would be \$702.00 per month and my old

age pension would be \$546.00 per month. My total gross income would be \$24,556.96 per year or \$2,046.64 per month which will be a substantial reduction in my income from present, making the need for my savings for the next 5 years critical.

28. **Please list and value all of your current assets (e.g., real estate, automobiles, investments, etc.) and liabilities (e.g., mortgages, loans, etc.) and the assets and liabilities of your spouse/partner (if applicable).**

Have no debts or other assets except as stated below:

Assets: I own my own home and property and the assessed value is set out below. My 1994 Dodge Caravan is roughly estimated to be worth \$3,000 due to low mileage. As of July 14, 2014, I had \$8,204.13 in my savings account and \$14,737.62 in my chequing account. Aside from my personal belongings, I have no other assets.

29. **Please provide particulars of your principal residence (e.g., single family detached house, duplex, apartment, mobile home, etc.), including its size and number of occupants.**

My principal residence is a single family detached house with two bedrooms. I attach as Exhibits "C" and "D" to this affidavit, firstly a copy of my City of Nanaimo 2014 Property Tax Notice which estimates the property at \$241,300 as the net asset value for taxation purposes, and a copy of an Insurance Center Home Valuation Guide from December 14, 2013, providing an estimated replacement cost of \$279,000.

Some further details with respect to my current location are contained in paragraphs 15, 17 and 19 of Exhibit "A" attached hereto.

30. **Please provide an itemized statement of your average monthly expenses, including:**

(a) **housing (e.g., rent, mortgage payments, maintenance, home insurance, property taxes, etc.);**

Property tax: \$1,528.88 for year 2014 or \$127. 41 per month

House insurance: \$350.00 for the year or \$29.16 per month

Household maintenance: \$257.42 per month on average

- (b) **utilities (e.g., electricity, natural gas, cable, internet, phone, cellular, water, etc.);**

Electricity for entire household including the electrical costs for my garden: \$2, 315.51 for a one year period (May 2013 to May 2014) which works out to \$192. 96 per month

Water, sewer and garbage: For one year (from June11, 2013 to June17, 2014) was 420.03 or \$35.00 per month, which includes the water for my indoor cannabis garden.

Water filtration for drinking and shower: \$727.00 per year or \$60.62 per month

Firewood: \$875.00 per year or \$72.91 per month

Internet, phone, cable TV: \$103.48 average per month

- (c) **food and beverages (e.g., groceries, restaurant meals);**

Groceries, Health Foods,, Supplements: \$555.31 average per month

- (d) **alcohol, tobacco and recreational drugs (both legal and illegal);**

Alcohol/ drugs: None... I cannot tolerate alcohol and do not use illicit drugs

- (e) **clothing;**

Clothing: \$71.43 average per month

- (f) **transportation (e.g., car loan/lease payments, gasoline, car insurance, car maintenance, public transit fares, etc.);**

Transportation: Gas, Insurance, repairs, and occasional ferry costs to Vancouver:\$437.00 per month on average( for past year)

- (g) **discretionary spending (e.g., entertainment, hobbies, books, vacation travel, sports, recreation, etc.);**

Recreation: books, musical instruments, concerts: \$75.35 per month

Electronics for past year(including a TV and a scanner/printer) : \$508.70  
or 42.39 per month

Court costs and fees for my divorce for same year: approximately \$500.00  
or \$50.00 per month

- (h) **marijuana (to purchase);**

Marijuana to purchase; Nil

Vaporizers and accessories: \$379.00 for the period indicated, which  
comes to \$31.58 per month

Cannabis seeds: \$381.94 for the yearly period or \$31.82 per month

- (i) **marijuana (to grow); and**

Marijuana to grow: Garden store costs are \$100.45 per month on average,  
and the electric bill for growing cannabis works out to \$166.71 per month  
for a total average cost of \$267.16 per month.

Refer to my hydro electrical bill for June, 2012, which comes to \$26.25 for  
my entire home power need.

My total monthly electrical costs for cannabis growing add up to  $(\$192.96 - 26.25) = \$166.71$

This compares to \$ 6,000 per month for the costs by licensed commercial  
producers for my cannabis herbs, not including organic fresh leaves or oil .

- (j) **other medications.**

Medications/ Dental/ Naturopath: \$31.54 per month on average

My Total average estimated monthly expenses equals \$1,882.23 and I have  
attached in addition to the above 2 exhibits copies of my City of Nanaimo  
expenses for water and garbage for the period from October 7, 2013 through  
July 1, 2014, as well as my BC Hydro bills from June 2012 through May 2014  
that are now marked as Exhibits "E " and "F" to this affidavit.

31. Have you ever applied for and/or received any source of funding – insurance or otherwise – to cover the costs of producing or purchasing your marijuana? If so, please provide full particulars and relevant documentation.

No funding.

V. Financial (Marijuana)

32. What equipment did you (or your designated producer) buy (or receive for free) in order to grow your marijuana plants? Please list and value all such equipment (e.g. lamps, de-humidifiers, CO2 tanks, timers, hydroponic equipment, filters, water drums, tubes, boxes, tubs, pots, etc.) and provide all supporting invoices, receipts and other documentation.

The equipment that I bought and use to grow my marihuana plants are listed below and I have estimated their replacement value without taxes based on past receipts and current prices at Progressive Growth stores (some of which are attached for the period 2012 through 2014 as Exhibit "G") and have included a link to their webpage so that their online prices are available:

<http://www.progressive-growth.com/index.php>

I purchase most of my equipment from those stores. All equipment and supplies were purchased by me.

**Vegetative room:**

Two 400 watt metal halide lamps	\$100.00
Two metal halide 400 watt ballasts	\$360.00
Two batwing style lamp shades held by chains on hooks into the ceiling	\$110.00
Two oscillating fans for air circulation	\$100.00
Temperature/ humidity digital readout	\$25.00
Temperature control relay	\$100.00
Canister exhaust fan and venting for exhaust through in a brick chimney	\$300.00
Canister odour control filter	\$200.00
Power bar and extension cords	\$ 65.00

240 volt timer ( on a designated circuit of 15 amps)	\$90.00
Air conditioner ( no longer in use)	\$50.00
Two wooden TV tables	\$50.00
Seedling and small clone shelved table	\$100.00
<b>Flowering room:</b>	
Three light shades	\$90.00
Two 600 watt ballasts	\$300.00
Two 600 watt bulbs	\$118.00
Chain and hooks to suspend light shades	\$75.00
Two canister and venting fans for intake and exhaust	\$400.00
Temperature control relay for fans	\$100.00
Power bar and extension cords	\$ 65.00
240 volt timer on a designated circuit of 15 amps	\$90.00
Chimney venting	\$150.00
Duct work for fresh air venting to vegetative room (through flower room)	\$ 250.00
Temperature/ humidity readout	\$25.00
Air conditioner ( no longer used)	\$185.00
Two TV tables	\$ 50.00
<b>Clone and storage rooms:</b>	
Two T5 (30 watt) Fluorescent light on hooks with wire Hangers	\$25.00
Two heat mats	\$148.00
Temperature controls for heat mats	\$140.00
Numerous trays and bubbles	\$40.00
Thermometer and humidity indicator	\$25.00
Storage units, table, glass jars and containers, shelving units, retractable clothesline to hang plants	\$300.00
Numerous sizes of pots, containers and growing bags	\$400.00
<b>Other/ plant nutrients:</b>	
Two dollies	\$100.00
Various organic fertilizers and tonics	\$500.00
Solo one hand sprayer	\$ 40.00
Electronic magnifiers	\$100.00
Soil, bat guano, worm castings, green sand, bone meal, etc.	\$200.00
Potting tables of different heights and sizes	\$100.00
Garden tools	\$100.00
Older ballasts which are still functional but are less efficient ( not used)	\$200.00
Extra bulbs (high pressure and fluorescent )	\$400.00
Mops, pails, mild cleaning supplies, essential oils	\$ 200.00
Motion detectors and window alarms	\$200.00



I have attached most recent and pertinent receipts that establish the value of the equipment, all of which was purchased by me as Exhibit "H" to this my Affidavit.

33. **What structural work did you (or your designated producer) do or cause to have done in order to build the infrastructure in which to grow your marijuana plants (e.g., renovations, retrofitting, construction of particular indoor or outdoor structures, etc.)? Please list all work and provide all supporting invoices, receipts, permits and other documentation.**

The structural work done to build my current production site is described in paragraphs 15, including Exhibit "K" and paragraph 16 of Exhibit "A" attached hereto. I attach as Exhibit "I" to this Affidavit an invoice from Jonker Custom Building Sustainable Design Construction and Consulting dated October 28<sup>th</sup>, 2012 that was a quote for the work to be done on my basement. I had two working laundry tubs with sewer pumps, faucets and hoses installed at a cost of \$572.00 and have sought to obtain the receipts from the general contractor but I am advised that he has lost them. The plumbing labour to have the tubs installed was in the amount of \$1,060.00. The materials and labour to build two insulated growing rooms, an insulated cloning and storage room and panel and to generally insulate my basement cost \$11,837.06. Further insulation and venting added to my attic cost a further \$896.00.

34. **Please itemize any tax credits and/or deductions you (or your designated producer) have claimed and/or received for any of the work you did or caused to be done relating to establishing and operating your marijuana home grow operation. Please provide all supporting documentation and explain how you calculated any tax credits and/or deductions.**

I have not claimed any tax credits and/or deductions for any of the work done establishing my production site.

35. How much have you (or your designated producer) spent purchasing marijuana plants and seeds for your marijuana grow operation? Please provide all supporting documentation.

I have purchased clones for \$5 at the BC Compassion Club Society in 2004 and have purchased seeds through mail order via <http://www.marijuana-seeds-canada.com/> and now produced and marked as Exhibit "J" to this my Affidavit is an order confirmation for an order #2-61647 placed July 14, 2013 and #2-66086 placed January 28, 2014.

36. If you (or your designated producer) have not spent any amounts to purchase marijuana plants and/or seeds, how and from where were they acquired?

I also obtained clones from fellow patients in the past free of charge.

37. How much have you (or your designated producer) spent on growing supplies to grow your marijuana plants? Please list all items (e.g. soil, fertilizer, pesticides, nutrients, etc.) along with an explanation of the annual cost of each, with supporting documentation.

The amount I spent on growing supplies to grow my marijuana is set out in detail in answer to question 32 so my estimated annual costs are \$1,205.36 or \$100.45 per month.

38. If you (or your designated producer) have not spent any amounts on growing supplies, how and from where were they acquired?

Not applicable.

39. Do you (or your designated producer) have any other marijuana growing/cultivation-related expenses that have not been covered by the questions posed or the answers that you have given? Please provide full particulars and all supporting documentation.

I do not recall any other expenses that have not been covered by the answers given above.

40. Did you (or your designated producer) disclose the fact that you were growing your own marijuana to your home insurer?

(a) If so, were you able to obtain home and/or property insurance to cover your marijuana growing operation?

I did not disclose the fact that I was growing marijuana in my home to my insurer. I grow other vegetables, flowers and herbs indoors in my properly maintained indoor garden.

(b) If so, please explain your policy/ies, how much it/they cost(s), the risks it/they cover(s) (e.g., theft, fire, water damage, third party liability, etc.) and how it/they cover(s) activities related to your marijuana grow operation (e.g., limits, conditions, deductibles, etc.). Please provide copies of the policy/ies and all other relevant documentation.

N/A

(c) If you were growing marijuana in premises that were rented, was your landlord aware of this? Please provide any supporting documentation.

N/A

41. How much do you (or your designated producer) pay for power/electricity every month to grow your marijuana? Please provide all supporting documentation (e.g., hydro bills for the periods before and after you set up your marijuana grow operation) and explain how you calculated the total spent.

I estimate that I pay \$166.71 per month for all electrical costs related to the growing of my cannabis marijuana. My hydro electric bills cover the electrical power for my entire house including all major appliances and an electric hot water tank but no clothes dryer. The total of all electrical bills from April 2013 to April 2014 is in the amount of \$2,315.51. This on my calculations comes to

approximately \$192.96 per month and covers a typical period. Now produced and marked as Exhibit "K" to this my Affidavit is a copy of my BC Hydro bill for June 2012 in the amount of \$26.25 which is for a time prior to growing any cannabis at the current production site. I calculate the electrical cost for the growing of the cannabis by the difference between the two bills and therefore calculated my average monthly cost by subtracting the amount of \$26.25 from the amount of \$192.96 to arrive at the figure of \$166.71 for all related electrical costs. I am able to completely eliminate this cost when I am able to grow outdoors.

42. **How much do you (or your designated producer) pay for water every month to grow your marijuana? Please provide all supporting documentation (e.g., water bills for the periods before and after you set up your marijuana grow operation) and explain how you calculated the total spent.**

Between June 2013 and June 2014 the total cost of water used by me came to \$208.03 or \$17.33 per month. Much of this water is for outdoor bushes, plants and young trees that I am growing. A very small amount of water is used to grow my cannabis and I estimate it to be about 15-30 litres per day on average when both rooms are operational. Water bills for February 14, 2012 – June 11<sup>th</sup>, 2012 reflect the cost of water before growing cannabis at this site. Now produced and marked as Exhibit "L" to this my Affidavit are copies of my water bills from the City of Nanaimo and the user rates.

43. **Do you (or your designated producer) have, or have you ever had, a security system in place to protect your marijuana? If so, describe it, including:**
- (a) **all security-related structures (e.g., fences, blinds, barbed wiring, etc.);**
  - (b) **all security-related equipment (e.g., motion detectors, safes/storage facilities, alarms on all entrances and entry points including doors and windows, locks on all entrances and entry points including**

doors and windows, traps, guard dogs/animals [including number of dogs/animals and breed/type of each], cameras including numbers and where they are, vents that mask/capture the smell of the marijuana so that neighbours are not aware of the existence of a grow operation, etc);

- (c) what each security structure and piece of equipment does;
- (d) what the security equipment monitors, (e.g., the area that the camera or motion detector captures);
- (e) records kept by the equipment, (e.g., if recordings are kept of camera footage and if so for how long); and
- (f) how much you have spent (and how much you continue to spend) on it, including any system monitoring fees.

Please provide all supporting documentation, including alarm certificate(s) and drawing(s) showing all of the above-described security features, and explain how you calculated the total amount spent on your security system.

The information with respect to the security systems in place at my prior and current production site is contained on each Application under the *MMAR* submitted to Health Canada and I describe them at paragraphs 17 of Exhibit "A" attached hereto.

44. Do you (or your designated producer) keep, or have you ever kept, firearms or other weapons (e.g., batons, tasers, pepper spray, etc.) in your home? If so, have you ever had occasion to use any of these weapons to protect yourself at home? If so, provide details.

I do not keep nor have I ever kept firearms or other weapons in my home.

45. Describe how you (or your designated producer) have ensured that neighbours and the general public do not discover that you grow marijuana in your home. In particular, how do you prevent the smell of marijuana from escaping your growing operation and what equipment or structures you

have built to conceal the marijuana you grow? How you dispose of any marijuana by-products so as not to reveal the presence of a marijuana growing operation in your home?

I have ensured that my neighbours are informed of my well maintained and safe garden so that any potential intruders would likely be spotted by them and reported by them and I refer to paragraphs 16 and 17 of Exhibit "A" attached hereto to describe the situation. I have had no threats whatsoever but I am concerned that I may become more visible as a result of this lawsuit. I use activated carbon filters to control the smell but the smell from the nearby Nanaimo Pulp Mill overpowers any possible outdoor cannabis smell as do the wood stoves, including my own, that are used in this neighbourhood. There does not appear to ever have been a problem with odour and certainly none has been brought to my attention. I dispose of the organic material from the plants in my compost heap as I do with other herbs and vegetables and any extra fertilizer is used for my outdoor bushes, trees and plants.

46. **Have you moved since you started to grow your own marijuana?**
- (a) **If so, why, when, and from where?**
  - (b) **Did you disclose the fact that you were growing marijuana before you sold/vacated your home (e.g., disclose this fact to your property manager or landlord, realtor/real estate agent, Multiple Listing Service (MLS,) the purchasers, mortgage broker, anyone else involved in the purchase or potential purchase of the home, etc.)? Please provide all supporting documentation detailing this disclosure.**
  - (c) **If you did disclose that your home was used to grow marijuana, did you have to sell your home at a discount? If so, what was that discount? Please provide all supporting documentation and explain how the discount was calculated.**
  - (d) **Did you have your home inspected by a qualified professional (e.g., industrial hygienist, electrician, plumber, contractor, home inspector,**

etc.) before selling your home to ensure that there was no contamination from your marijuana growing operation? Please provide all supporting documentation, including the costs of any inspection(s) and any inspection report(s).

- (e) Did you have to renovate or remediate the home in which you grew marijuana in any way before selling/vacating it? If so, what work was done and how much did it cost? Please provide all documentation.

The details of my initial site and subsequent sites are contained in my application and renewals under the *MMAR* to Health Canada and any amendments thereto and as indicated in Exhibit "A" attached hereto at paragraphs 10, 13, 14, 15 indicate various changes in site until my present location. I did disclose that I had been growing cannabis at my residence in the sale of my first home in Nanaimo. My ex-spouse, who was also an authorized cannabis patient, retained that home where my second production site was built and located. None of my home grown gardens posed any problem in any of the residences in relation to growing indoors and outdoors and no repairs or "remediation" was necessary in any of my gardens other than to close off any intake or exhaust venting.

## **VI. Cultivation**

47. Who cultivates the marijuana that you grow (e.g., you, a designated producer, family member, etc.), and who has done so in the past? Please provide full particulars.

I cultivate the marihuana for myself and have always done so.

48. If you have changed producers or grow sites in the past, please fully explain why.

The answer to this question has been provided above to question 46. I have always been the producer but I have changed the sites as indicated in the Health Canada *MMAR* application documents and renewals and amendments and as

for the reasons set out in paragraphs 10, 13, 14 and 15 of Exhibit "A" attached hereto.

49. **How many hours per month does each cultivator spend to cultivate the marijuana?**

I am unable to estimate the exact hours per month that I spent cultivating for myself because it varies significantly depending upon my health and so I do this as I am able as indicated as Exhibit "P" to Exhibit "A" attached hereto, arising out of paragraph 31.

50. **Please provide details regarding the remuneration (money or otherwise) each cultivator receives for his or her cultivation work.**

I do not use and therefore do not pay any other persons to cultivate for me.

51. **In order to value their labour, please provide, for each cultivator:**

- (a) **Profession and/or job title(s); and**
- (b) **The salary/remuneration that they receive from their jobs per hour of work (i.e., hourly salary; or, if remuneration is received over some other period [weekly, monthly, annually, etc.], salary divided by number of hours worked).**

Because I do not have any other cultivators I do not pay them any remuneration.

52. **Describe the totality of your marijuana growing activities both currently and in the past, including:**

- (a) **the number of plants grown;**
- (b) **where the plants have been grown and a general description of the location (i.e. in your current home, any previous homes, a warehouse, an apartment/townhouse, etc.), including the lot size;**
- (c) **the equipment used (kind/type and quantity);**
- (d) **the fertilizer used (kind/type and quantity);**
- (e) **the pesticides used (kind/type and quantity);**



- (f) how the plants are irrigated (e.g., describe the watering cycles used, etc.);
- (g) how the plants are provided with sufficient light (e.g., describe the lighting cycles used, etc.);
- (h) how the marijuana is dried;
- (i) how the plants are accounted for (i.e., how do you keep track of the number of plants grown);
- (j) how cross-contamination is prevented;
- (k) measures taken to ensure that no contaminants are spread outside of the growing area;
- (l) what is done with extra plants and plant parts that are not consumed;
- (m) how any excess water runoff is drained from the production site and, if outdoors, where the drainage leads; and
- (n) how the production site is maintained/cleaned, by whom, how often, and with what chemicals.

I am currently authorized to produce 98 plants indoors at my production site and the details of my previous number of plants permitted are contained in my initial application and subsequent renewals under the *MMAR* to Health Canada and I have always produced in accordance with the restrictions set out in the licence or permit. Currently the plants are grown in my basement to my current home. I use a soilless mix, organic fertilizers and safer soap or neem oil for pest control. The plants are watered by hand as needed like any other plants or vegetable plants. I use from 1-3 600 watt lights in the flower room and 2 400 watt lights in the vegetation room, depending upon my needs and the nature of the weather outdoors. I used air conditioners in the past but have found that I am able to produce without them. The flower room is frequently shut down to give me a break once I have enough cannabis for a period of time and I keep clones or seeds to maintain my strains. I generally allow the plants to hang until dry and then take the buds and place them straight into glass jars as needed. Further details are set out in Exhibit "A" attached hereto and in particular paragraphs 13,

14, 15, 16 and 17 and to some extent paragraphs 18 and 19. As indicated in paragraph 6 of Exhibit "A", I was found to have a profound sensitivity to pharmaceutical medications and cannot tolerate any form of harsh chemicals and consequently as set out in paragraph 30 of Exhibit "A" I have done considerable research to ensure that I scrupulously avoid any chemicals in the production of my medicine. I am responsible for cleaning the production site rooms as needed as I do for the rest of my home and have not had a problem with cross contamination, contaminates spreading outside my room, having any excess plants, having any excess water rain run off.

53. **Please provide any photographs or records (including logs, journals, spreadsheets, computer files, etc.) you have of your marijuana grow operation, including any photos of damage caused by it (e.g., water damage, mould, insects, fire damage, structural damages, etc.).**

I am attaching photographs of two garden rooms, some clones, a seedling and my cannabis herbs as they dry on a retractable clothes line. Now produced and marked as Exhibit "M" to this my Affidavit are those photos. I have never had any damage caused from water, mould, insects, fire or structural reasons and therefore have no photographs to offer in that regard.

54. **As far as you know, has there ever been any mould in your home while marijuana was being grown there? If so, provide details including the extent to which such mould was related to the growing of marijuana in your home.**

There has never been any mould in my home or gardens inside or out while marihuana was being grown there as I have taken care to grow responsibly to ensure that I have a clean and well maintained house and garden and that there is no mould or anything else that may negatively impact my health. In the beginning I tried to determine if Health Canada provided any guidelines for size of garden, number of lights or any technical advice to assist patients with safe and clean growing practices but was unable to obtain any assistance from them.

55. **How many marijuana plants have you grown each year since you started cultivating? In particular, please provide details of the accounting system you employ to keep track of the number of plants grown, lost to disease, or otherwise disposed of.**

I cannot recall how many plants I have grown each year since I started as I did not keep records of that kind of detail, including how many of my plants died. I do not have an accounting system to keep track of the number of plants grown or lost or otherwise disposed of. My initial licence application and subsequent renewals and amendments indicate the total number of plants that I'm permitted to grow and I have stayed within those limits at all times.

56. **Explain how much dried marijuana (in grams) you have produced each year since you started cultivating.**

I do not know how much dried marijuana in grams that I have produced each year since I started cultivating as I did not keep track or keep records and simply grow as I need it and again I refer to Exhibit "P" to Exhibit "A" attached hereto and to my various initial and subsequent applications and renewals and amendments to Health Canada under the *MMAR* program. I never exceeded the amounts permitted.

57. **Have you ever stored, possessed, or cultivated more marijuana than authorized by Health Canada? If so, how much more and when?**

No.

58. **Have you ever grown marijuana, or had someone grow marijuana for you, at a production site other than that approved by Health Canada?**

Not since I was approved by Health Canada but prior to such approval I did produce in my first home in Nanaimo while awaiting completion of my Health Canada application permit by Health Canada.

59. As far as you know, have your marijuana plants, including the soil, ever been affected by, or infested with, any kind of disease, insect, toxic mould or substance, or any other kind of sickness or infection? If so, please provide details including:

- (a) the nature of the issue;
- (b) when it occurred;
- (c) how many plants were lost;
- (d) how you disposed of the 'lost' plants; and
- (e) what steps (if any) you took to prevent a recurrence.

As far as I know my plants and soil have not been affected or infested with any kind of disease, toxic mould or substance or any other kind of sickness or infection that I am aware of. I have seen some insect pests from time to time which were easily controlled with water, essential oils, safer soap and neem oil or a simple vacuum cleaner. I have not studied plant diseases in particular but if my plant does not appear healthy or edible I will not use it just as I would not with any other food or herb from my indoor or outdoor gardens.

60. Have you ever given away, sold, or otherwise traded any of the marijuana that you (or someone on your behalf) had cultivated? If so, please fully explain and describe the compensation you received, if any.

I did share in the past with other cannabis patients who were licenced to grow with me at the same production site but I have never sold nor received payment for any such sharing.

61. Have you ever been approached by anyone to grow marijuana illegally? If so, please fully explain.

No.

62. Has anyone ever stolen or attempted to steal your marijuana? If so, please fully explain.

No.

63. How do you dispose the parts of your marijuana plants that you do not use (for example, leaves or stalks)?

Because I use the whole plant, including the stems for making tea, there are very few cannabis parts remaining except for used soil and some stems and I dispose of these in my compost bin.

64. How do you dispose of the materials you use to cultivate your marijuana (e.g., fertilizer, used water, used containers, used soil, used pesticide boxes/container, etc.)?

Used soil and roots are disposed of in my compost bin. Fertilizers are mixed and used as needed and any extra goes to my outdoor bushes, shrubs and/or garden.

65. Have you ever had your marijuana tested for parasites or insect infestation, mould, toxins or other contaminants? If so, please provide full particulars (e.g., who performed the tests, when, for what purposes, cost of testing, what the results were, etc.) and all supporting documentation.

No.

66. Have you ever had your marijuana growing operation inspected by a qualified electrician? If so, please provide full particulars (e.g., who performed the inspection, when, for what purposes, cost of inspection, what the results were, etc.) and all supporting documentation.

Yes. The wiring for all of my basement needs, including the growing rooms was done by a qualified electrician and I refer you to Exhibit "K" attached to Exhibit "A" attached hereto for the electrical inspection request that was subsequently carried out.

67. Have you ever had your marijuana growing operation inspected by a fire safety inspector? If so, please provide full particulars (e.g., who performed

the inspection, when, for what purposes, cost of inspection, what the results were, etc.) and all supporting documentation.

No.

68. Has there ever been a fire at the location of your marijuana production site? If so, please fully describe the circumstances, including when it occurred, the cause of the fire, any damage caused by the fire, and provide any supporting documentation.

No and I do use a wood burning stove for heat.

69. Has any other individual ever inspected your residence? If so, please fully provide full particulars (e.g., who performed the inspection, when, for what purposes, cost of inspection, what the results were, etc.) and all supporting documentation.

No.

70. Have any children lived or been in your home since you began possessing marijuana for medical purposes? If so, please provide the following information along with the corresponding dates (month(s), year(s)):

- (a) the number of children present and their ages;
- (b) with respect to children not living in your home, the frequency and duration of their visits; and
- (c) the measures, if any, that you took to ensure that the children did not have access to any of your marijuana or marijuana extracts/products, and the costs associated with these measures if any.

No children have visited my current production site and in my previous two residences children were not allowed in the growing rooms. There are no children living in my home.

71. How did you learn to cultivate marijuana? In particular, have you ever taken any courses in subject matters that have assisted you in cultivating

marijuana (e.g., agriculture, horticulture, botany, gardening, electrical training, etc.)? If so, please provide details (course name, institution attended, dates, cost, etc.) and any supporting documentation.

I learned to cultivate by speaking to other people, reading books and through trial and error and I also took a course on how to obtain my Possession and Production Licences through Health Canada and in this regard I refer to Exhibits "G" and "H" referred to in paragraph 10 attached to Exhibit "A" attached hereto.

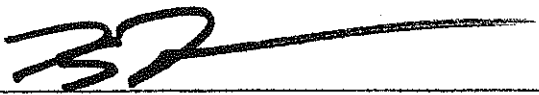
72. Have you ever had complaints from neighbours or anyone else about your marijuana growing operation? If so, please provide full particulars (e.g., who complained, what they said, how you addressed the complaints, etc.) and any supporting documentation.

No.

73. Have you or anyone else ever been injured (e.g., cuts, abrasions, burns, muscle/tissue damage, fractures, etc.), as a result of marijuana growing activities, whether conducted yourself or on your behalf? If so, please provide details.

No.

SWORN BEFORE ME at the City  
of ~~Nanaimo~~ <sup>Victoria</sup>, in the Province of  
British Columbia, this 13 day of  
August, 2014

  
A Commissioner for Taking Affidavits in )  
and for the Province of British Columbia )

**King Toussaw**  
**Solicitor**



NEIL ALLARD

COUR FÉDÉRALE  
FEDERAL COURT  
Copie du document  
Copy of Document  
Déposé / Filed  
Reçu / Received

JAN 31 2014

FEDERAL COURT

No. T-2030-13

Date \_\_\_\_\_  
Graft \_\_\_\_\_  
Registrar \_\_\_\_\_

**BETWEEN:**

This is ~~sworn~~ <sup>A</sup> ~~statement~~ <sup>reference to an</sup>  
the affidavit of Neil Allard NEIL ALLARD  
sworn before me at Duncan, BC TANYA BEEMISH  
this 13 day of Aug 2014 DAVID HEBERT  
SHAWN DAVEY

A Commissioner for taking Affidavits  
for British Columbia

AND:

HER MAJESTY THE QUEEN IN RIGHT OF CANADA

SERVICE OF A TRUE COPY  
HEREOF ADMITTED

THIS 31st DAY OF

January 20 14

William F. Penney

Solicitor for  
A.C.C.

PLAINTIFFS

FEDERAL COURT  
COUR FÉDÉRALE  
JAN 31 2014  
FILED  
GILGUS  
JULIA: ORCHARD  
VANCOUVER, B.C.  
DEFENDANTS

AFFIDAVIT OF NEIL ALLARD

I, NEIL ALLARD, Disability pensioner, c/o Conroy & Company, 2459 Pauline Street, Abbotsford, British Columbia, MAKE OATH AND SAY AS FOLLOWS, THAT:

1. I am one of the Plaintiffs herein and as such I have personal knowledge of the matters and facts hereinafter deposed to save and except where same are stated to be made on information and belief in which case I verily believe them to be true.
2. I am 59 years of age, born in 1954 in Winnipeg, Manitoba and reside in Nanaimo, British Columbia. I am 5'11 and only weigh 134 lbs and have been unable to work since 1995. I am recently divorced and have no children or dependents. I have a Bachelor of Social Work degree from the University of Manitoba (1982) and while employed in my career as a social worker I continued to study in evenings at colleges and universities, including the University of Winnipeg and the University of British Columbia, where I had been hoping to complete a Masters degree in social work. Those plans were cut short



when I became ill and could no longer work in 1995. Now produced and marked as Exhibit "A" to this my Affidavit is a copy of my CV comprising 4 pages.

3. I was employed as a counselor with Veteran's Affairs Canada in Vancouver, BC advising veterans on various programs, including disability issues and worked in that capacity for approximately 10.5 years from 1988 when in 1995 I found myself unable to continue working do to my poor health and becoming severely ill. While I made efforts to regain my health unfortunately by 1999 I received a permanent medical retirement on medical grounds through Health Canada. I have been retired and on pension since that time. I currently receive a combination of pensions, including the Canada Pension, a Federal government super annuation pension and a Sun Life Wage Loss Replacement, another Federal government policy. These pensions currently provide me with approximately \$2,700.00 per month after taxes and deductions until age 65, in five years time, at which time my Sun Life wage loss replacement income will come to an end and I will be applying for Old Age Pension. At that time my income will drop to approximately \$24,000.00 per year or \$2,000.00 per month. Now produced and marked as Exhibit "B" to this my affidavit is a copy of the certificate I received thanking me for my 10 years of loyal service to Veterans Affairs Canada, signed on June 19, 1998.

4. In 1995 I was diagnosed by my health care practitioner to have 'Myalgic Encephalomyelitis', a serious neuro-immune disorder affecting every system in my body, as well as clinical depression, which I believe is a life long inherited ailment and while it lifts from time to time it can become disabling particularly in chronically stressful conditions such as having to deal with constant issues over my Authorization to Possess (ATP) Marihuana for medical purposes and my related Personal Production Licence (PPL) with Health Canada.

5. Now produced and marked as Exhibit "C" to this my affidavit is a copy of a one page summary of facts of the nature of my illness.

6. Through trial and error I learned that I had a profound sensitivity to pharmaceutical medications and then on the advice of my health care practitioners, including a specialist, I began using Cannabis (Marihuana) to get some relief from many of the

symptoms I was experiencing. The results were very positive and I was referred to the B.C. Compassion Club Society in Vancouver through a written note of support from my general practitioner in October 1998 at a time when I lived in Vancouver. Now produced and marked as Exhibit "D" to this my affidavit is a copy of the note from Dr. Shintani of October 21<sup>st</sup>, 1998.

7. By 2001 I found it was costing me about \$500 a month to acquire cannabis (marihuana) as medicine from the Compassion Club and I was not getting the strains and the quality I needed so I realized I would have to grow it myself if I were to continue to benefit from it as it was getting too expensive for me to purchase it and to access it was also difficult as I had very little energy to move around and my nervous system is easily disrupted in crowds or situations involving people and noises.

8. Now produced and marked as Exhibit "E" to this my Affidavit is a copy of Letter from Dr. Leon Berzen, neuropsychiatrist, dated May 1, 2001 supporting my continued cannabis use.

9. Now produced and marked as Exhibit "F" to this my Affidavit is a copy of Letter from Dr. Shintani dated November 5, 2001 confirming I have been a patient of his since January 1996 and endorsing my use of cannabis and indicating the support from the specialist Dr. Berzen.

10. I moved from the Lower Mainland to Nanaimo, BC in September of 2002. I purchased a house there and decided I should try and obtain the appropriate licence through the Health Canada program to provide for my own needs by growing the cannabis for myself. I proceeded to do as much research as I could about growing cannabis (marihuana) so that I could keep my cost down. I took a course through the Continuing Education program at Malaspina College in Duncan, BC entitled "Medical Marihuana Course HEMM001" which started October 15 and completed October 22<sup>nd</sup>, 2003. The course was conducted by Eric Nash and Wendy Little. This course helped me to navigate the extremely difficult process of applying to participate in the Health Canada program to obtain my Authorization to Possess and my Personal Production

Licence. Now produced and marked as Exhibit "G" to this my Affidavit is a copy of the course offering and Exhibit "H" my registration statement.

11. Now produced and marked as Exhibit "I" to this my Affidavit is a copy of Letter of January 15, 2003 from Dr. Bruce Carruthers indicating his continued support for my use of cannabis.

12. Now produced and marked as Exhibit "J" to this my Affidavit is a copy of my BC Compassion Club Society member renewal from October 29<sup>th</sup>, 2004 confirming my continued membership with the BC Compassion Club Society in that period of time.

13. I received my first Health Canada authorization to produce cannabis for myself, a Personal Production License (PPL) in 2004 at or in my residence in Nanaimo, BC. At that time I made inquiries to Health Canada about safety issues, inspections and help with seeds and basic growing information, but I received no assistance from them and was advised to simply search the internet for my seeds. I purchased books and seeds and spent hours researching various strains and methods of growing and the equipment needed. I put a lot of time and energy into research and planning and developing knowledge of organic cannabis growing and having a production site built. I invested substantial amounts of money to set up the production site.

14. In 2007 I moved into a house in Lantzville, B.C. and paid for the construction of an indoor production facility and partially paid for the construction of a greenhouse. At that time my wife, was also a medically approved cannabis user, so she and I and one other were able to produce our medicine and share the costs at that location. Being able to produce outdoors in the summer and in a greenhouse during part of the year saved substantially on the overall electrical costs that are primarily incurred when growing indoors.

15. In 2012 I separated from my wife and I moved to my current location in Nanaimo, BC and had a third production site built by professional trades people and it is my current site which is in the basement of my dwelling house and I designed this site for indoor gardening. I spent thousands of dollars having my basement insulated, and two

grow rooms built with professional wiring, insulation, venting and painting. I installed new plumbing, two laundry tubs and a new sewer pump to feed and water my indoor cannabis plants. I had all of the work done by certified electricians and contractors and BC Hydro was notified to inspect completion of all of the electrical work. Now produced and marked as Exhibit "K" to this my affidavit is an electrical inspection report.

16. The warm air from my lights is filtered and used to heat my home during cooler months. The humidity in my home and in my growing rooms is quite dry (under 40%) as I use a wood burning stove for heat on the main level which tends to keep the humidity low overall in my home, so there is no risk of any mould problems. In my vegetative room I use only two four hundred watt light bulbs and for the flowering room I use a maximum of two 600 watt light bulbs. Both rooms are fully insulated, including the walls and ceilings, and the floor in my basement is entirely concrete. There are two canister fans in each growing room for fresh air intake and exhaust air, and both rooms are equipped with two oscillating fans to circulate the air. The fans are controlled by a relay switch to maintain constant temperature and humidity. I also had a large insulated room built in my basement for producing clones and seedlings under a small florescent light and storing dried cannabis, oils and tinctures which I grow and prepare for my own personal use only. I have never had a problem with fire or any concerns about electrical safety because of the professional job done by the electricians.

17. As indicated above, I have grown outdoors and in a greenhouse and found the cost of growing outdoors alongside my spinach, kale, carrots and other herbs and fruit to be almost zero since the soil, compost, water, rain and sunshine are all in place. This is what I was planning to do at my current property. With respect to the public safety risk of break and enters and attempts to steal my plants in production or medicine, I live near the end of a short dead-end street with very low car and pedestrian traffic and I can easily hear and see vehicles or persons coming and going from the area inside my home. I am home nearly all of the time and I have motion detectors at the front and back of my house and all outside doors are kept locked. All three cannabis production related rooms in my basement are equipped with doors which lock and I have both CO2 and smoke alarms in place. My backyard has tall wooden privacy fencing on both sides

between my property and my neighbours. The nearest neighbour's property is 13 feet from my house. My lot is 70.5' by 150' which is slightly under one quarter of an acre in size. There are mature fruit trees along the perimeter of my home and a large tall hedge at the rear. I have a small green house on my property and I hope to install another larger one. There are several tall wooden structures to stack firewood, which helps additionally to maintain my backyard privacy. I am allowed to keep up to six chickens on my property, which I may do at some point to lower my living costs, but in particular I hope to be able to have sufficient medicine at a reasonable cost with indoor and outdoor growing at different times of the year.

18. My current dosage of cannabis is authorized at 20 grams per day and the cost of production for all of my needs is approximately \$200-\$300 a month depending upon air conditioning needs, my health and my supply. The costs are mostly for the electrical expenses of running the lights and the air conditioning. I have grown outdoors and in a greenhouse at two of the previous production sites and the cost of growing outdoors is almost zero since the soil, compost, water and sunshine are already in place. I estimate that my total financial cost for all of the equipment and building at the three different sites to be somewhere in the area of \$35,000.00

19. I currently have a viable production site and fully equipped basement which I can continue to produce excellent quality medicine for a nominal cost with no impact on anyone else. I am allowed to produce 98 plants indoors to ensure sufficient yield and variety. Sometimes I become too ill to take care of the plants and they end up dying. I grow organically and the yield on one of my indoor plants is often less than an ounce per plant. My current arrangement allows me to grow suitable strains at the right strength that work for me. I am currently working with 13 different strains. I believe that reasonable regulation and inspection can ensure safety, security and prevent abuse of the program.

20. My method of cannabis use is to vapourize the buds and leaves and I sometimes chew the fresh leaves. I use the leaves and buds for making edible oils and topical oils as well. Many cannabis strains do not seem to work for me and actually worsen some

of my symptoms. I have identified a number of strains which I rotate in my garden which are specific to my needs. I have also been breeding plants and trying new strains. Under the new proposed Regulations I will no longer have access to these strains or to fresh leaves and I would no longer have quality control assurance over my organically homegrown cannabis herbs and fear that my safe access to medical cannabis will be essentially compromised.

21. I cannot afford black market prices including Dispensary or Compassion Club prices estimated at between \$6 - \$12 a gram when I can produce the plant for pennies for my own use. The estimated \$8-\$10 a gram purchase price through Licenced Producers at my current dosage of 20 grams per day would cost me \$200 per day or approximately \$6,000.00 a month or \$72,000.00 a year. On the other hand I can produce this herbal medicine for myself for a fraction of that cost and I have been able to produce it and use it effectively maintaining my own quality controls at a cost of approximately \$200 to \$300 per month. Even at five dollars per gram, it would still cost m \$100.00 per day or approximately \$3,000.00 per month, which is more than my total monthly income.

22. In approximately 6 years from now I will turn 65 years of age and my income will be reduced further as indicated above and I am therefore attempting to ensure my own financial independence and to eliminate all debt and not to incur further debt in having to purchase my medicine. I am unable to receive any imbursement or reimbursement or coverage for cannabis through the Public Service of Canada Extended Health Care plan as it, Cannabis (marihuana) is not considered eligible under that plan. In addition I have learned how to successfully grow cannabis (marihuana) without the use of harmful chemicals and toxicant sprays and control the quality and safety of my medicine and I find the oxygen released by the plants along with the gentle exercise of growing highly therapeutic as well.

23. I have had the continuing support from my attending health care practitioners since 1998 and now attached and marked as Exhibit "L" is a letter dated March 11<sup>th</sup>, 2008 from Dr. Bruce Carruthers, a specialist in internal medicine indicating his continuing support of my use of medical marihuana since 2003.

24. Now produced and marked as Exhibit "M" to this my Affidavit is a copy of a letter from Dr. Jim Mander, Medical Arts Center dated December 1, 2009 confirming his diagnosis.

25. Now produced and marked as Exhibit "N" to this my Affidavit is a copy of a document describing a Consultation with Dr. K.A. Muendel that occurred on June 11<sup>th</sup>, 2012 and this report further assesses and documents my condition and the effective use of cannabis (marihuana) for my medical condition.

26. I have consulted numerous specialists, including an anesthesiologist at the Pain Clinic at Nanaimo General Hospital, a psychologist at that Pain Clinic and various others about my situation. My current ability to control the quality of my medicine and ensure a continuous safe supply for myself that is effective, and not be dependent on others producing for me that includes the additional stress of worrying about them getting the strains right and the right organic quality, and getting enough product on time as needed, is the best situation for me and has not and should not have any negative impact on anyone else.

27. I live alone and do not have any pets. I spend a lot my time alone due to my sensitive nervous system. My lifestyle is one of quiet, meditation, healthy, non-western diet, nature, gardening and exercise. I found dealing with Health Canada and its regulations very difficult and exhausting and it gave me constant stress. The proposed new changes and my lack of ability to afford the medicine under the current program with the threat of imprisonment if I produce without a permit, has given me even more substantial anxiety and stress and fear about the future. Every day I wonder how I am going to be able to continue to afford to use organic cannabis (marihuana) of the right strength that works effectively for me. I continue to consult doctors and naturopaths about my medical situation.

28. I do not drink alcohol as I cannot tolerate it and I do not smoke anything including cannabis. I use one pharmaceutical pill Clonazepam (a benzodiazepine) in small amounts along with organic cannabis (marihuana) which is either juiced from the raw plant, eaten in baked goods, used topically in oils and vapourized through a vaporizer or

atomizer. I use the fresh leaves for juicing raw cannabis and dried leaves and female flowers for vapourizing, oils and edibles. I use the safer, cleaner, healthier vapourizing method instead of smoking and have done so for years. The cannabis (marihuana) serves as an antidote to the side effects of the pill I am prescribed which gives particularly negative effects in the morning.

29. Given my documented and medically approved need for 20 grams a day I am concerned about the limits on personal possession of a maximum of 150 grams at any one time as I use it in various different formats and would find it difficult to travel far from my storage site for any period of time if I am limited to 150 grams maximum in my possession at any given time. As indicated I use the plant in its raw form by chewing or juicing the fresh leaves as well as vapourizing dried flowers and leaves and I use them in edibles and topical oils. Under the new regime I understand I would no longer have access to some of these homemade products as I will be limited once again to "dried marihuana" only. I also understand that I will have to destroy any cannabis (marihuana) in whatever form that I have on March 31<sup>st</sup>, 2014 instead of being able to consume it until it is used up before having to access a Licenced Producer, if I could afford one, which I cannot, based on estimated prices and the prices currently advertised.

30. I am very stressed about the plan to take away my ability to produce my medicine for myself and to be able to control the strains and production site to ensure effective medicine for myself and with no contaminates. In conducting my research I came across an excerpt from the "American Herbal Pharmacopeia" which lists the various chemicals people use in producing marihuana and that I scrupulously avoid and I wish to continue to avoid the use of any such chemicals in the production of my medicine. Now produced and marked as Exhibit "O" to this my affidavit is a copy of excerpts from that document comprising 15 pages in total and the list of chemicals is at page 50 (page 14 of the attachment). Further, I am very concerned that if the court does not enable me to continue to produce for myself that I will be at risk of imprisonment if I continue to do so without a Health Canada licence and will be likely forced to go back to the black market to seek out a black market product that is less expensive than that coming from



licenced producers. Once again this concerns me as to what or how the street cannabis is produced and what it contains and how it might impact upon my health.

31. On September 6, 2012 I applied to Health Canada to amend my production site and increase my dosage. Now produced and marked as Exhibit "P" to this my Affidavit is a copy of that letter.

32. Now produced and marked as Exhibit "Q" to this my Affidavit is a copy of Form B completed by Dr. Mander that supports me, also signed by my specialist Dr. Karl Muendel dated September 6, 2012.

33. Now produced and marked as Exhibit "R" is a copy of my Authorization to Possess approved by Health Canada under my client ID number 23 and MMAD number 1792-13 which is valid until March 31<sup>st</sup>, 2014, having been issued July 15, 2013 and authorizing me to possess up to 600 grams on my person at any time. I have blacked out my address and mailing address for privacy and security reasons and can make them available to the court or others if required to do so.

34. Now produced and marked as Exhibit "S" to this my affidavit is a copy of my Personal Use Production Licence under the same MMAD ID and client ID number issued July 15, 2013 and expiring on March 31, 2014 and authorizing me to produce 98 plants indoors and to store 4,410 grams indoors. Once again I have deleted my address, mailing address, production site and storage site addresses for privacy and security reasons and will make them available if the court so requires.

35. I swear this Affidavit in support of an Application for an Order under s.24(1) of the *Canadian Charter of Rights and Freedoms* as the appropriate and just interim remedy, in the nature of:

- i. An Interim constitutional exemption from ss.4,5 and 7 of the *Controlled Drugs and Substances Act* for all persons medically approved under the *Narcotic Control Regulations C.R.C., c.1041 (NCR)*, the *MMAR* or the *MMPR*, including those patients who have a caregiver 'person responsible' for them designated to produce for them, including an exemption for that caregiver

'person responsible' designated producer, pending trial of the merits of the action or such further Order of the court as may be necessary;

or, alternatively

- ii. an interlocutory exemption/injunction preserving the provisions of the *MMAR* relating to personal production, possession, production location and storage, by a patient or designated caregiver 'person responsible for the patient' and related ancillary provisions, and if necessary, limiting the applicability of certain provisions of the *MMPR* to such patients or designated caregivers that are inconsistent with their s. 7 constitutional right under the *Charter* pending the decision of this Court on the merits of this action.

or alternatively, and together with

- iii. an interim/interlocutory order in the nature of *mandamus* to compel the Defendant to process all applications, renewals and modifications to any licences pursuant to the *MMAR* in accordance with all of its provisions (other than those challenged as unconstitutional herein), notwithstanding ss.230, 233-234, 237-238, 240-243 of the *MMPR* relating to applications under the *MMAR* after September 30<sup>th</sup>, 2013 as reflected in the amended *MMAR* sections 41-48.

and such further and other relief as the court deems appropriate and just in all of the circumstances.

SWORN BEFORE ME at the City  
of Nanaimo, in the Province of  
British Columbia, this 10<sup>th</sup> day of  
January, 2014



NEIL ALLARD



A Commissioner for Taking Affidavits in  
and for the Province of British Columbia

**ALBERT E. KING, Q.C.**  
*Barrister & Solicitor*  
 155 Commercial Street  
 Nanaimo, BC V9R 5G5  
 753-6617 FAX 753-6123

C. V.

Neil V. Allard

Nanaimo, B.C.

D.O.B. May 25, 1954

This is Exhibit "A" referred to in the affidavit of Neil Allard sworn before me at Nanaimo, BC this 10<sup>th</sup> day of January 2014

A Commissioner for Taking Affidavits for British Columbia ALBERT E. KING, Q.C. Barrister & Solicitor 155 Commercial Street Nanaimo, BC V9R 5G5 753-6617 FAX 753-6123

Education and Training:

- University of British Columbia: 1989- 1990

Completed a course in Counselling Psychology

I made a preliminary application to the MSW, graduate school program in 1994 and received notice that my entrance requirements were met. Full application was not made due to illness.

- University of Winnipeg: 1985- 1986 evenings

Completed a course in Civil Rights & Liberties (Political Studies); and Social Psychology

- University of Manitoba: 1977- 1981

Completed Bachelor of Social Work Degree (four year full time study)

- Vancouver Community College: 1989, evenings

Completed a course in Counselling Skills;

- British Columbia Institute of Technology: 1988 fall evenings

Completed a course in Personnel Management (Administration Dept.)

- Ministry Of Labour and Consumer Services, Burnaby, British Columbia: June & July, 1988

Completed an eight session evening series entitled "Substance Abuse Education Program"

- Alcoholism Foundation of Manitoba: April, 1981

Completed a full five day program entitled "Prevention and Treatment of Alcoholism"

- Red River College: Winnipeg, Manitoba; 1987, 1983, 1976-1977, 1974, 1972

ABC's of Real Estate (winter, 1987)

A/V Media Production Techniques course (fall), 1983

Completed One year full time studies in Domestic Electronics program; Diploma received in 1982

Completed Adult basic Education Grade X (1972); XI upgrading courses, 1974

- Manitoba Department of Education: June, 1974

Received General Education Development Grade XII Diploma

## **Social Work/ Counselling Employment:**

- Veterans Affairs Canada: 1982- 1999

**Area Counsellor Position:** responsible for social, financial, personal, and health related assessments of aging War Veterans in specific geographical areas of metro Vancouver and the Fraser Valley. This involved regular home visits to veterans for assessments, referrals, counselling and necessary follow-up on case planning. As a result of illness, I was off work, on sick leave, as of August 1995, with a subsequent medical retirement in 1999.

- Ministry of Social Services and Housing: December, 1987- July, 1988; Auxillary Position

**Social Worker:** Maple Ridge, Pitt meadows, Port Coquitlam, and Port Moody areas of Vancouver. Child Protective services and child in care supervision to families and children in and out of care. The position involved child apprehensions, placements, foster home/adoption studies and assessments, juvenile and family court appearances as needed.

- Child and Family Services of Winnipeg West: 6 month term position, January - July, 1987

**Social Worker:** Child Protective services and child in care supervision to families and children in and out of, similar to those mentioned above.

- North east Winnipeg Family and Child Extended Social Services (N.E.W. F.A.C.E.S.S.) April 1985- May, 1986

Deployed from the defunct Children's Aid Society.

**Social Worker:** Child Protective services similar to those above.

- Children's Aid Society of Winnipeg: February, 1984- April, 1985,

**Social Worker and Supervisor:** Authored, developed and implemented an "Independence Living Program", aimed at assisting children in care with a smooth transition to after care at age 18. Completed comprehensive assessments and worked creatively with teens in care, ages 14- 18 towards their independence. Became Supervisor to two social workers as the caseloads expanded with the program's popularity.

The Children's Aid Society became defunct as of April, 1985. I was deployed from there as a generic child protection social worker to N.E.W. F.A.C.E.S.

I also completed my third year social work student placement at C. A. S of Winnipeg in 1980.

**- City of Winnipeg Social Services: May, 1981- March, 1983**

**Social Worker:** Assessed financial eligibility for social assistance to singles and families. I provided screening, counselling, intake, referral and liaison services to persons with suspected or known alcohol/drug dependence. Made regular home visits to clients and assisted in other capacities for the city emergencies as required.

I also worked as a Social Worker trainee in the summer of 1980 while attending the University of Manitoba. I was responsible for review assessments or "re-registration" of all clients who had been on financial assistance for over three months. I also, made comprehensive assessments of the city's care homes, and group homes for the elderly, and the physically and mentally challenged and provided recommendations for improvement.

**Other employment:**

**- University of Manitoba Instructional Media Centre: part time, Sept, 1979-April, 1981**

**Projectionist:** Involved setting up and operating film projectors and other audio visual equipment in theaters and classrooms throughout the university campus.

**- Manitoba Liquor Control Commission: part time and casual while attending University**

Involved sales, stock clerk and cashier duties at various liquor stores throughout Winnipeg

**- Canadian Tire: part time; August, 1977- December, 1979(Pembina Hwy location, Winnipeg)**

Hardware sales clerk

**- Swift Canada (Winnipeg): Jan, 1974- July, 1976**

Involved a variety of general plant duties

**Other Activities:**

I have been actively involved with ownership, rentals, and management of real estate since 1983. I own my own home and property in Nanaimo, B.C. where I have retired.

**Volunteer: 1993- 1995**

Vice Chair of Strata Council where I resided at 1045 Haro Street, Vancouver, B.C.

This was a 180 unit, apartment building converted from rentals. The building had a commercial strip mail condominium building attached to it which was part of our Strata Corporation.

The entire building required re-plumbing and extensive renovations and upgrades. This strata corporation was filled with challenges of all types. I worked closely with Vancouver Condominium Services and learned a great deal in the process, including firing and hiring new on-site management and strata corporation management companies, active involvement with financial reports and decisions, report writing, running meetings, and handling complaints and disputes.

As young adult, I was employed in several labour and service jobs, including:

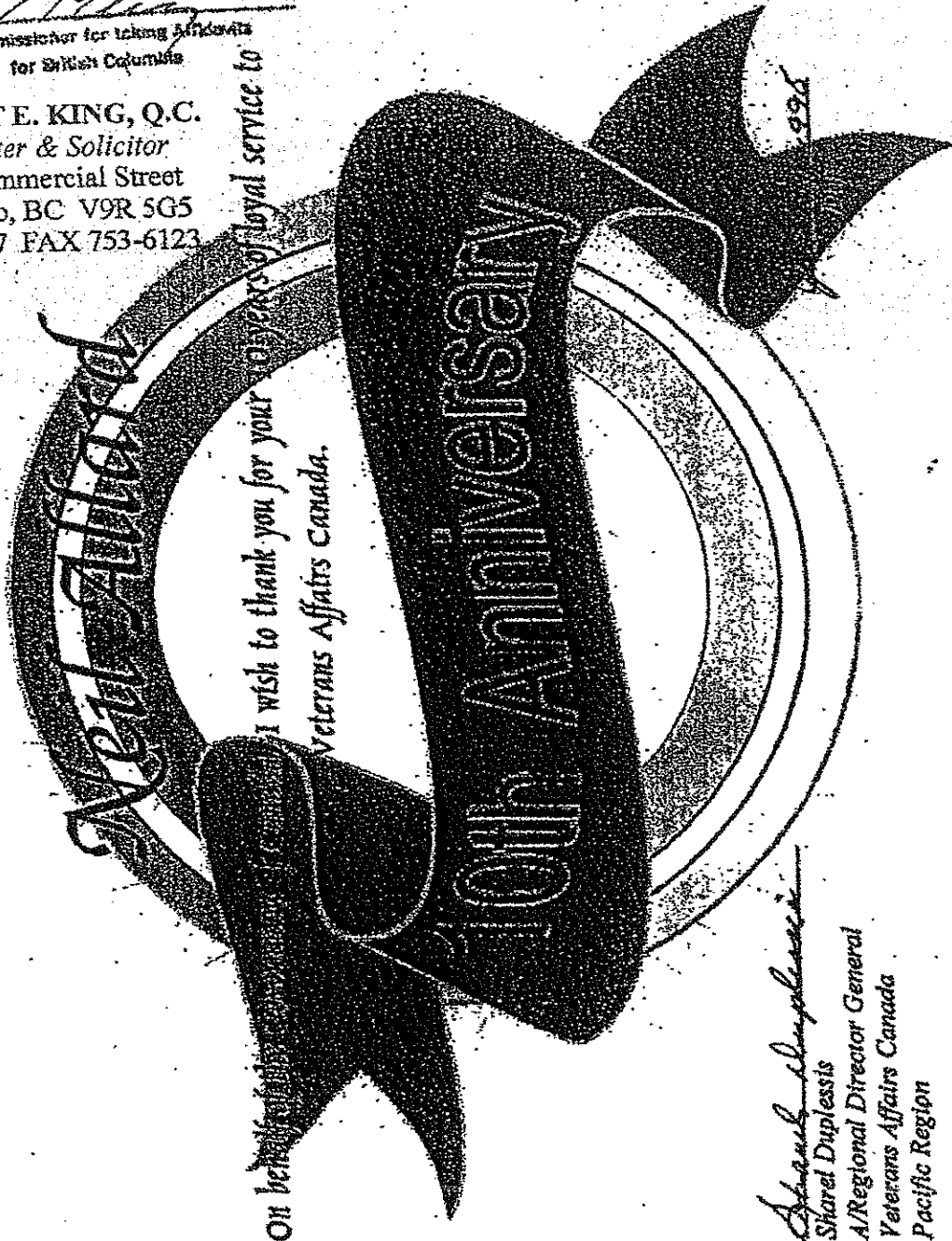
Part time hospital kitchen work, delivery driving, bartending, truck driving (3-5 ton), factory and warehouse work. As a teenager, I was a carrier for a daily newspaper from ages 11- 14.

Although I lived independently from the age of 15, I am a former permanent ward of the Children's Aid Society of Eastern Manitoba, until the age of 18 when I was suddenly completely on my own in Winnipeg. This life experience provided the personal motivation and incentive to pursue a career in Social Work, particularly, child protection and the welfare of children in care.

This is Exhibit "B" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo, BC  
this 10<sup>th</sup> day of January, 2014

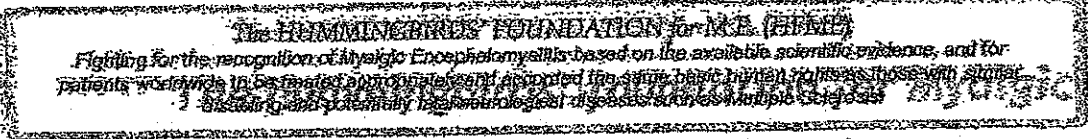
A Commissioner for taking Affidavits  
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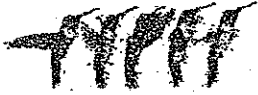
On behalf of the RCMP I wish to thank you for your years of loyal service to  
Veterans Affairs Canada.

*Sharet Duplessis*  
Sharet Duplessis  
A/Regional Director General  
Veterans Affairs Canada  
Pacific Region



# A one-page summary of the facts of M.E.

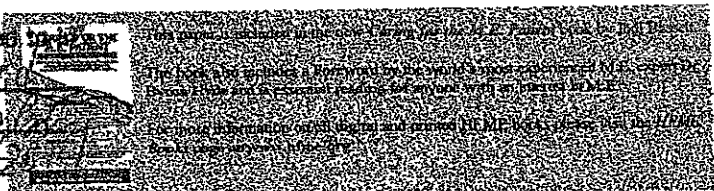
COPYRIGHT © JODI BASSETT JANUARY 2009, UPDATED APRIL 2012. FROM WWW.HFME.ORG



- Myalgic Encephalomyelitis (M.E.) is a disabling neurological disease that is very similar to Multiple Sclerosis (M.S.) and Poliomyelitis. Earlier names for M.E. were 'atypical Multiple Sclerosis' and 'atypical Polio.'
- M.E. is a neurological disease characterised by scientifically measurable post-encephalitic damage to the brain stem. This damage is an essential part of M.E., hence the name M.E. The term M.E. was coined in 1956 and means: my = muscle, algic = pain, encephalo = brain, mye = spinal cord, tis = inflammation. This neurological damage has been confirmed in autopsies of M.E. patients.
- Myalgic Encephalomyelitis has been recognised by the World Health Organisation's International Classification of Diseases since 1969 as a distinct organic neurological disease. M.E. is classified in the current WHO International Classification of Diseases with the neurological code G.93.3.
- M.E. is primarily neurological, but also involves cognitive, cardiac, cardiovascular, immunological, endocrinological, metabolic, respiratory, hormonal, gastrointestinal and musculo-skeletal dysfunctions and damage. M.E. affects all vital bodily systems and causes an inability to maintain bodily homeostasis. More than 64 individual symptoms of M.E. have been scientifically documented.
- M.E. is an acute (sudden) onset, infectious neurological disease caused by a virus (a virus with a 4-7 day incubation period). M.E. occurs in epidemics as well as sporadically and over 60 M.E. outbreaks have been recorded worldwide since 1934. There is ample evidence that M.E. is caused by the same type of virus that causes Polio; an enterovirus.
- M.E. can be more disabling than M.S. or Polio, and many other serious diseases. M.E. is one of the most disabling diseases that exists. More than 30% of M.E. patients are housebound, wheelchair-reliant and/or bedbound and are severely limited with even basic movement and communication.
- *Why are M.E. patients so severely and uniquely disabled?* For a person to stay alive, the heart must pump a certain base-level amount of blood. Every time a person is active, this increases the amount of blood the heart needs to pump. Every movement made or second spent upright, every word spoken, every thought thought, every word read or noise heard requires that more blood must be pumped by the heart. However, the hearts of M.E. patients only pump barely enough blood for them to stay alive. Their circulating blood volume is reduced by up to 50%. Thus M.E. patients are severely limited in physical, cognitive and orthostatic (being upright) exertion and sensory input. This problem of reduced circulating blood volume, leading to cardiac insufficiency, is why every brief period spent walking or sitting, every conversation and every exposure to light or noise can affect M.E. patients so profoundly. Seemingly minor 'activities' can cause significantly increased symptom severity and/or disability (often with a 48-72 hour delay in onset), prolonged relapse lasting months, years or longer, permanent bodily damage (e.g. heart damage or organ failure), disease progression or death. If activity levels exceed cardiac output by even 1%, death occurs. Thus the activity levels of M.E. patients must remain strictly within the limits of their reduced cardiac output just in order for them to stay alive. *M.E. patients who are able to rest appropriately and avoid severe or prolonged overexertion have repeatedly been shown to have the most positive long-term prognosis.*
- M.E. is a testable and scientifically measurable disease with several unique features that is not difficult to diagnose (within just a few weeks of onset) using a series of objective tests (e.g. MRI and SPECT brain scans). Abnormalities are also visible on physical exam in M.E. M.E. is a long-term/lifelong neurological disease that affects more than one million adults and children worldwide. In some cases M.E. is fatal. (Causes of death in M.E. include heart failure.)

This is Exhibit "C" referred to in the  
 the affidavit of Ned Allan  
 sworn before me at Nanaimo  
 this 16<sup>th</sup> day of Jan  
2012

Albert E. King  
 A Commissioner for Taking Affidavits  
 for British Columbia



**ALBERT E. KING, Q.C.**  
 Barrister & Solicitor  
 155 Commercial Street  
 Nanaimo, BC V9R 5G5  
 753-6617 FAX 753-6123



This is Exhibit D  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Jan 2014

[Signature]  
A Commissioner for taking Affidavits  
for British Columbia

753-6617 FAX 753-6123  
Nanaimo, BC V9R 5G5  
155 Commercial Street  
Barrister & Solicitor  
ALBERT E. KING, O.C.

Jane Frank, M.D., C.C.F.P.  
Joy Russell, M.D., C.C.F.P.  
Jessica Shintani, M.D., C.C.F.P.  
215 - 2678 West Broadway  
Vancouver, B.C. V6K 2G3

Tel. 736-8151

For NEIL ALLARD  
Address \_\_\_\_\_  
Date OCT. 21/98

R  
TO THE COMPASSION CLUB -

This is to certify that NEIL ALLARD  
has chronic fatigue syndrome. He  
was diagnosed to have this condition  
since approximately three and one half  
years ago.

Any assistance or support you  
can provide Neil is greatly appreciated.

Yours sincerely,

J. Shintani, M.D.

DO NOT REPEAT  PLEASE LABEL   
PERIOD \_\_\_\_\_ TIMES AT \_\_\_\_\_ DAY INTER.

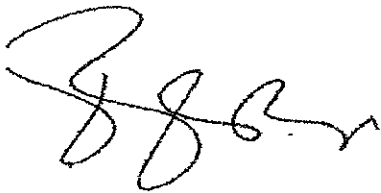
DR. LEON BERZEN  
MBBCh, FFPsych(SA), FRCPC(C)  
Neuropsychiatry

May 1, 2007

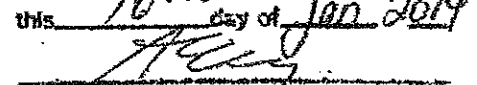
To whom it may concern  
Re: Mr Neil Allard.

My patient (above named) is currently  
applying to Health Canada for his legal  
medical use of marijuana.

I believe that his quality of life  
is improved by its use.



DR. LEON BERZEN  
2255 WESBROOK MALL  
VAN. B.C. V6T 2A1

This is Exhibit "E" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo, B.C.  
this 10<sup>th</sup> day of Jan 2014  
  
A Commissioner for Taking Affidavits  
for British Columbia

ALBERT E. KING, Q.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

Vancouver Hospital U.B.C. - Site  
2255 Wesbrook Mall, Vancouver, B.C. V6T 2A1

Tel: (604) 822-7549

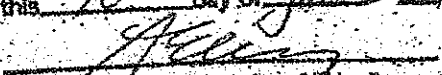
Fax: (604) 822-7105

Janet Franick, B.Sc., M.D., C.C.F.P.  
Joy Russell, M.D., C.C.F.P.  
Jessica Shintani, B.Sc., M.D., C.C.F.P.

Family Physicians

218 Signatage Place  
2678 West Broadway  
Vancouver, B.C.  
V6K 2G3  
736-8151

ALBERT E. KING, O.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

This is Exhibit F referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo, BC  
this 10<sup>th</sup> day of Jan 2014  
  
A Commissioner for taking Affidavits  
for British Columbia

November 5, 2001

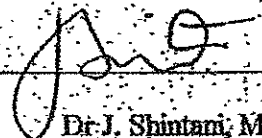
To: Health Canada  
Re: Neil Allard  
d.o.b. May 25/1954

Mr. Neil Allard has been my patient since January, 1996. He is a former counsellor and social worker and is permanently medically retired from Veterans Affairs Canada due to a complex set of medical problems as indicated by his specialist, Dr. L. Berzen, neuropsychiatrist at U.B.C. Hospital. There is no known cure for his illness.

Dr. Berzen endorses his use of medical marijuana, as I do. It has been quite beneficial for alleviating symptoms and improving his quality of life. Numerous other medications have been tried, as well as several complementary therapies. With most of these, significant side effects limited their use, and those that were tolerated provided little relief of symptoms.

I believe Mr. Allard is responsible with his use of medicinal marijuana.

I trust this information is helpful.

  
Dr. J. Shintani, M.D.

# Healthy Outlooks

## Healing Through Energy Psychology

Krisanna Jeffery

Are you overwhelmed? Overworked? Overcharged? Benefit from learning three easy, non-invasive techniques to manage the body's energy and emotions. Learn simple, effective ways to work with your natural ability to heal yourself and to manage chronic pain. This fun, interactive workshop, based on scientific research and energy psychology techniques, teaches ways to de-stress, regenerate, and restore a healthier balance. Counselors and health care providers, as well as the general public, will benefit from this course.

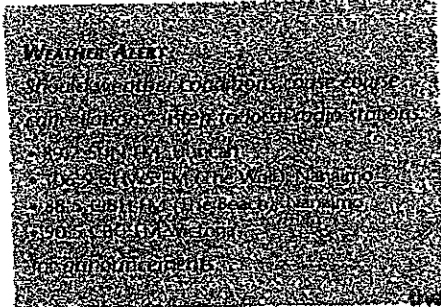
HEEP 001 S04D1 \$78 + GST = \$81.32  
 1 session: Sat, Mar 20; 9:30am-3:30pm  
 (1 hour lunch break)

## Helping Families Transition Through Separation And Divorce

Wendy Brooks, RSW, M.Ed.

This workshop is intended to develop an understanding of the effects of separation and loss in the family, and to understand the needs of children during the separation and divorce process. By understanding the process, parents are better able to help their children with the emotional difficulties sometimes encountered by families going through stress and change. Using instruction, discussions, and small group exercises, Wendy will cover grief and loss, anger, parental roles, children's needs, and weathering conflict. The goal of the class is to understand how to maintain balance for children during stressful and difficult times. Intended for parents who are experiencing separation and divorce, and others who are interested in the subject.

HEHF 001 S04D1 \$54 + GST = \$57.78  
 1 session: Sat, Apr 3; 9am-4pm



## Medical Marijuana

Eric Nash and Wendy Little

Government-licensed marijuana growers will show you how to apply for Health Canada's Medical Marijuana Access Program. Topics include patient and grower application forms and plant strain selection for various medical conditions. Wendy Little and Eric Nash are the founders of Canada's leading medical marijuana resource website: www.medicalmarijuana.ca. Their website is noted as a national reference for the Canadian AIDS Society, the Multiple Sclerosis Society of Canada, health professionals, patients, and licensed growers from across Canada and around the world.

HEHMA 001 S04D1 \$48 + GST = \$51.36  
 1 session: Sat, Mar 27; 10am-3pm (1 hour for lunch)

*Same course offered earlier*

## Massage And Relaxation Techniques

Marilyn Swallow

This experiential course will teach you the basic principles of massage and guide you towards confidence in your skills of healing touch. You will learn a variety of techniques, breath work, and tricks of the trade. This hands-on approach guarantees you will be calm and relaxed in no time. Bring 1-2 pillows and a blanket, wear loose clothing and shorts. Couples are encouraged to attend together. Marilyn Swallow has been a registered massage therapist since 1992 and is co-owner of WellSpring Clinic in Duncan.

HEHMA 001 S04D1 \$64 + GST = \$68.48  
 2 sessions: Sat, Apr 3-17; 12noon-4pm  
 (No class Sat, April 10, 2004)

## Angels - We All Have One

Susie Buckley

Through angel directed meditation and focusing practices, discover and enter into a direct dialogue with your "Angels". We all hear what our angels have to tell us, but we don't often recognize the language used in this communication. Here is an opportunity to step out of your usual human confusion, and learn how to ask for reassurance and guidance from your angels.

HEAW 001 S04D1 \$46 + GST = \$49.22

## Acupressure For Dogs

Michael Lines, D.T.C.M.

Learn a gentle acupressure routine to relax and energize your dog, and acquire the knowledge to keep your animal healthy. The class will be particularly helpful for those of you with older dogs that may have osteoarthritis, hip dysplasia, or spinal problems. Bring your dog and a blanket.

HEAF 001 S04D1 \$49 + GST = \$52.43  
 1 session: Sat, Apr 24; 9-12noon

This is Exhibit A referred to in the affidavit of Neil Allard sworn before me at Nanaimo, BC this 10th day of Jan 2014.

*[Signature]*  
 A Commissioner for Taking Affidavits  
 for British Columbia

CONTINUING EDUCATION - COWICHAN CAMPUS  
 ALBERT E. KING, Q.C.  
 Barrister & Solicitor  
 155 Commercial Street  
 Nanaimo, BC V9R 5G5  
 753-6617 FAX 753-6123

165342

ALLARD, NEIL V  
539-055-681  
527D  
Program: CES  
2003-10-15 to 2003-10-22

ALLARD, NEIL V  
NANAIMO, BC

MALASPINA UNIVERSITY COLLEGE  
PAID

SEP 12 2003

COWICHAN CAMPUS

Home (250) 741-0009  
Bus (250) 000-0000 L0000

Correspondence will be sent to this address

*changed to Neil*

HEMM-001 WEDSD1 MEDICAL MARIJUANA  
Starts: 15 OCT 2003 Ends: 22 OCT 2003  
Duncan  
Wed 19:00-21:00

\$48.00



Paid 2003-09-12 Visa \$51.36

Tuition \$48.00  
Goods and Services Tax + \$3.36  
Paid to Date - \$51.36

Processed by: NK/51.36 VISA

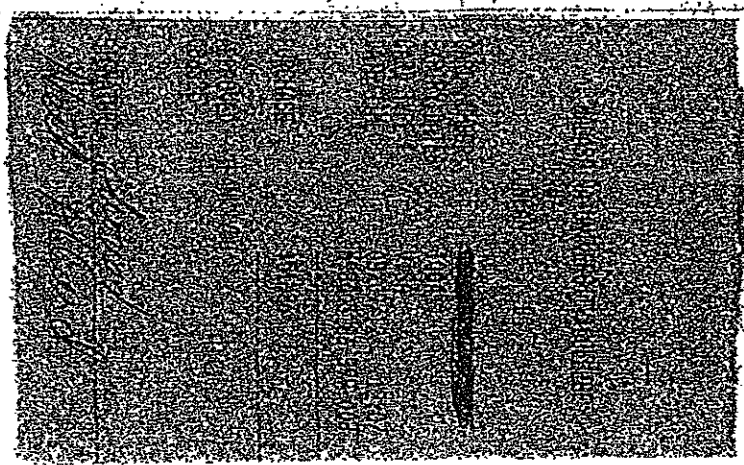
Enrolment No: 5390-5568-019 (I) 569085 Net Payable ==> \$0.00

www.mala.ca

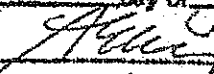
This is Exhibit "H" referred to in the affidavit of Neil Allard sworn before me at Nanaimo, BC this 10<sup>th</sup> day of Jan 2004

*Albert E. King*  
A Commissioner for Taking Affidavits for British Columbia



ALBERT E. KING, Q.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123



ALBERT E. KING, Q.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

This is Exhibit - I referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Jan 2014  
  
A Commissioner for taking Affidavits  
for British Columbia

To Whom It May Concern:

Re: Mr. Neil Allard  
  
Nanaimo, B.C.  


After lengthy unsuccessful trials with various prescription medications, along with other therapies for Mr Allard's complex medical condition, I conclude that the use of medical marijuana for this patient is warranted and recommended as part of his overall therapy.

  
Dr Bruce Carruthers  
Internal Medicine

Jan 15/03

BC COMPASSION CLUB SOCIETY



Renewal Date: Oct 29 - 2004 Member #

Name: Neil Allard

Signature: [Handwritten Signature]

The bearer of this is a member of the Compassion Club of Vancouver, BC. This card entitles members to purchase cannabis and obtain access to other natural therapies. Membership is renewable yearly, and revocable at any time, at the discretion of the Club.

2995 Commercial Drive, Vancouver, BC V5N 4C8 604.875.0448  
www.thecompassionclub.org

This is Exhibit "I" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Jan 2014

[Handwritten Signature]  
A Commissioner for taking Affidavits  
for British Columbia

ALBERT E. KING, Q.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123



505 - 6th Street, Suite 206  
New Westminster, BC V3L 0E1

Toll Free: 1-866-566-SAFE  
Fax: (778) 396-2064  
www.safetyauthority.ca

### ELECTRICAL INSPECTION REQUEST

<b>Electrical Contractor Installation Permit</b>		
Inspection Requested : 08 Sep 2012	AREA # 683	Permit/Product Approval # 5235678

Issue Date : 2012/09/08 Expiry Date: 2013/03/05

Installation Name: Neil Allard  
 Site Location:  
 Installation Address: NANAIMO-MAKI RD/10TH ST N  
 Contact Phone Number: 2507186442  
 Directions:

I, HEMMERICH, ROLAND (FSR # 34363) a Field Safety Representative for ROLAND HEMMERICH DBA ROLAND ELECTRIC (Contractor # 15692) have physically examined the electrical work completed under the above-mentioned permit, and hereby certify that the electrical installation authorized thereby has been installed to comply with the Safety Standards Act and Regulations of British Columbia.

- Rough Wiring Inspection Required
- Rough Wiring as noted below may be covered on : 2012/09/08
  - Rough Wiring Progress : Complete
  - Partial Rough Wiring Area :

- Electrical Service is Ready for Connection
- Main Electrical Service connection is required as follows : Service Change
  - Service Change From : 70 To : 100
  - Type of Grounding Electrode: Plate.

ALBERT F. KING, Q.C.  
 Barrister & Solicitor  
 155 Commercial Street  
 Nanaimo, BC V9R 5G5  
 753-6617 FAX 753-6123

This is Exhibit - K referred to in  
 the affidavit of Neil Allard  
 sworn before me at Nanaimo, BC  
 this 10th day of Jan 2014  
  
 A Commissioner for Taking Affidavits  
 for British Columbia

Signature of Field Safety Representative

Contractor Phone Number 2507186442 Date Sept 21/12

Voltage 240 Amps 100 Phase 1 Electric Heat low



March 11, 2008

Dr. Bruce Carruthers  
2-3657 west 16<sup>th</sup> Ave.  
Vancouver, B.C.  
V6R 3C3

**DR. BRUCE CARRUTHERS**  
#2 - 3657 West 16th Ave.  
Vancouver, B.C. V6R 3C3  
604-224-1515 MSC #1316

To Health Canada:

Re: Mr. Neil Allard (DOB, May 25, 1954)  
Use of medical marijuana

Further to my letter dated January 15, 2003, I am continuing to recommend ten grams daily of medical marijuana for Mr. Allard's medical condition of myalgic encephalomyelitis. He was diagnosed with this in 1995. There is no known cure for this condition and current therapies are highly individual.

He has had lengthy unsuccessful trials with numerous conventional medications which have caused intolerable side effects and worsened his overall state. His condition has been stable and his quality of life improved with his present therapies, which include medical marijuana in vapor, tea and baked forms.

He grows his own organic marijuana, which provides him an opportunity to exercise gently, obtain warmth and light and the benefits of year round gardening, as well a sense of control over managing his illness, which is critically important to this highly independent man.

I shall be retiring from medical practice shortly and this will leave Mr. Allard in the predicament of not having a specialist's signature required for his Health Canada medical marijuana forms. I understand that this is not required for all conditions, and that the general practitioner is allowed to sign the Health Canada medical marijuana forms for certain conditions.

Mr. Allard has been growing legally for almost four years, his case is well documented, he has written support from his Member of Parliament, and this yearly application process clearly causes him a great deal of stress, which tends to worsen his overall chronic condition.

In view of this, I recommend that his subsequent applications to Health Canada's medical marijuana program be signed by his general practitioner, without the need for a specialist's signature.

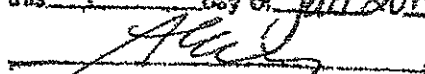
I trust this clarifies the matter.

Sincerely,



Dr. Bruce Carruthers, M. D.  
Internal Medicine

This is Exhibit "L" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo, B.C.  
this 10<sup>th</sup> day of Jan 2004



A Commissioner for taking Affidavits  
for British Columbia

**ALBERT E. KING, Q.C.**  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

# The Medical Arts Centre

PORT PLACE • UNIT 30 - 650 SOUTH TERMINAL AVENUE • NANAIMO, BC • V9R 5E2

TELEPHONE: (250) 753-3431 FAX: (250) 754-6897

## FAMILY PHYSICIANS

A.C. Baird Inc., M.B. Ch.B., C.C.F.P.  
Anthony P. Lane Inc., M.B., B.Ch., C.C.F.P., F.C.R.P.  
Robin R. Love Inc., B.Sc., M.D., C.C.F.P.  
D.A. Kazanowski Inc., M.D.  
Ian D. Montgomery Inc., B.Sc., M.D.  
B.C. Calvin Inc., B.Sc., M.D., C.C.F.P.  
R. Keith Phillips, B.Sc., M.D., C.C.F.P., F.C.R.P.

Neil Rogers, B.Sc., M.D.  
Renier J. van Rensburg Inc., M.B., Ch.B.  
J.A.C. O'Farrell Inc., Hons. B.Sc., M.D., C.C.F.P.  
Allan R. Kaban Inc., (PHARM), M.D., C.C.F.P.  
J.S. Mander, M.B. Ch.B.  
Clive Balfour Inc., M.B. Ch.B., F.C.E.M.  
Paul E. King, M.B. Ch.B.

## ADMINISTRATION

Gregory P. Sizemore

December 1, 2009

To Whom It May Concern:

RE: Neil ALLARD  
DOB: May 25, 1954

Mr. Allard suffers from myalgic encephalomyelitis. He is an infrequent attender to my practice as he has fluctuating periods of debilitating fatigue and as a result, he struggles with basic activities of daily living. He also tells me that noise in the form of television, stereos, telephones, voices and crowds can sometimes severely affect his condition.

Due to the nature of his condition, he is also unable to perform instrumental activities of daily living and for these, he relies on his wife. When he does have severe attacks, he struggles with his memory and cognition and so help from his wife is a necessity.

Recuperation from severe attacks can take hours to sometimes even days. The pain element of his condition affects his walking requiring numerous rest periods during walks and the need for significant rest upon returning home. His symptoms have now been present for several years.

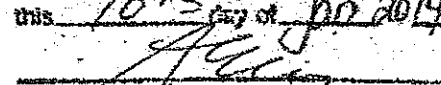
He has been assessed over the years by several specialists and it has been well documented that his condition is chronic.

Yours sincerely,

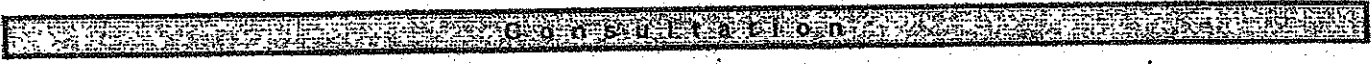
  
Jim Mander, M.D.

JM/wlw

HERBERT E. KING, Q.C.  
Barrister & Solicitor  
355 Commercial Street  
Nanaimo, BC V9R 5G5  
250-6617 FAX 753-6123

This is Exhibit "M" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo, BC  
this 10<sup>th</sup> day of Jan 2014  
  
A Commissioner for taking Affidavits  
for British Columbia

Name: Allard, Neil  
MRN: 09480989  
ENC#: 92008807879  
DOB: 25-May-1954  
GENDER: Male  
PHN: 9105-971-371



Document Name: Anaesthetic Consult  
Dictated By: Muendel, Karl Alexis  
Result Date/Time: 11-Jun-2012 13:58

Your patient, Neil Allard, was seen today at Nanaimo Regional General Hospital. He is a 58-year-old gentleman who was referred for assessment and treatment of neuropathic left supraclavicular pain. He has a history of nonunion of his left clavicle after a fracture that occurred when he was about 10 years old. He has had this evaluated by a number of surgeons in the past, and has considered having surgery. Recently, the pain seems to have been increasing. He has very significant sensitivity over this area, and has a difficult time having contact even with clothing over it. He had mentioned to Dr. Smith, and I read this from his note, that he had a previous fear of doctors and therefore stayed away from surgery. When he had discussed this with Dr. Smith, they decided to hold off on surgery, and they wanted to deal with the hypersensitivity component.

Today, the patient presents with primarily total body pain. This encompasses his entire trunk, anterior and posterior, his limbs, anterior and posterior, and his head circumferentially. He was diagnosed with what is called myalgic encephalomyelitis by Dr. Carruthers who had written guidelines for this. The symptoms seem to vary greatly, but can involve pain throughout the entire body. The patient presents with some literature on the subject today. Of note, I am not familiar with this pathology, and so spent a great deal of time trying to figure out what his symptoms were. It seems as though he has a very hyperacute nervous system that seems to flare with multiple different stimulations. He has abdominal issues, gastrointestinal issues with food. He is extremely cold. He keeps his house at 85 degrees Fahrenheit. He describes aching pain and sharp pain throughout his body. He describes weakness, numbness, multiple bowel movements per day, 5 or more. He urinates a lot. He mentions any activity seems to flare his pain. He has a considerable amount of thoracic and lumbar back pain which limits him from even supporting his own weight in the sitting position. If he lies back, he can sit there for approximately 20 minutes until he has to stoop forward. He really has not gained much benefit from anything except for organic cannabis. He mentions that he uses 9 different types, and he vaporizes them. He has had a license for 9 years now. When asking him what cannabis does for him, he mentions it helps with muscle and joint pain, headaches, sleep, relaxation, appetite, ringing in his ears, depression, energy level and creativity.

Of note, he has a history according to him of some sort of meningitis as a child which resulted in memory impairment and some sort of brain injury.

Worst level of pain is 8/10, best is 3/10, acceptable is 3/10.

MEDICATION TRIALS:

This is Exhibit "A" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10th day of June 2012

A Commissioner for taking Affidavits  
for British Columbia

PLoc: Nanaimo Regional General Hospital - Acute Care  
Print Date: 16-Oct-2012  
Print Time: 10:26  
Discharge Date: 11-Jun-2012  
EHR Printed Copy  
Page 1 of 3

ALBERT E. KING, Q.C.  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

Name: Allard, Neil  
MRN: 09480989  
ENC#: 92008807879

Document Name: Anaesthetic Consult  
Dictated By: Muendel, Karl Alexis  
Result Date/Time: 11-Jun-2012 13:58

He mentions a very long list of neuropathic medications, antidepressants, all which resulted in intolerance. Clonidine, ranitidine, baclofen, Imitrex, codeine, Paxil, amitriptyline, nortriptyline, Ativan, Zoloft, Neurontin, topiramate, propranolol, Flexeril, Synthroid, Prozac, Robaxacet, Dicetel, Wellbutrin, Effexor, nabilone, diphenhydramine.

Current medications include clonazepam and organic cannabis.

#### ALLERGIES:

He lists almost all these medications as allergies.

#### PREVIOUS TREATMENTS:

He has not had any injections and does not want any. Acupuncture was somewhat helpful for short-term. Hypnosis – has tried to use it. Relaxation training is very helpful. Counseling is very helpful. Physical therapy is not tried. Massage was helpful.

#### PAST MEDICAL HISTORY:

Insomnia, and he mentions a bifid left rib as a medical problem.

#### PAST SURGERIES:

Procedure to enlarge his bladder at age 11. Hydrocele repair in 2011.

#### SOCIAL HISTORY:

He quit after age 27 and drank moderate alcohol until 1995 when his changes of ME appeared. This was in 1995. History of depression, anxiety, suicidal thoughts. Previously, he worked for Veterans Affairs as a counselor and social worker, but since 1995, has not been able to work due to this quite debilitating problem.

MRI of his brain which shows small white matter changes not indicative of demyelination throughout his superficial cortex.

#### PHYSICAL EXAMINATION:

He is alert and oriented. He is cooperative. He is very slow in his movements and in his response to certain questions, but is quite pleasant. He appears quite gaunt and is dressed very warmly for the day.

Vital signs: Pulse of 90, blood pressure 130/83, saturating 98% on room air. Weight is 62.4 kg, height is 179 cm, BMI is 19.3.

He is able to heel walk, toe walk and squat, but all these motions produce pain. He is able to support himself in the sitting position for a short period of time until his back pain is exacerbated. Extension exacerbates his thoracic and lumbar pain more than flexion but then flexion does after a short period of time as well. He has good strength in his lower extremities. Neurologically, he appears intact with no long tract signs and no focal deficits. He has got well-perfused extremities, upper and lower. No significant rashes or excoriations. He has got no significant deformities and no step-offs in his spine.

Name: Allard, Neil  
MRN: 09480989  
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C O L I N S A L L A R D O R T H O D O N T

Document Name: Anaesthetic Consult  
Dictated By: Muendel, Karl Alexis  
Result Date/Time: 11-Jun-2012 13:58

ASSESSMENT:

This is a pleasant 58-year-old gentleman with a history since 1995 of total body pain that was diagnosed by Dr. Carruthers as myalgic encephalomyelopathy. This is thought to be due to possible small vascular occlusions that can be body wide. It was noted that this has previously been diagnosed as atypical multiple sclerosis or atypical post-polio syndrome.

PLAN AND RECOMMENDATIONS:

Unfortunately, we do not have any further medication trials since he has been through a number and would like to defer any further medications. We discussed interventions, but obviously due to his widespread pain, he would not be a candidate for many of these and he would like to avoid injections if at all possible.

We discussed physical therapy options. Unfortunately, I would have him work on lumbar stabilization. He is unable to support himself and even the walk in the hospital may flare his pain. Therefore, we decided to avoid this. Aqua therapy was a consideration, but the cold is too much for his body, can actually flare his pain.

We will have him see our social worker and hopefully our psychologist in the future to continue to work with coping strategies. I understand he is seeing a psychologist about 7 times per year which does seem to benefit him.

Hopefully, this is of some benefit to you. If you have any questions or concerns, please do not hesitate to contact me.

THIS DOCUMENT HAS BEEN  
DICTATED BUT NOT READ:

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D: 11-JUN-2012 13:58 T: 18-JUN-2012 06:25 MW 24741

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cc: Dr Smith, Erasmus J

# American Herbal Pharmacopoeia

## Cannabis Inflorescence Cannabis spp.

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STANDARDS OF IDENTITY, ANALYSIS, AND  
QUALITY CONTROL

PREVIEW OF COMPLETE MONOGRAPH  
PP 64 PAGES

This is Exhibit "D" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Jan 2014  
Albert E. King  
Commissioner for taking Affidavits  
for British Columbia

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# TABLE OF CONTENTS

<b>Nomenclature</b>	2	<b>Constituents</b>	32
Botanical Nomenclature		<b>Analytical</b>	40
Botanical Family		Thin-Layer Chromatography (TLC)	
Pharmaceutical Nomenclature		High-Performance Liquid Chromatography (HPLC)	
Pharmacopoeial Definition		Gas Chromatography with Flame Ionization Detection (GC-FID)	
Common Names		Limit Tests	
<b>Identification</b>	2	Foreign Organic Matter	
Botanical Identification		Total Ash	
Macroscopic Identification		Acid-insoluble Ash	
Organoleptic Characterization		Loss on Drying	
Microscopic Identification		Pesticide Limits	
<b>Commercial Sources and Handling</b>	18	Microbial and Fungal Limits	
Sourcing		Metal Limits	
Cultivation		Solvent Residues	
Harvest		<b>International Status</b>	51
Drying		<b>References</b>	55
Packaging			
Storage			
Natural Contaminants and Adulterants			
Qualitative Differentiation			
Sustainability and Environmental Impact			
Documentation of Supply			
Growing and Harvesting Guidelines			
Security			
Suppliers and Dispensaries			

PREVIEW OF COMPLETE MONOGRAPH  
COMPLETE MONOGRAPH 64 PAGES

## Legal Notification

The following Standards of Identity, Analysis, and Quality Control of *Cannabis* are intended to provide scientifically valid methods for the analysis of cannabis and its preparations that can be used to comply with state and federal regulations and policies. The analytical methods were obtained from peer reviewed literature, have been used as part of international or federal monitoring programs for cannabis, and have been verified for their scientific validity. Methods other than those presented in this monograph may be scientifically valid and provide reliable results. However, all methods must be verified as being scientifically valid prior to use for regulatory compliance.

In the United States, cannabis is a Schedule I controlled substance under federal law; therefore, any use or possession of cannabis and its preparations is illegal except pursuant to the compassionate use Investigational New Drug exemption. These standards are not intended to support, encourage or promote the illegal cultivation, use, trade, or commerce of cannabis. Individuals, entities and institutions intending to possess or utilize cannabis and its preparations should consult with legal counsel prior to engaging in any such activity.

The citing of any commercial names or products does not and should not be construed as constituting an endorsement by the American Herbal Pharmacopoeia. Additionally, the reliability, and therefore ability to comply with state or federal regulations, of any conclusions drawn from the analysis of a sample is dependent upon the test sample accurately representing the entire batch. Therefore, when performing all analytical tests, a formal sampling program must be employed.

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### Medical Disclaimer

The information contained in this monograph  
represents a synthesis of the authoritative scien-  
tific and traditional data. All efforts have been  
made to ensure the accuracy of the information  
and findings presented. Those seeking to utilize  
botanicals as part of a health care program should  
do so under the guidance of a qualified health care  
professional.

### Statement of Nonendorsement

Reporting on the use of proprietary products  
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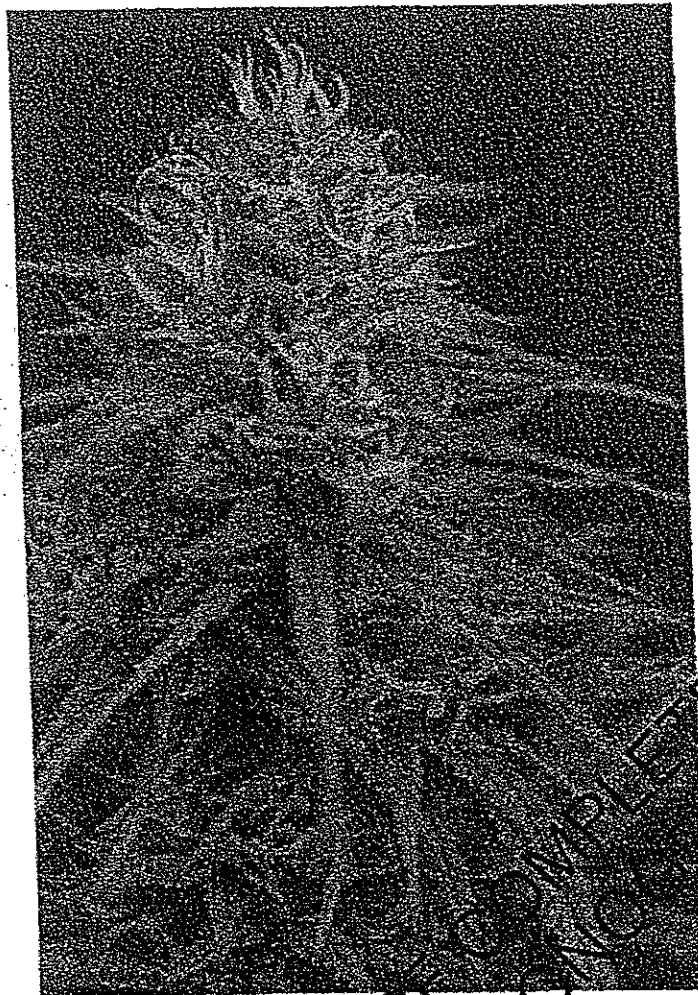
*Cannabis* cultivated under the Compassionate  
Investigational New Drug program at the University  
of Mississippi administered by the National  
Institute on Drug Abuse (NIDA). Photograph  
courtesy of University of Mississippi.



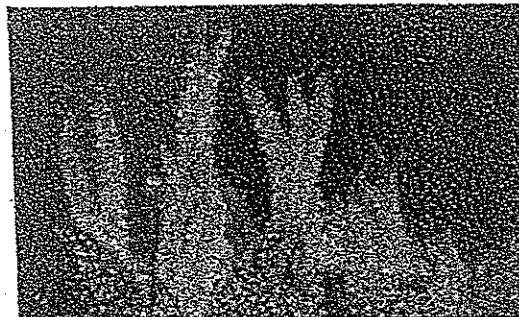
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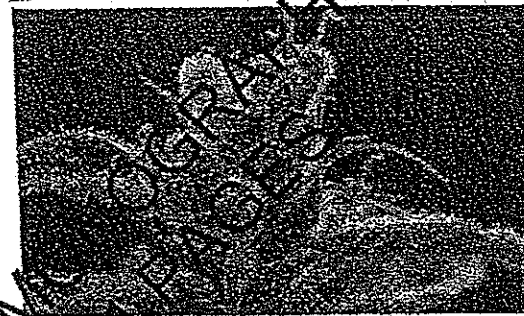




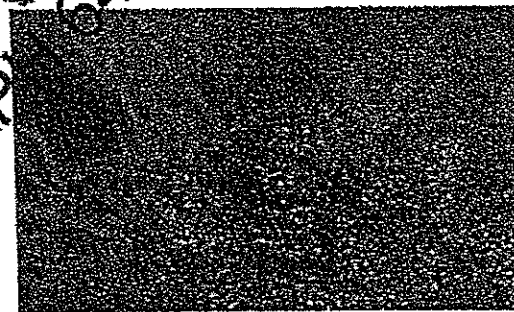
2a.



2f.



2g.



2h.

Figure 2 (continued) Botanical characteristics of *Cannabis* inflorescences

- 2a. Maturing female inflorescence showing young yellow styles and stigmas (often referred to as "pistils").
- 2f. Close-up of maturing female inflorescence showing young yellow styles and stigmas senescing brown and shriveling and an abundance of glandular trichomes.
- 2g. Female inflorescence with senescent reddish-brown styles and stigmas, an indicator of inflorescence maturity.
- 2h. Close-up of female inflorescence with senescent reddish-brown styles and stigmas.

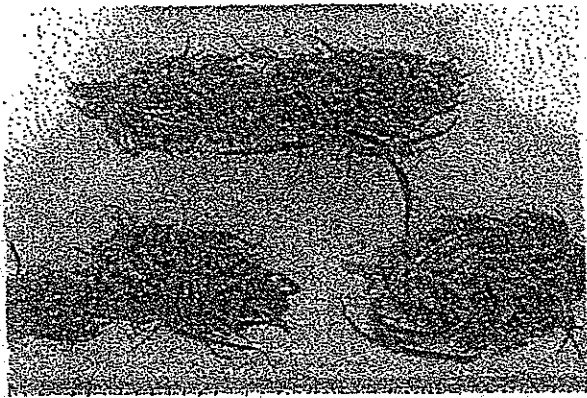
hemp, narrow-leaf drug, etc. to account for the plasticity represented in the genus.

*Cannabis* is a member of the *Cannabaceae* family, together with another well-known member of the family, hops (*Humulus*). The family has recently been expanded to contain 9 other genera (Stevens 2001). The following describes the published range of morphological diversity within plants recognized as *Cannabis* spp.

#### Morphological Characterization of *Cannabis* L.

Herbaceous annual, taprooted (taproot not developed on vegetatively propagated/cloned plants). Plants dioecious

(male and female flowers occur on separate plants) and rarely monoecious (male and female flowers occur on the same plant). Monoecious plants are often referred to as "hermaphrodites." True hermaphrodites bear bisexual flowers and are less common, whereas monoecious plants bear unisexual male and female flowers at different locations on the plant. Staminate (male) plants tend to be taller but less robust than pistillate (female) plants. Height and degree of branching depends on both genetic and environmental factors (UNODC 2009). Stem: Erect, furrowed, often hollow, 0.2–6 m (usually 1–3 m) tall, simple to well branched; branchlets densely pubescent; staminate (male) plants usually taller and less robust, compared with pistillate (female)



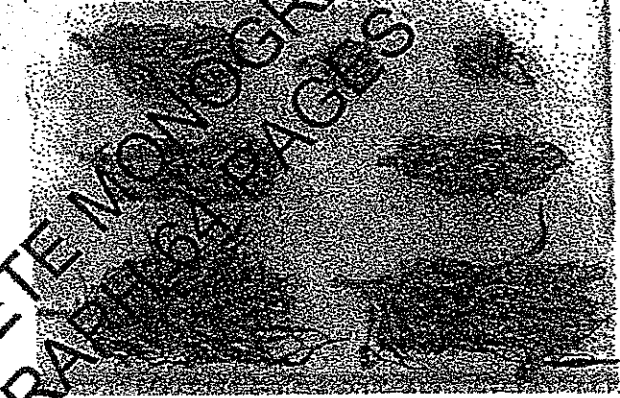
6a.



6b.



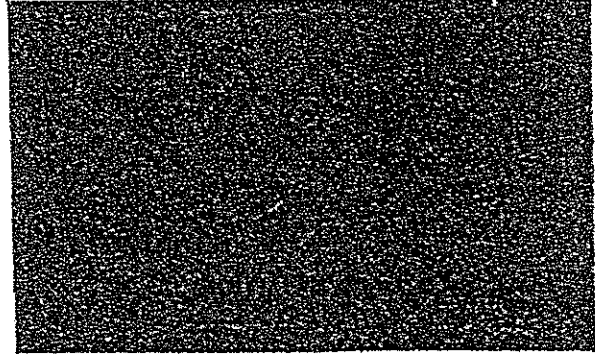
6c.



6d.



6e.



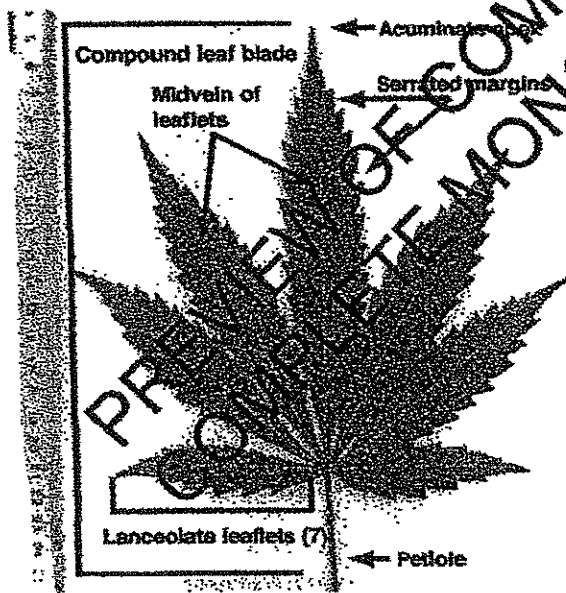
6f.

**Figure 8 Macroscopic characteristics of cannabis inflorescence**

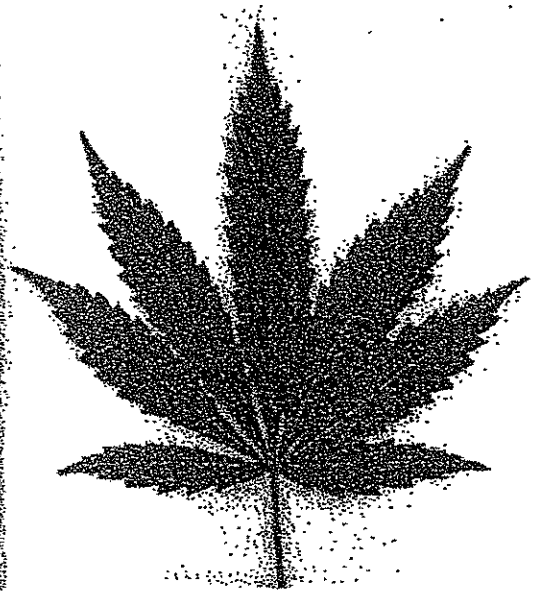
- 6a. Dried, untrimmed pistillate inflorescences of morphological type "sativa."
  - 6b. Dried pistillate inflorescences of morphological type "sativa" (bottom - untrimmed; top - trimmed).
  - 6c. Storage effects on color of cannabis material (left - 1-year-old; right - new harvest).
  - 6d. Dried pistillate inflorescences of morphological type "indica" (bottom - untrimmed; middle and top - trimmed).
  - 6e. Close-up of a dried pistillate inflorescence (note the visible glandular trichomes).
  - 6f. Powdered dry cannabis material (leaves and pistillate inflorescences).
- Photographs courtesy of: (6a-e) WAMM, Santa Cruz, CA; (6f) University of Mississippi, University, MS.



3a.



3c.



3d.

**Figure 3 Botanical characteristics of cannabis leaf**

- 3a. Adaxial (upper) surface of a typical cannabis leaf (9 leaflets).
- 3b. Adaxial (upper) surface of a typical cannabis leaf (5 leaflets).

- 3c. Adaxial (upper) surface of a typical cannabis leaf with morphological characteristics highlighted.
- 3d. Abaxial (lower) surface of a typical cannabis leaf.

## Natural Contaminants and Adulterants

Due to its widespread cultivation, there is little concern for adulteration of the plant itself. However, the large economic potential and illicit aspect of cannabis has given rise to a number of reported potentially hazardous natural contaminants or artificial adulterants in crude cannabis and cannabis preparations.

**Natural contaminants:** Several plant species have morphological characteristics comparable to *Cannabis sativa*, e.g., *Hibiscus cannabinus* (kenaf), *Acer palmatum* (Japanese maple), *Urtica cannabina* (a Asian species of nettle), *Dizygotheca elegantissima* (false aralia), *Potentilla recta* (sulphur cinquefoil, rough-fruited cinquefoil), and *Datisca cannabina* (false hemp), leading to occasional contamination of cannabis internationally (UNODC 2009). However, these plants can be readily differentiated from cannabis by inspection of their macroscopic and microscopic characteristics. More commonly, natural contaminants consist of degradation products, microbial (fungi and bacteria) contamination, and heavy metals. These contaminants are usually introduced during cultivation and storage (McLaren et al. 2008; McPartland 2002).

**Adulterants:** Growth enhancers and pest control chemicals, introduced during cultivation and storage, are possible risks to the producer and the consumer. There are anecdotal reports of the use of banned substances such as daminone (Alar), the degradation product of which is the highly toxic hydrazine. Cannabis can also be contaminated for marketing purposes. This usually entails adding substances, e.g., tiny glass beads, to increase the weight of the cannabis product, or adding psychotropic substances, e.g., tobacco, calamus (*Acorus calamus*), and other cholinergic compounds, to enhance the efficacy of low quality cannabis or to alleviate the side effects of cannabis (McPartland et al. 2008; McPartland 2008).

In the Netherlands, chalk and sand have been used to make cannabis appear to be of higher quality, the sand giving the appearance of trichomes. In the UK, similar adulterations have been made by adding glass beads with a similar diameter to trichome resin heads to cannabis (Randerson 2007). In Germany, lead has intentionally been added to street cannabis to increase its weight. Lead is readily absorbed upon inhalation and this adulteration resulted in lead intoxication in at least 29 users (Busse et al. 2008). Additionally, in the Netherlands, two chemical analogs of sildenafil (Viagra) were found in cannabis samples. In the UK, other contaminants including turpentine, tranquilizers, boot polish, and henna, among others, have been reported (Newcombe 2006).

In recent years, various products laced with synthetic cannabinoids have appeared on the market. These are believed to mimic the effects of cannabis. These products are known by various names (e.g., "Spice" and "K2") and can be sold as "incense" or "natural smoking blends".

Like cannabis, these synthetic cannabinoids are schedule I restricted substances. The Spice blend is reported to contain synthetic cannabinoids with a mixture of otherwise legal, safe, and non-psychotropic herbal dietary supplement ingredients including: damiana (*Turnera diffusa*), Chinese motherwort (*Leonurus sibirica*), and water lily (*Nymphaea caerulea*). According to the National Institute on Drug Abuse (NIDA 2012), those using some of these various blends have been admitted to Poison Control Centers and report "rapid heart rate, vomiting, agitation, confusion, and hallucinations. Spice can also raise blood pressure and cause reduced blood supply to the heart (myocardial ischemia), and in a few cases it has been associated with heart attacks. Regular users may experience withdrawal and addiction symptoms."

## Qualitative Differentiation

Cannabis that is to be used for medicinal purposes should be as free from foreign matter as practically possible (see Limit Tests). Medicinal material should be free of mold and bacteria that have a high likelihood of pathogenicity (e.g., *Staphylococcus*, *E. coli* (O157:H7)), visible mold should be absent, material should be free of stems greater than 1.5 cm, only subtending leaves should be present, material should be free of metals to the degree allowed by a naturally occurring growing substrate, and free of pesticides and fungicides that can present a health hazard to the consumer. Microbial standards should be adopted based on those required for non-sterile pharmaceutical preparations for use by inhalation (see European Pharmacopoeia 5.1.4). Color should be consistent throughout each sample and should not show signs of grey or black, which are indicators of fungal infection.

For medical users of crude cannabis, there is a balance sought between organoleptic qualities (taste and aroma) and medicinal effect, as well as a balance between THC- and CBD-yielding cultivars. Many cultivators select, breed, and process for these varying qualities. For medicinal purposes an optimal ratio between total THC,  $\Delta^9$ -THC, and/or CBD has not been definitively determined. Different health conditions may respond differently to plants containing different ratios of the two primary cannabinoids. For example, there is evidence to suggest that CBD is responsible for some of the putative anxiolytic effects (Mechoulam et al. 2002; Zuardi et al. 2002) of the plant, while  $\Delta^9$ -THC has been associated with appetite stimulation (Dejesus et al. 2007; Nelson et al. 1994). The process of trimming is done both for yielding higher concentrations of  $\Delta^9$ -THC and for yielding more desirable, organoleptic qualities, since the leaves possess a sharp and bitter organoleptic characteristic. A better organoleptic profile may enhance compliance.

Dispensaries should maintain strict quality control practices to ensure the purity and quality of their material by contracting for testing with independent labs that apply independently verified testing methodologies and transparent testing

standards. Individual growers and care givers producing medical cannabis for personal use should employ good agricultural practices (GAPs) to the extent possible in all aspects of growing, harvesting, drying, and storage.

### Sustainability and Environmental Impact

As all cannabis is derived from cultivated sources, there is little risk of the plant becoming environmentally threatened unless aggressive eradication programs are implemented worldwide. However, without development, implementation, and enforcement of Good Agricultural Practices (GAPs), both the indoor and outdoor production of cannabis can have significant negative environmental and social impacts. Environmentally, the illegal diversion of water, clear cutting of trees, dumping of chemicals, misappropriation of state and federal lands, and disruption of sensitive ecosystems are associated with outdoor cultivation, while high carbon emissions are associated with indoor production. In North America, especially with crops grown indoors, part of this environmental impact is driven by the illegality of cannabis cultivation that requires growers to hide crops. Others may choose indoor growing for greater control over crops and higher yields. The high-energy intensive processes associated with controlling all aspects of the indoors growing environment has been estimated to consume 1% of the national electricity use. Whether by regulation or choice, growers should apply GAPs to cannabis cultivation.

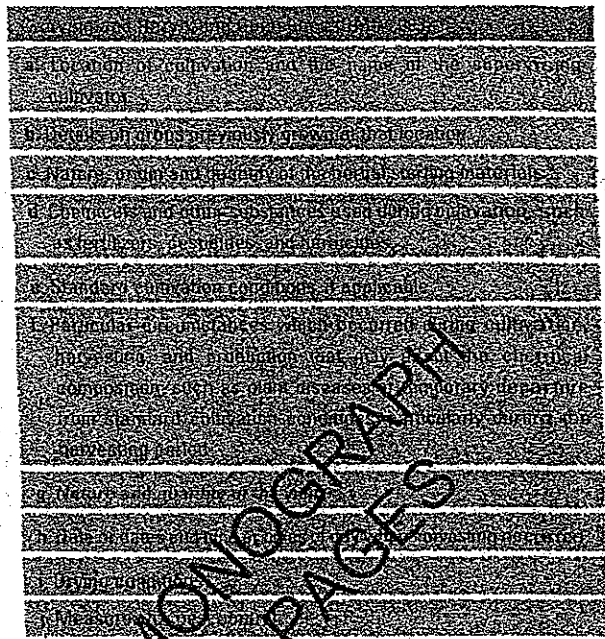
In addition to the impacts of cannabis cultivation the manufacture of butane extracts poses significant risks. A number of explosions and fires associated with butane cannabis extract production have been reported, some that have included injury. Some butane contains compounds that may not be desirable in finished products. Extraction with CO<sub>2</sub> (sub- or super-critical) is preferred by some and is one environmentally safe extracting option.

### Documentation of Supply

For cannabis that is to be used in medicinal preparations, every aspect of cultivation, harvest, processing, and storage should be documented to the fullest extent possible. Various county and state ordinances require adherence to specific regulations that differ between regulations for trade of cannabis among growers, dispensaries, and collectives. The Dutch OMC provides the following guidelines for documentation.

### Security (modified from OMC 2003)

- a. The buildings in which cannabis is cultivated, processed, packaged and stored must be sufficiently secured, only allowing authorized personnel access to the buildings.
- b. Personnel involved in the production process of cannabis must be authorized for that purpose by the employer.
- c. Waste must be stored in such a way that the potential for theft is minimized.



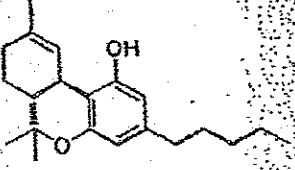
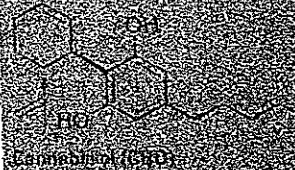
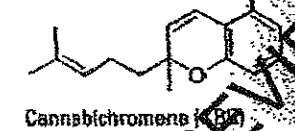
### Suppliers and Dispensaries

Cannabis supplied by dispensaries should be as fully characterized as possible with traceability and a verifiable chain of custody to type of material, whether the plants were cultivated conventionally or organically, or was indoor or outdoor cultivated. Procedures should be implemented to ensure the absence of pesticides and raw material and finished product should be characterized as to its basic chemical profile (e.g., Δ<sup>9</sup>-THC and/or CBD content). This information should be made available to patients upon request. Dispensary personnel should be appropriately trained in how to process and handle cannabis to ensure purity, maintain quality, and to morphologically identify material. The cannabis committee of the American Herbal Products Association (AHPA) has developed a set of draft guidelines outlining recommended practices for dispensaries and cultivators to follow (AHPA 2013a), and Americans for Safe Access (ASA) has developed a industry certification program for dispensaries and cultivators (ASA PFC).

### CONSTITUENTS

To date, more than 750 different secondary metabolites have been identified in cannabis. The diversity of cannabis constituents encompasses numerous phytochemical classes, notably, cannabinoids, and a host of other secondary metabolites. These other compound classes include terpenoids, non-cannabinoid phenols, nitrogenous compounds, as well as other more common plant compounds, all of which are non-psychoactive. Cannabinoids are the most studied

Table 6 Structure and activity of primary phytocannabinoids

 <p><b>Δ<sup>9</sup>-Tetrahydrocannabinol (Δ<sup>9</sup>-THC)</b></p>	<p><b>Primary psychotropic cannabinoid</b>            Activates PPAR-γ and TRPA1 at nano- and micromolar concentrations, respectively (Pertwee 2008).            Analgesic via CB<sub>1</sub> and CB<sub>2</sub> agonism (active at ~20–40 nM) (Rehn and Hohmann 2009).            Antiemetic (Haney et al. 2007; Hollister 1971; Machado et al. 2008).            Anti-inflammatory, antioxidant (Hampson et al. 1998).            Antipruritic, cholestatic jaundice (Neff et al. 2002).            Benefits duodenal ulcers (Douthwaite 1947).            Bronchodilatory (Williams et al. 1976).            Muscle relaxant (Kevic et al. 2010).            Reduces Alzheimer symptoms (Eibanks et al. 2006; Wolf et al. 1997).</p>
 <p><b>Cannabichromene (CBC)</b></p>	<p><b>Non-psychotropic cannabinoid</b>            Analgesic (De Petrocellis et al. 2008; Ligresti et al. 2006).            Antinociceptive (Davis and Hatoun 1983).            Antipruritic (Neff et al. 2002).            Anti-inflammatory, antioxidant (Hampson et al. 1998).            Antimicrobial (Turner and ElSohly 1981).            TRPA1 agonist (De Petrocellis et al. 2008; Ligresti et al. 2006).</p>
 <p><b>Cannabichromene (CBC)</b></p>	<p><b>Non-psychotropic cannabinoid</b>            Analgesic (weak) (Turner et al. 1980b).            Antinociceptive (Davis and Hatoun 1983).            Anti-inflammatory (Davis and Hatoun 1983).            Antimicrobial (Turner and ElSohly 1981).            TRPA1 agonist (De Petrocellis et al. 2008; Ligresti et al. 2006).</p>

### Standards Preparations

Cannabinoid standards are dissolved in methanol at a concentration of 1 mg/mL.

Note: All cannabinoid standards utilized in the development of this method were isolated at the University of Mississippi. There is limited availability of commercially prepared cannabinoid standards.

### Standards Solution Stability

CBD, CBC, and CBN are stable in methanol, both at room temperature and with freezing.  $\Delta^9$ -THC, THCV, and CBC methanolic solutions are stable only when frozen and acid compounds are only stable in a freezer. Due to their instability, acid compounds should be prepared cool and stored and shipped frozen.

### Reagent Preparation

**Fast Blue reagent:** Dissolve 0.5 g Fast Blue B salt (MP Biochemicals, LLS) in 100 mL distilled water.

**Vanillin/H<sub>2</sub>SO<sub>4</sub>:** Dissolve 6 g vanillin in 90 mL ethanol (95%). Add 10 mL of 98% H<sub>2</sub>SO<sub>4</sub>. This reagent is relatively unstable and is best to use fresh each time.

### Chromatographic Conditions

#### Stationary Phase:

C18 (UV 254) TLC plates 150  $\mu$ m, 10 cm  $\times$  10 cm (Sorbent Technologies).

#### Mobile Phase:

75:25 (v/v) methanol/water with 0.1% glacial acetic acid.

#### Sample Application

Apply 5  $\mu$ L of the sample preparations and 2  $\mu$ L of the standards preparations on the plate as 5 mm bands 2 mm apart from each other. The application position should be 15 mm from the lower edge of the plate and at least 15 mm from the left and right edges of the plate. For visualization using both reagents, separate plates should be prepared.

#### Development

Line a flat bottom chamber (1.5 liter, 14 cm  $\times$  8 cm) with a filter paper or chromatography paper. Add a sufficient amount (~25 mL) of the Mobile Phase solution to ensure that the filter paper is covered with at least 5 mm of the solution, and let saturate for 15 min. Measure and mark on the plate the developing distance 60 mm from the application position. Introduce the plate into the chamber, and allow the developing solvent to reach the mark. Remove the plate and dry for 2 min at 70 °C in an oven.

#### Detection

Visualize the plates under UV 254 nm, then spray one set of the plates with the Fast Blue reagent and the other set of plates with the vanillin/H<sub>2</sub>SO<sub>4</sub> reagent, followed by visu-

Table 7 R<sub>f</sub> values for cannabinoid standards

CBC	0.21
$\Delta^9$ -THC	0.26
CBN	0.29
CBG	0.3
CBD	0.40
THCV	0.41
$\Delta^9$ -THCA	0.81
CBDA	0.82

Note: Due to its relatively high concentration in drug type samples,  $\Delta^9$ -THC can overlap with CBN. CBN is a degradation compound of  $\Delta^9$ -THC.

alization under white light. For best identification of the primary cannabinoids, either reagent can be used.

#### Results

See Table 7 and refer to the chromatograms provided (Figure 1, 2, 3).

### High-Performance Liquid Chromatography (HPLC) for the Determination of Major Phytocannabinoids in Cannabis

The LC method was adopted from Swift et al. (2013) and can be used for quantitation of THCA-A,  $\Delta^9$ -THC, CBDA, CBD, CBGA, CBC, and CBN in cannabis preparations. The method was adapted from an earlier method developed by DeBacker et al. (2009), which also quantified  $\Delta^9$ -THC. The original method of DeBacker et al. (2009) was validated for cannabis raw material and fully validated using total error approach in accordance with ISO17025 and the guidelines of the French Society of Pharmaceutical Sciences and Techniques (SFSTP). This modified and optimized method of Swift et al. (2013) was subjected to validation for selectivity, linearity, accuracy, precision, and recovery according to the US Food and Drug Administration (FDA) guidance for bioanalytical method validation (FDA 2001).

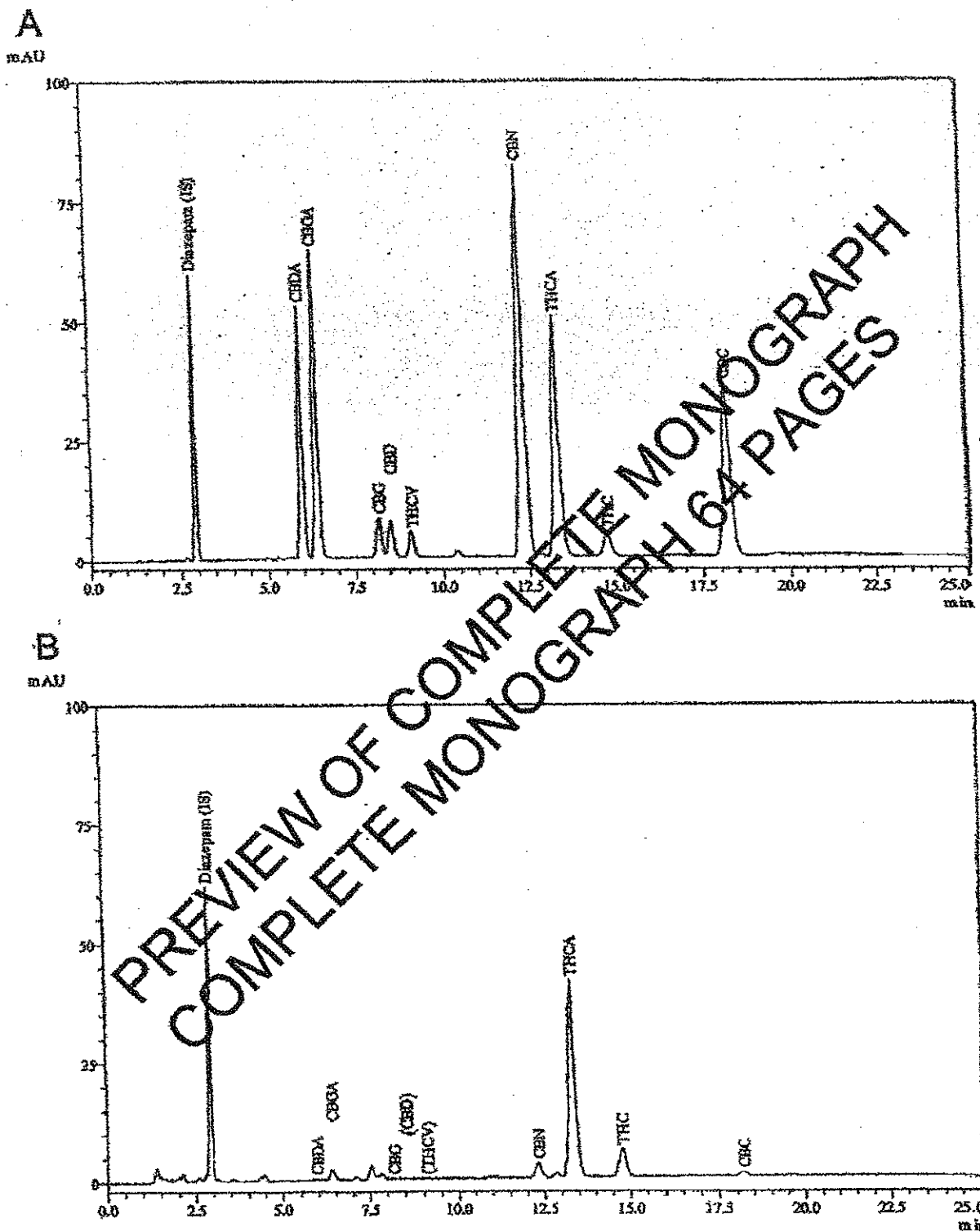
With appropriate modifications in sample preparations, the same chromatography can be used for the analysis of other cannabis materials (i.e. concentrates, extracts, foods). However, the robustness of this chromatography when applied to various matrices requires further validation (e.g., recovery, spiking experiments).

#### Sample Preparation

##### Crude Cannabis

Test samples are dried for 24 h in a 35 °C forced ventilation oven. Dried samples are ground to a fine powder. 200 mg of the sample is weighed in a glass vial and extracted with 10 mL of a mixture of methanol/chloroform (v/v: 9:1)

Figure 18 Representative HPLC chromatograms of cannabinoid standards (A at 11 µg/mL) and cannabis raw material (B)





diode array detector. For routine use, a standard UV detector is suitable.

Run time:

30 min.

Post-run time:

5 min.

Note: CBD and CBG peaks may slightly overlap if present in high concentrations (> 10%).

### Quantitation

Inject each standard preparation and generate a standard curve based on the peak area vs. concentration, as a ratio of standard to internal standard.

Cannabinoid contents in the sample are quantified using the linear equation based on least squares regression for each cannabinoid compound:  $(y = mx + c)$

where:

x = concentration of the individual cannabinoid in the sample (µg/mL);

y = peak area of the individual cannabinoid;

c = calculated y-intercept of the calibration curve;

m = calculated slope of the calibration curve.

Using the concentration from the equation ( $y = mx + c$ ), total content ( $C_{CBCT}$ ) in the sample can be calculated as a sum of the concentrations of the neutral ( $C_{CBN}$ ) and the acidic ( $C_{CBA}$ ) components. A conversion factor of 0.877 is used for adjustment of the molar masses of THCA-A and CBDA; a conversion factor of 0.878 is used for CBGA. Both after decarboxylation. These conversion factors may not apply for other cannabinoids:

$$C_{CBCT} = C_{CBN} + C_{CBA} \times 0.877$$

The individual cannabinoid content in the material is then calculated according to the following equation:

$$W_{CBCT} = \frac{C_{CBCT} \times V_{sample} \times D}{m_{sample} \times 10^6} \times 100\%$$

where:

$W_{CBCT}$  = (total) cannabinoid content in the material (% weight);

$C_{CBCT}$  = (total) cannabinoid content in the sample (µg/mL);

$V_{sample}$  = sample volume (µL);

D = dilution factor;

$m_{sample}$  = sample mass (g).

### Calibration Range

Linear from 2 µg/mL to 100 µg/mL. Extrapolations from this curve should not be made; however, cannabinoid concentrations in samples greater than 100 µg/mL can be appropriately diluted, or the curve can be extended out to 1000 µg/mL (with seven or more points in the curve) to ensure the reading is within the calibration range.

### Gas Chromatography with Flame Ionization Detection (GC-FID) for the Quantitation of Phytocannabinoids

The following GC-FID method is used for the quantitation of the major phytocannabinoids of confiscated cannabis material submitted to the University of Mississippi by the DEA and other United States law enforcement agencies as part of NIDA's Marijuana Policy Monitoring Program (ElSohly et al. 2000; Mehmood et al. 2010). Due to the high temperature of the GC injector port, in situ decarboxylation of the acidic cannabinoids occurs upon injection. This method therefore, quantifies total cannabinoids (acidic and neutral) simultaneously. If quantitation of free (neutral) and acidic compounds is required for a specific cannabinoid, a non-destructive method, e.g., HPLC, or derivatization, e.g., silylation or formation of the alkylboronates, should be employed and validated.

### Sample Preparation

**Crude cannabis and hashish:** To 100 mg of dried, powdered cannabis material with seeds and stems removed, add 3 mL of the internal standard solution (see below on the preparation instructions). Macerate for 1 hour at room temperature. Sonicate for 5 min. Filter the extract into GC vials, and cap the vials.

**Hash oil:** To 100 mg of hash oil, add 4 mL of hash oil extraction solution (see below). Macerate for a minimum of 2 h at room temperature. Sonicate for 5 min. Add 20 mL of absolute ethanol, and sonicate again for 5 min. Filter the extract into GC vials, and cap the vials.

### Internal Standard Preparation (use for extraction of cannabis and hashish)

Dissolve 100 mg of 4-androstene-3,17-dione in 100 mL of 1:9 v/v chloroform/methanol mixture.

**Hash Oil Extraction Solution:** Dissolve 50 mg of 4-androstene-3,17-dione in 50 mL of absolute ethanol.

### Chromatographic Conditions

#### Column:

DB-1: 15 m x 0.25 mm id x 0.25 µm film (J&W Scientific, Inc, US).

Table 10 Pesticides commonly used in cannabis cultivation

Pesticide	Class	Detection Method
Acequinocyl	Insecticide/acaricide	LC/MS/MS <sup>1</sup>
Bifenthrin (synthetic pyrethroid)	Insecticide	GC-ECD <sup>2</sup> ; GC-MS/MS <sup>2</sup>
Cyfluthrin (synthetic pyrethroid)	Insecticide	LC <sup>2</sup> (WHO 2004); GC-MS/MS <sup>2</sup>
Etoxazole	Acaricide	GC-MS/MS <sup>1</sup>
Imazalil	Fungicide	GC-ECD <sup>2</sup> ; LC-MS/MS <sup>2</sup>
Myclobutanil	Fungicide	GC-ECD <sup>2</sup> ; GC-NPD <sup>3</sup> ; GC-MS/MS <sup>2</sup> ; LC-MS/MS <sup>2</sup>
Pyrethrin <sup>4</sup>	Insecticide	GC-ECD <sup>2</sup>
Spiromesifen	Insecticide	GC-MS <sup>2</sup> ; LC-MS/MS <sup>2</sup>
Trifloxystrobin	Fungicide	GC-NPD <sup>3</sup> ; LC-MS/MS <sup>2</sup> ; LC-MS/MS <sup>2</sup>

ECD = Electron capture detector; FLD = Fluorescence detector; GC = Gas chromatography; HPLC = Liquid chromatography; IR = Infrared spectroscopy; MS = Mass spectrometry; NMR = Nuclear magnetic resonance; NPD = Nitrogen phosphorous detector.

<sup>1</sup> Natural pyrethrins are tolerance exempt; synthetic pyrethrins are not.

Analytical Methods (RAM) or those of the Food and Drug Administration (FDA Pesticide Analytical Manual (PAM)), should be employed when appropriate. However, as these tests were developed for commonly food products, the amount of sample needed may be prohibitive to apply to the cannabis industry. Alternatively, the food testing QuEChERS screen uses smaller quantities and may be more applicable to a variety, though not all, of cannabis products (Schoenwald, personal communication to AHP, unreferenced).

In the cannabis industry today, the most commonly used screening technology for organophosphates, organochlorines, carbamates, and ethylenediaminetetraacetic acid (EDTA) are immunoassays (e.g., enzyme-linked immunosorbent assays [ELISA]) and broad spectrum field tests that may or may not be validated for use on cannabis. Similarly, immunoassays for a broad range of PGRs and fungicides commonly used in cannabis cultivation are not available. Because of their relative inexpense, immunoassays are routinely used by analytical labs specializing in cannabis testing and are at high risk of not detecting pesticide residues and reporting samples to be "pesticide-free" or "non-detected".

Before commercial use, any immunoassay should be validated against a standard testing methodology.

Table 10 provides a list of the most common pesticides (including acaricide, insecticides, fungicides, and plant growth regulators) used in cannabis production.

#### Solvent Residues

Limits on solvents used in the manufacture of botanical products are established by the International Conference on Harmonization (ICH) (ICH 2011), with exceptions made for ethanol and acetic acid in products formulated to contain these substances (e.g., tinctures and vinegars). According to the ICH guideline, solvents are categorized in three classes. Class 1 includes known carcinogens, toxic substances, and environmental hazards such as benzene, carbon tetrachloride, 1,2-dichloroethane, 1,1-dichloroethene, and 1,1,1-trichloroethane. These are to be avoided in the manufacture of herbal and/or pharmaceutical products. Class 2 and 3 solvents (Table 12) are distinguished based on their relative toxicity level. Limits established for permissible daily exposures (PDE) are determined individually for Class 2 solvents. Limits for Class 3 solvents are set at a

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September 6, 2012

Neil Allard

Nanaimo, B.C.

This is Exhibit "P" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Aug 2014

A Commissioner for taking Affidavits  
for British Columbia

**ALBERT E. KING, Q.C.**  
*Barrister & Solicitor*  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

To: Health Canada, ( M.M.A.D.)

Dear Sir /Madam,

I am enclosing an amendment for my change of production site, as well as an increase in dosage. I am in my ninth year of licenced growing. The herbs are very effective but the quantity of my production is too low due to the restricted number of plants I am allowed.

I am growing organically with very minimal yields, nowhere near ten grams per day. I have had problems with clones not rooting; plants stressed by heat, cold, and insects, and plant sickness, just to mention a few problems. Unfortunately, I have not always been able to give due care and attention to my plants because of my own health problems, the cramped production site, and a previously unsuitable home and living situation.

However, I have had a new properly built production site and I am in a home modified for a disabled person. The new production site and home will allow me to continue growing for my own needs.

I need an increase in plant numbers to allow for larger yields and to give me the flexibility to take time off and rest in between flowering my the plants. This will allow me to manage my vegetative plants more easily and also allow me to plan and pace myself with the gardening, as I must do in all other aspects of my life.

Sincerely,

Neil Allard

cc: Dr. J. Mander

cc: Jean Crowder, Member of Parliament

- increase in dosage

**B2-1 Information on Medical Practitioner**

Medical practitioner's full name: DR. JATINDER S. MANDER

Provincial medical licence number: 27166

**DR. J.S. MANDER**  
THE MEDICAL ARTS CENTRE  
30-650 SOUTH TERMINAL AVENUE  
NANAIMO, BC, V9R 5E2  
(250) 753-3431

Medical specialization (if applicable): FAMILY PRACTICE

Business Address: 103-650 TERMINAL AVE. Suite Number: \_\_\_\_\_

City: NANAIMO Province: B.C. Postal Code: V9R 5E2

Telephone: (250) 741-0447

Fax: ( )

E-mail: \_\_\_\_\_

**B2-2 Medical Condition(s) and Symptom(s)**

Applicant's full name: ALLARD I NEIL I VICTOR

Date of Birth: 1 1

Please specify the medical condition(s) and symptom(s) that are the basis for the application.

Medical Condition(s): myalgic encephalomyelitis

Symptoms: Dr. Allard experiences intolerable side effects with most analgesic medications. Medical marijuana (cannabis) is an effective treatment for his numerous symptoms. These symptoms include muscle and joint pain, nausea, digestive problems, poor appetite, mood and sleep difficulties, fatigue, headaches, and tinnitus. These symptoms are chronic.

Note: You may wish to provide any information that you might consider useful or pertinent for the review of the application.

**ALBERT E. KING, Q.C.**  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123

This is Exhibit "A" referred to in  
the affidavit of Neil Allard  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of January  
Alley  
\* Commissioner for taking Affidavits

### B2-3 The Proposed Daily Amount

a. The proposed daily amount of dried marijuana is less than or equal to TWENTY grams.

*MLC* 06/09/11

b. The following method and form of administration (please check appropriate box):

Inhalation  Oral uses a vaporizer, tea, baked goods

Note to Physicians: For more information on daily amounts, you can refer to the following documents:

- Information for Health Care Professionals—Marijuana
- Daily Amount Fact Sheet

Both documents can be found on the Health Canada web site at [www.hc-sc.gc.ca/necs-secs/ocma/index.htm](http://www.hc-sc.gc.ca/necs-secs/ocma/index.htm) or by calling toll free at 1-866-337-7705.

### B2-4 Duration

Under the Marijuana Medical Access Regulations, an Authorization to Possess may be issued for a period of up to 12 months.

If you are signing the authorization for a shorter period, please specify the number of months:

### B2-5 Medical Practitioner's Declaration and Signature

Please read, sign and date the document in the space provided on Page 3.

- a. the applicant's symptom(s) listed in Page 1 of this form falls under Category 2 (symptoms that do not fall under Category 1);  
b. conventional treatment(s) for the Category 2 symptom(s) have been tried or considered, and have been found to be ineffective or medically inappropriate for the treatment of the applicant.
- I am aware that a Notice of Compliance has not been issued under the Food and Drugs Regulations concerning the safety and effectiveness of marijuana as a drug.
- a. if you are a medical specialist that your area of medical specialization is relevant to the treatment of the applicant's medical condition; or  
b. if you are not a medical specialist, please declare:
  - that the applicant's case has been assessed by a specialist;
  - the specialist's area of specialization is relevant to the treatment of the applicant's medical condition;
  - that the specialist concurs that conventional treatments for the symptom are ineffective or medically inappropriate for the treatment of the applicant; and
  - the specialist is aware that marijuana is being considered as an alternative treatment for the applicant.

(signature required on next page)

Name:

NEIL ALLARD

(B2-5 continued)

Please complete the following:

Name of the medical specialist: DR. KARL MUEWDELL

The medical specialist's area of specialization: ANESTHESIOLOGY

Date of the specialist's assessment of the applicant's case: JUNE 11, 2012

Note: Under the Marijuana Medical Access Regulations, a "practitioner" is a practitioner who is recognized as a practitioner by the medical licensing authority of the province in which the practitioner is authorized to practice medicine and who is not named in a notice given under Section 58 or 59 of the Narcotic Control Regulations.

4. I declare that the information contained in this form is correct and complete.

[Signature]  
MEDICAL PRACTITIONER'S SIGNATURE

DR. J.S. WANDER  
THE MEDICAL ARTS CENTRE  
30-650 SOUTH TERMINAL AVENUE  
NANAIMO, BC, V9R 5E2  
(250) 753-3431

PRINT NAME  
06/09/2012

DATE

**IMPORTANT:**

1. Please ensure that you have read and understood the declarations.
  2. Please sign and date the declarations.
  3. It is important to understand that all mandatory information requested must be provided to avoid unnecessary delays.
  4. We cannot process the application until ALL appropriate forms are received.
  5. Please retain a photocopy of this form for your files.
- If you have questions regarding this form, please contact Health Canada toll-free at 1-866-337-7705.

Name: NEIL ALLARD

**AUTHORIZATION TO POSSESS  
DRIED MARIJUANA FOR MEDICAL PURPOSES**

You have met the requirements to possess an authorized quantity of dried marijuana for medical purposes under the *Medical Access Regulations* (M.A.R.). You are hereby authorized to possess dried marijuana for your medical purposes and conditions until the authorization and licence expire. You must obtain your authorized quantity of dried marijuana for medical purposes. You should have this document with you at all times when you are in possession of the substance in cash and are required to show it to a law enforcement officer.

**HOLDER OF AUTHORIZATION INFORMATION**

NAME: Neil Nihar Alford      DATE OF BIRTH: 23 May 1954

ADDRESS: [Redacted]      COUNTRY: India

Canada

MAILING ADDRESS: 12 Haddon Ave, Nanaimo, BC, V9R 4G6, Canada

AUTHORIZATION #: APPL NVA-05-A00521022-54-13-A

**PERIOD OF POSSESSION**

The maximum quantity of dried marijuana that you may possess at any time under this authorization to Possess is: 600 grams.

**MEDICAL PRACTITIONER INFORMATION**

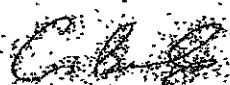
NAME: Dr. Jatinder Singh Mander

**VALIDITY DATE: 15 July 2013**

The date shown as the validity date represents the last day that you may use this licence to obtain medical marijuana from a licensed producer.

**EXPIRY DATE**

The expiry date for your licence is March 31, 2014. At that time this no longer provides you with authorization to possess marijuana; however, until the validity date noted above, you may use this licence to register with a Licensed Producer to purchase marijuana for medical purposes. The documents you receive from your licensed producer may be used as proof that you are authorized to possess dried marijuana for medical purposes.

ISSUED BY: 

DATE OF ISSUE: 15-Jul-2013

Neil Alford  
Commissioner for Taking Affidavits  
for British Columbia  
Health Services - Family Services

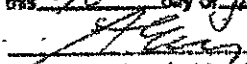
PLEASE READ ALL ENCLOSED DOCUMENTS.

ENCLOSED DOCUMENTS:

Information you should know about your  
Authorization to Possess dried marijuana  
and / or Licence to Produce.

c.c.: Dr. Jatinder Singh Mander

This is Exhibit "R" referred to by  
the affidavit of Neil Alford  
sworn before me at Nanaimo BC  
this 10<sup>th</sup> day of Jan 2013



A Commissioner for Taking Affidavits  
for British Columbia

All inquiries regarding this authorization should be directed to the Marijuana Medical Access Program toll-free number: 1-866-337-7705.



**ALBERT E. KING, Q.C.**  
Barrister & Solicitor  
155 Commercial Street  
Nanaimo, BC V9R 5G5  
753-6617 FAX 753-6123



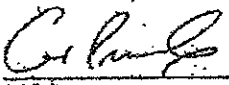
Address Locator: 0300A  
Ottawa ON K1A 1B9

MMAD-1792-13  
Client ID: 23

**PERSONAL - USE PRODUCTION LICENCE  
DRIED MARIJUANA FOR MEDICAL PURPOSES**

You have met the requirements to be issued a licence pursuant to section 29 of the *Marijuana Medical Access Regulations* (MMAR). You are hereby licensed to produce dried marijuana for your medical purpose in accordance with your licence. This document serves as proof of your authority to produce marijuana for a medical purpose. You should have this document with you at all times in case you are required to show proof to the police.

HOLDER OF LICENCE INFORMATION	
NAME:	Neil Victor Allard
DATE OF BIRTH:	25-May-1954
ADDRESS:	[REDACTED] Canada
GENDER:	Male
MAILING ADDRESS: 712 Hastings Ave., Nanaimo, BC, V9R 4G6, Canada	
LICENCE #:	APPL-NVA-05-A00921622-54-13-A
TERMS AND CONDITIONS	
PRODUCTION SITE:	[REDACTED]
MODE OF PRODUCTION:	Indoor
PRODUCTION QUANTITIES:	The maximum number of marijuana plants that you may have under production at the production site at any time under this <i>Personal-Use Production Licence</i> is <b>98 PLANTS (Indoor) or 9 PLANTS (outdoor)</b> .
STORAGE SITE:	[REDACTED]
STORAGE QUANTITIES:	The maximum quantity of dried marijuana that you may keep at the storage site at any time under this <i>Personal-Use Production Licence</i> is: <b>4410 grams and it must be stored indoors.</b>
EXPIRY DATE	
This <i>Personal-Use Production Licence</i> expires on: <b>31-Mar-2014</b>	

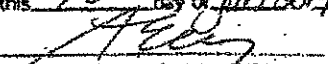
ISSUED BY:		DATE OF ISSUE:	15-Jul-2013
<small>                 Lead Clerk                  1-800-387-5829                  1-800-387-5829 (toll-free)                  1-800-387-5829 (toll-free)                  1-800-387-5829 (toll-free)                  1-800-387-5829 (toll-free)                  1-800-387-5829 (toll-free)             </small>			

PLEASE READ ALL ENCLOSED DOCUMENTS

ENCLOSED DOCUMENTS: Information you should know about your *Authorization to Possess* dried marijuana and / or *Licence to Produce*

All inquiries regarding this licence should be directed to the Marijuana Medical Access Program toll-free number: 1-866-337-7705.



This is Exhibit 3  
 the affidavit of Neil Allard  
 sworn before me at Nanaimo, BC  
 this 10<sup>th</sup> day of Jan 2014  
  
 A Commissioner for Taking Affidavits  
 for British Columbia

ALBERT E. KING, O.C.  
 Barrister & Solicitor  
 155 Commercial Street  
 Nanaimo, BC V9R 5G5  
 753-6617 FAX 753-6123



*1st application*  
*May 10 04*  
*list of med's*

**B3-1**

## Application for Authorization to Possess Dried Marihuana Category 3 – First Medical Specialist Form

(To be completed by first specialist. Under the *Marihuana Medical Access Regulations*, a "specialist" means a medical practitioner who is recognized as a specialist by the medical licensing authority of the province in which the practitioner is authorized to practice medicine.)

Part 1 – Information on First Medical Specialist			
Last Name: <b>CARRUTHERS</b>		STAMP (if available)	
First Name: <b>BRUCE</b>	Initial: <b>M.</b>		
Provincial Medical Licence no.: <b>00539</b>		Medical Specialization: <b>Internal Medicine</b>	
Business Address (Number and Street): <b>7840 Lochside Dr</b>			Suite Number (if any): <b>308</b>
City/Town: <b>Saanichton BC</b>	Province: <b>BC</b>	Postal Code: <b>V8M 2B9</b>	
Telephone: <b>(604) 652 6663</b>	Fax (if any): <b>( ) same</b>	E-mail Address (if any):	

Part 2 – Medical Condition, Symptom(s) and Conventional Treatments Tried or Considered									
Applicant (i.e., patient) Name: <b>NEIL V. ALLARD</b>					Name of Medical Condition: <b>myalgic encephalomyelitis / chronic fatigue syndrome</b>				
<p><b>REASONS</b> – For each conventional treatment listed in the "Treatments" column, please provide the reasons why you consider that the treatment is medically inappropriate. (CHECK OFF THE APPROPRIATE BOX BELOW)</p>									
SYMPTOM(S)	TREATMENTS	The treatment was ineffective	The applicant has experienced an allergic reaction to the drug used as a treatment	There is a risk that the applicant would experience cross-sensitivity to a drug of that class	The applicant has experienced an adverse drug reaction to the drug used as a treatment	There is a risk that the applicant would experience an adverse drug reaction based on a previous adverse drug reaction to a drug of the same class	The drug used as a treatment has resulted in an undesirable interaction with another medication being used by the applicant, or there is a risk that this would occur	The drug used as a treatment is contraindicated	The drug under consideration as a treatment has a similar chemical structure and pharmacological activity to a drug that has been ineffective for the applicant
<b>headaches</b>	<b>IMITREX</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>headaches, depression, joint pain</b>	<b>CODEINE</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>depression &amp; fatigue</b>	<b>PAXIL</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>joint, sleep</b>	<b>AMITRIPTILINE</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Health Canada Form Number: \_\_\_\_\_

the affidavit of **Neil Allard**  
sworn before me at **Ames BC**  
this **13** day of **Aug 2004**



**B3-1**

Applicant (i.e., patient) Name: \_\_\_\_\_ Name of Medical Condition: \_\_\_\_\_

SYMPTOM(S)	TREATMENTS	REASONS -- For each conventional treatment listed in the "Treatments" column, please provide the reasons why you consider that the treatment is medically inappropriate. (CHECK OFF THE APPROPRIATE BOX BELOW)							
		The treatment was ineffective.	The applicant has experienced an allergic reaction to the drug used as a treatment.	There is a risk that the applicant would experience cross-sensitivity to a drug of that class.	The applicant has experienced an adverse drug reaction to the drug used as a treatment.	There is a risk that the applicant would experience an adverse drug reaction based on a previous adverse drug reaction to a drug of the same class.	The drug used as a treatment has resulted in an undesirable interaction with another medication being used by the applicant, or there is a risk that this would occur.	The drug used as a treatment is contraindicated.	The drug under consideration as a treatment has a similar chemical structure and pharmacological activity to a drug that has been ineffective for the applicant.
depression, pain, sleep disorders, anxiety, nervous system problems	NORTRIPTILINE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
depression, energy	ATIVAN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
depression, energy, muscle & back pain	ZOLOFT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
muscle & back pain, nervous system overload	NEURONTIN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
muscle & back pain, nervous system overload	TOPIRAMATE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panic attacks, fear, nervous system	PROPRANOLOL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sleep	RHOVANE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
muscle & joint pain	FLEXIRIL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
energy	SYNTHROID	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
panic, sleep, depression	SURMONTIL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
anxiety, depression, panic, nervous	PROZAC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
back pain	ROBAXACET	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
headaches, pressure in head	SIBELIUM	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
abdominal pain, indigestion, bloating	DICETEL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
abdominal bloating, depression, sleep, panic	MODULON	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
depression, sleep, panic	NEFAZODONE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
depression, cognitive problems	WELLBUTRIN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sleep aid, cognitive problems	DEPHENHYDRAAMINE HYDROCHLORIDE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cognitive problems, depression	EFFEXER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
nausea, pain, appetite stimulant	CESMAT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
headaches	SIBELIUM	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**Part 3 – Medical Declaration Statements by First Specialist**

My area of medical specialization is relevant to the treatment of the applicant's medical condition.  
In my medical opinion:

- a. the applicant's symptom(s) listed in Part 2 of this form falls under Category 3 (symptoms that do not fall under either category 1 or 2, where a second specialist, in consultation with you, is prepared to provide a declaration indicating his or her agreement with your opinion regarding the statements in subparagraphs c and d below);
- b. all conventional treatment(s) for the Category 3 symptom(s) have been tried or considered, and each is medically inappropriate for one or more of the following reasons:
  - i. The treatment was ineffective.
  - ii. The applicant has experienced an allergic reaction to the drug used as a treatment.
  - iii. There is a risk that the applicant would experience cross-sensitivity to a drug of that class.
  - iv. The applicant has experienced an adverse drug reaction to the drug used as a treatment.
  - v. There is a risk that the applicant would experience an adverse drug reaction based on a previous adverse drug reaction to a drug of the same class.
  - vi. The drug used as a treatment has resulted in an undesirable interaction with another medication being used by the applicant, or there is a risk that this will occur.
  - vii. The drug used as a treatment is contra-indicated.
  - viii. The drug under consideration as a treatment has a similar chemical structure and pharmacological activity to a drug that has been ineffective for the applicant.
- c. the recommended use of marijuana would mitigate the symptom(s); and
- d. the benefits to the applicant from the recommended use of marijuana would outweigh any risks associated with that use, including risks associated with the long-term use of marijuana.

I am aware that no notice of compliance has been issued under the *Food and Drugs Regulations* concerning the safety and effectiveness of marijuana as a drug.

I have read Part 3 and agree



B3-1

**Part 4 - Proposed Marijuana Treatment**

1. I recommend:

a. a daily dosage of dried marijuana of FIVE grams (if more than 5g, you must complete section 2 below); and

b. the following route and form of administration:

• Inhalation:  cigarette     vaporizer     Other, Specify:

• Oral:  tea     food product     Other, Specify:

• Other, Specify:

2. If the recommended daily dosage is greater than 5 grams, I declare that:

a. I have considered the risks associated with an elevated daily dosage of marijuana, including risks with respect to the effect on the applicant's cardio-vascular, pulmonary and immune systems and psychomotor performance, as well as potential drug dependency; and

b. In my medical opinion, the benefits from the applicant's use of marijuana according to the recommended daily dosage would outweigh the risks associated with that dosage, including risks associated with the long-term use of marijuana.

I have read Part 4, section 2 and agree

**Part 5 - Duration**

Under the *Marijuana Medical Access Regulations*, an *Authorization to Possess* may be issued for a period of up to 12 months. If you are recommending that the *Authorization* be issued for a shorter period, please specify the number of months:

**Part 6 - Attestation and Signature**

I attest that the information contained in this form is correct and complete.

First Medical Specialist's Signature:

Date:



# 2014 PROPERTY TAX NOTICE

DUE DATE: July 2, 2014



28222

5% PENALTY - END OF DAY JULY 2, 2014  
 5% PENALTY - END OF DAY AUGUST 14, 2014  
 PENALTIES WILL BE APPLIED TO UNPAID TAXES OR UNCLAIMED GRANT

FINANCE DEPARTMENT  
 Service and Resource Centre: 411 Dunsmuir Street  
 Mail to: 455 Wallace Street, Nanaimo BC V9R 5J6  
 Tel: 250-755-4415 • Email: property.info@nanaimo.ca  
 www.nanaimo.ca

This is Exhibit C returned to me  
 the affidavit of Neil Allard  
 ALLARD NEIL VICTOR RENE  
 712 HAMILTON AVENUE  
 NANAIMO BC V9R 4G6 on before me at Nanaimo BC

this 13 day of Aug 2014

A Commissioner for taking Affidavits  
 for British Columbia

LEGAL DESCRIPTION  
 LOT 3, BLK 7, SEC 1, PL 1352, LD 32

CLASS	TOTAL NET ASSESSED VALUES FOR TAXATION PURPOSES		
	GENERAL	SCHOOL	HOSPITAL
1 - Res	241,300	241,300	241,300

ACCOUNT/FOLIO	17716.000	ACCESS CODE	624334
PROPERTY ADDRESS	[REDACTED]		
PID	007-552-777	RATES	

A - NOT ELIGIBLE FOR GRANT	B - BASIC GRANT UNDER AGE 65	C - SENIOR/ADD AGE 65+ OR OTH
----------------------------	------------------------------	-------------------------------

STATEMENT DATE: MAY 12, 2014				
<b>SCHOOL TAXES COLLECTED ON BEHALF OF PROVINCE OF BC</b>				
SCHOOL	250-387-0555	2,33490	563.41	56.41
Less: Home Owner Grant				(563.41)
<b>NET BASIC SCHOOL TAXES</b>			<b>563.41</b>	<b>0.00</b>
<b>LEVIES COLLECTED ON BEHALF OF OTHER AGENCIES</b>				
B C ASSESSMENT	1-866-825-8322	0.06190	14.94	1.49
MUNICIPAL FINANCE AUTHORITY	250-383-1181 (x4763)	0.00020	0.05	0.05
REGIONAL DISTRICT GENERAL	250-390-4111	0.54190	130.75	13.07
REGIONAL DISTRICT PARKS		0.03980	9.60	0.96
REGIONAL DISTRICT SEWER BENEFITTING AREA		0.33260	80.26	8.03
REGIONAL HOSPITAL DISTRICT		0.22560	54.44	5.44
REGIONAL PARKS & TRAILS PARCEL TAX		13.00000	13.00	1.30
<b>NET OTHER GOVERNMENT TAXES</b>			<b>303.04</b>	<b>30.30</b>
<b>TAXES LEVIED BY CITY OF NANAIMO</b>				
CITY GENERAL			1,375.46	137.55
VANCOUVER ISLAND REGIONAL LIBRARY			56.97	5.70
Less: Residual Home Owner Grant				(206.59)
<b>NET MUNICIPAL TAXES</b>			<b>1,432.43</b>	<b>143.25</b>
<b>TOTAL NEW TAX LEVIES</b>			<b>2,298.88</b>	<b>229.88</b>
Tax Prepayments/Adjustments			0.00	0.00
<b>TOTAL TAXES DUE</b>			<b>2,298.88</b>	<b>1,528.88</b>

PAID 5-70020  
 JUN 25 2014  
 EW Debit  
 0.23610

NOTES: The N&R Home Owner Grant must be claimed by the tax due date to avoid a penalty. The grant can be claimed without payment of taxes. Post marks will not be considered as date of payment. No exceptions.

You are not currently enrolled in the Tax Installment Plan. If you were to enroll, your estimated monthly payment amount for next year's taxes would be \$135.00.

CLAIM YOUR \*NORTHERN AND RURAL HOME OWNER GRANT ONLINE - [www.nanaimo.ca/goto/f](http://www.nanaimo.ca/goto/f)

Customer Copy

AMOUNT DUE JULY 2, 2014

A - NO GRANT	B - BASIC GRANT	C - ADD'L GRA
\$2,298.88	\$1,528.88	\$1,253.88

DETACH HERE

# HOME VALUATION GUIDE

This is Exhibit "B" referred to in

the affidavit of Neil Allard

For: Neil Allard  
 [Redacted]  
 Nanaimo BC  
 [Redacted]

sworn before me at Nanaimo BC  
 this 13 day of Aug 2013

Reference: V20643- HAM  
 Printed on: December 14, 2013  
 Cost Factors: December 01, 2013

# InsuranceCentres

Vancouver Island

Legal Description: [Redacted] BC V99 4G5  
 for British Columbia

### Construction:

Year Built	1958	Exterior Walls:	Stucco	100%	Interior Height:	8 Foot	100%	Interior Flooring:	Carpet or Vinyl	90%
Unit of Measure	Sq. Feet			0%			0%		Hardwood Solid	10%
Type of Building	Detached			0%			0%			0%
Property Access	Standard Urban Lot									
Number of Stories	1 Storey									
Foundation Type	Basement									
Architect Designed	No									
Debris Removal	Included									

### Features:

All Full Baths	1	
Half Baths		
Extra Shower		
Extra Fixtures		
Extra Kitchens		
Firepl-Insert-Stove-1	1	Woodstove
Firepl-Insert-Stove-2		None
Firepl-Insert-Stove-3		None
Roof Material		Asphalt
Air Conditioning area		None
Inside Sprinkler area		
Garage 1		One Car Carport
Garage 2		None
Pool		None
Other:	No other features declared	

### Areas:

Dwelling Area	970	
Unfinished Living	0	
Finished Attic	0	None
Finished Bsmnt	0	None
Unfinished Bsmnt	970	
Bonus Room	0	None
3-Wall Addn	0	None
Deck-Porch-Patio-1	300	Deck, Wood
Deck-Porch-Patio-2	0	None
Deck-Porch-Patio-3	0	None
Sunroom	0	
Breezeway	0	None

### Built-in Features: (Quantity indicated where applicable)

- Central Vacuum
- Counter Top Range
- Dishwasher
- Electronic Airfilter
- Garage Door Opener
- Heat Exchange (HVAC)
- Hot Tub (Built-in)
- Microwave Oven
- Oven
- Secur or Fire Alarm
- Skylight
- Smoke Detector
- Water Softener/Purif

EvalWorks Estimated Replacement Cost: 279,000

Present Amount of Insurance: 279,000

### Additional Underwriting Information

House Age	55	Birth Date Year	1954
Dwelling Type	SINGLE DW	Construction	FRAME
Heated by	GAS	Occupancy	OWNER OCC
Territory	205-NANAIMO	Hydrant/Fire	300M/13KM
Comment			

NOTE: This valuation should be used as a guideline only. For a more accurate value a qualified appraisal firm should be consulted.

Please review the above information and advise us of any changes that should be made to correctly describe the construction and features of your home.

Thank you for taking a few moments to look over this information. If you have any questions please do not hesitate to give us a call.

**Sovereign General Insurance Co**

**DECLARATIONS**

**InsuranceCentres**  
**Vancouver Island**  
 We'll take care of it

NAMED INSURED AND POSTAL ADDRESS	CLIENT REF.	PREVIOUS NO.	POLICY NO.
	V20643	CVGC04567	CVGC04567
	INSURANCE PERIOD FROM: 06/03/2014 TO: 06/03/2015		BOTH DAYS AT 12:01 A STANDARD TIME AT THE ADDRESS OF THE INSURED.
PURPOSE OF THIS DOCUMENT			PAGE
Renewal Declaration			1
AGENCY #			6163

Neil Allard

Nanaimo BC

LOCATION	DESCRIPTION OF INSURED PREMISES
1.	Nanaimo BC V9R 4G6
2.	
3.	

LOC.	CONSTRUCTION	DWELLING TYPE	OCCUPANCY	YEAR	FUEL	TERRITORY	HYDRANT (METERS/FEET) (MTR/FT)
1.	FRAME	SINGLE DW	OWNER OCC	1958	GAS	205	300M/13KM
2.							
3.							

LOSS, IF ANY, ON BUILDING(S) ONLY, PAYABLE AS FOLLOWS ( IN THE ABSENCE OF ANY ENTRY, LOSS WILL BE PAYABLE TO THE INSURED ) AS PER STANDARD MORTGAGE CLAUSE:  
 Insured

INSURANCE IS PROVIDED ONLY FOR THOSE COVERAGES LISTED BELOW FOR WHICH A SPECIFIC LIMIT OF INSURANCE OR PREMIUM IS INDICATED.

PRINCIPAL RESIDENCE (LOCATION/1)	LIMITS OF INSURANCE	PREMIUM
FORM VIIRI 07 TYPE RESIDENTIAL INSURANCE	SECTION 1 DEDUCTIBLE 1000	
	SECTION 2	
A DWELLING FIRE LOSS	B DETACHED GARAGE STRUCTURES	C UNINSURED PROPERTY
279,000	27,900	223,200
	D ADDITIONAL EQUIPMENT	E COMPREHENSIVE PERSONAL LIABILITY
	55,800	2,000,000
		F VOLUNTARY MEDICAL PAYMENTS
		5,000
		G VOLUNTARY PROPERTY DAMAGE
		1,000
COMPREHENSIVE PERSONAL LIABILITY INSURANCE UNDER SECTION 2 IS EXTENDED TO INCLUDE THE FOLLOWING ADDITIONAL HAZARDS:		350

LOC.	FORM	DEDUCTIBLE	ADDITIONAL COVERAGE(S) / CONDITION(S)	LIMITS
1			MATURE OWNER 60+ DISCOUNT	INCL
1			CLAIMS FREE DISCOUNT	INCL
1			MORTGAGE FREE DISCOUNT	INCL
1			LOYAL CLIENT DISCOUNT	INCL
1		1000	REPLACEMENT COST ON CONTENTS	INCL
1			INFLATION PROTECTION	INCL
1			CREDIT CARD ENDORSEMENT	10,000 INCL
1			FOOD FREEZER RIDER	5,000 INCL
1		1000	WATER ESCAPE ENDORSEMENT	INCL
1		1000	IMPROVED BLDG LOSS SETTLEMENT	INCL
1		1000	GLOBAL LIMIT ENDORSEMENT	INCL
1			LIMITED BY-LAW ENDORSEMENT	30,000 INCL
1		1000	IDENTITY THEFT ENDORSEMENT	INCL

The insured is requested to read this policy, and if incorrect, return it immediately for alteration. In the event of an occurrence likely to result in a claim under this insurance, immediate notice should be given to the insurer(s) or Broker, whose name and address appear above. All inquiries and disputes are also to be addressed to the insurer(s) or Broker. Head Office: 601 - 6800 Turner Road, Nanaimo, B.C., V9T 6J4

Minimum Retained Premium \$50

PER: <i>[Signature]</i>	OP: HAM-HC1	PREMIUM ADJUSTMENT (CIC - REFUND) ****	PREMIUM \$350
	TD: 2013/12/14		

**THIS DOCUMENT CONTAINS A CLAUSE WHICH MAY LIMIT THE AMOUNT PAYABLE**



**STATEMENT OF USER RATES**

ACCT NUMBER: 119909 BILLING PERIOD: Jun 11, 2013  
 ACCESS CODE: 159442 TO: Sep 27, 2013  
 DUE DATE: Nov 5, 2013 BILLING DATE: Oct 7, 2013



NAME: ALLARD NEIL VICTOR RENE  
 FOR SERVICE AT: ~~██████████~~  
 ACCOUNT TYPE: RESIDENTIAL-SFD

ROUTE: 1702

DATE	METER NO.	NO. OF DAYS	CURRENT READING	PREV. READING	CONSUMPTION	AMOUNT
Sep 27, 2013	A-68648550	109	274	229	45 CU METERS / 9900 GALLONS	138.32
					PREVIOUS BILL AMOUNT	138.32
Jun 24, 2013					PAYMENT	-131.40
					DISCOUNT	-6.92
Oct 7, 2013					WATER-METERED (A)	62.62
Oct 7, 2013					SEWER-SINGLE FAMILY RESIDENCE (A)	30.41
Oct 7, 2013					GARBAGE-CITY (A)	37.55
					IF PAID AFTER DUE DATE:	130.58
					DISCOUNT AVAILABLE:	6.53
					IF PAID ON OR BEFORE DUE DATE:	124.05

PLEASE NOTE: IF ANY PORTION OF THIS BILL IS OUTSTANDING AS OF DECEMBER 31, 2013, IT WILL BE TRANSFERRED TO YOUR PROPERTY TAX ARREARS ACCOUNT AND WILL INCUR DAILY INTEREST UNTIL IT IS PAID IN FULL.  
 Please disregard this message if you are currently on the Equal Payment Installment plan or the Auto-Debit Plan.

This is Exhibit "E" returned to me  
 the affidavit of Neil Allard  
 sworn before me at NANAIMO BC  
 this 13 day of Aug 2014  
  
 A Commissioner for Inland Affairs BC  
 for British Columbia

PAYABLE AT MOST FINANCIAL INSTITUTIONS  
 Make cheques payable to: City of Nanaimo

BILLING DATE: Oct 7, 2013  
 ACCT NUMBER: 119909  
 DUE DATE: Nov 5, 2013

IF PAID AFTER DUE DATE: \$130.58  
 IF PAID ON OR BEFORE DUE DATE: \$124.05

AMOUNT PAID

FOR SERVICE AT: 712 HAMILTON AVENUE



ALLARD NEIL VICTOR RENE  
~~██████████~~  
 NANAIMO BC ~~██████████~~

- MAIL
- CHEQUE
- CASH
- DEBIT CARD

DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

*pl. Oct 20 2013*



# STATEMENT OF USER RATES

ACCT NUMBER: 119909 BILLING PERIOD: Sep 28, 2013  
 ACCESS CODE: 159442 TO: Feb 19, 2014  
 DUE DATE: Mar 25, 2014 BILLING DATE: Mar 4, 2014



NAME: ALLARD NEIL VICTOR RENE  
 FOR SERVICE AT: [REDACTED]  
 ACCOUNT TYPE: RESIDENTIAL-SFD

ROUTE: 1702

DATE	METER NO.	NO. OF DAYS	CURRENT READING	PREV READING	CONSUMPTION	AMOUNT
Feb 18, 2014	A-68648550	144	303	274	29 CU METERS / 6380 GALLONS	
					PREVIOUS BILL AMOUNT	130.58
Oct 20, 2013					PAYMENT	-124.05
					DISCOUNT	-6.53
Mar 4, 2014					WATER-METERED (A)	77.90
Mar 4, 2014					SEWER-SINGLE FAMILY RESIDENCE (A)	40.86
Mar 4, 2014					GARBAGE-CITY (A)	49.98
					IF PAID AFTER DUE DATE:	168.74
					DISCOUNT AVAILABLE:	8.44
					IF PAID ON OR BEFORE DUE DATE:	160.30

REMINDER: Please retain user rate bills for income tax purposes, if applicable.

Are you aware you can now receive your User Rate and Property Tax statements via email? Register for "MyBills" today at [mycity.nanaimo.ca](http://mycity.nanaimo.ca) and enjoy the convenience of having your statements sent directly to your inbox.

*pd. March 27  
(Sunday)*



Service and Resource Centre: 411 Dunsmuir Street  
 Mail: 455 Wallace Street, Nanaimo, BC V9R 5J6  
 Email: [userrates.info@nanaimo.ca](mailto:userrates.info@nanaimo.ca) • [www.nanaimo.ca](http://www.nanaimo.ca)  
 Telephone: 250-755-4416

FOR SERVICE AT: 712 HAMILTON AVENUE



PAYABLE AT MOST FINANCIAL INSTITUTIONS

Make cheques payable to: City of Nanaimo

BILLING DATE: Mar 4, 2014  
 ACCT NUMBER: 119909  
 DUE DATE: Mar 25, 2014

IF PAID AFTER DUE DATE: \$168.74  
 IF PAID ON OR BEFORE DUE DATE: \$160.30

AMOUNT PAID

ALLARD NEIL VICTOR RENE  
 [REDACTED]  
 NANAIMO BC [REDACTED]

MAIL   
 CHEQUE   
 CASH   
 DEBIT CARD

DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

**STATEMENT OF USER RATES**

ACCT NUMBER: 119909 BILLING PERIOD: Feb 20, 2014  
ACCESS CODE: 159442 TO: Jun 17, 2014  
DUE DATE: Jul 29, 2014 BILLING DATE: Jul 1, 2014



NAME: ALLARD NEIL VICTOR RENE  
FOR SERVICE AT: [REDACTED]  
ACCOUNT TYPE: RESIDENTIAL-SFD

ROUTE: 1702

DATE	METER NO.	NO. OF DAYS	CURRENT READING	PREV. READING	CONSUMPTION	AMOUNT
Jun 17, 2014	A-68648550	119	327	303	24 CU METERS / 5280 GALLONS	
					PREVIOUS BILL AMOUNT	168.74
Mar 23, 2014					PAYMENT	-160.30
					DISCOUNT	-8.44
Jul 1, 2014					WATER-METERED (A)	67.51
Jul 1, 2014					SEWER-SINGLE FAMILY RESIDENCE (A)	34.86
Jul 1, 2014					GARBAGE-CITY (A)	40.46
					IF PAID AFTER DUE DATE:	142.83
					DISCOUNT AVAILABLE:	7.14
					IF PAID ON OR BEFORE DUE DATE:	135.69

PLEASE NOTE: Watering restrictions are in effect from June 1 - September 30, 2014.

Regularly misplace your bills? Try online billing! "MyBills" is available through your "MyCity" account, so register today at [mycity.nanaimo.ca](http://mycity.nanaimo.ca) to access your account information and receive your User Rates, Property Tax, & Business Licence statements via email.

PAYABLE AT MOST FINANCIAL INSTITUTIONS  
Make cheques payable to: City of Nanaimo

BILLING DATE: Jul 1, 2014  
ACCT NUMBER: 119909  
DUE DATE: Jul 29, 2014

IF PAID AFTER DUE DATE: \$142.83  
IF PAID ON OR BEFORE DUE DATE: \$135.69

Service and Resource Centre: 411 Dunsmuir Street  
Mail: 455 Wallace Street, Nanaimo, BC V9R 5J6  
Email: [userrates.info@nanaimo.ca](mailto:userrates.info@nanaimo.ca) • [www.nanaimo.ca](http://www.nanaimo.ca)  
Telephone: 250-755-4416

FOR SERVICE AT: 712 HAMILTON AVENUE

*July 1st 2014*



AMOUNT PAID

ALLARD NEIL VICTOR RENE  
[REDACTED]  
NANAIMO BC [REDACTED]

- MAIL
- CHEQUE
- CASH
- DEBIT CARD

DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

Prepared For  
**NEIL V ALLARD**  
NANAIMO BC

Billing Date  
**Apr 11, 2013.**  
Pay By  
**May 03, 2013**

Account Number  
**8167 879**  
Please Pay  
**\$318.18**

Invoice Number:  
**115006475547**

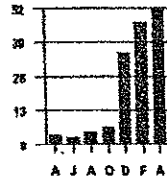
BC Hydro's account services are available online for your convenience. Create a MyHydro Profile and link your account at [bchydro.com/my](http://bchydro.com/my)

**Meter Reading Information**

Electric:	
Meter #	4674109
Feb 07	6216
Mar 31	8985
53 days	2769
Meter #	4674109
Apr 01	8985
Apr 08	9403
8 days	418

Next meter reading on or about Jun 05

kWh Daily Average Usage per Billing Period



Daily Average Comparison

Apr 2012	4 kWh
Apr 2013	52 kWh

Take action to save electricity and money. Call 604 431 9463 or visit [bchydro.com/powersmart](http://bchydro.com/powersmart)

Other questions? Call the numbers displayed in the Customer Service area at the top of this bill.

**Customer Service**

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9601 Stn Terminal, Vancouver BC, V6B 4N1

**Previous Bill**

Balance payable from your previous bill **283.09**  
Thank you for your payment Mar 14, 2013 **283.09CR**

**BC Hydro**

Balance from your previous bill **\$0.00**

**Electric Charges**

Feb 07 to Mar 31 (Residential Conservation Rate 1101)  
Basic Charge: 53 days @ \$0.15050 /day **7.98\***  
Usage Charge\*  
Step 1: 1176 kW.h @ \$0.06800 /kW.h **79.97\***  
Step 2: 1593 kW.h @ \$0.10190 /kW.h **162.33\***

Feb 07 to Apr 08 (Residential Conservation Rate 1101)  
Rate Rider at 5.0% **14.43\***

Apr 01 to Apr 08 (Residential Conservation Rate 1101)  
Basic Charge: 8 days @ \$0.15270 /day **1.22\***  
Usage Charge\*  
Step 1: 178 kW.h @ \$0.06900 /kW.h **12.28\***  
Step 2: 240 kW.h @ \$0.10340 /kW.h **24.82\***  
\* GST **15.15**

**\$318.18**

\*For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)

**Taxes**

The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 303.03 **15.15**

Balance payable **\$318.18**

Page 1 of 2

Return this portion with your payment  
**ALL PAYMENTS SHOULD BE MADE PAYABLE TO BC HYDRO**

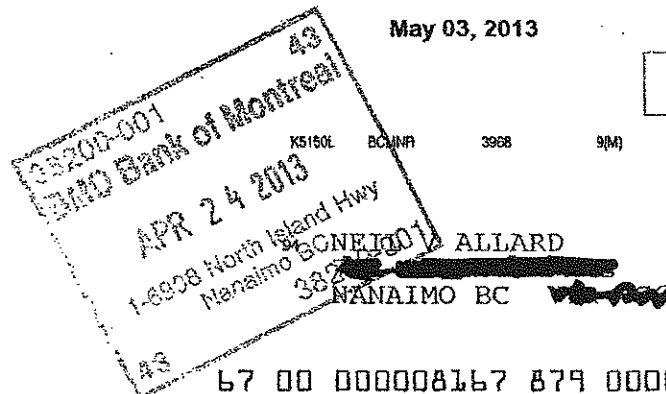


Billing Date  
**Apr 11, 2013**  
Pay By  
**May 03, 2013**

Account Number  
**8167 879**  
Please Pay  
**\$318.18**

Amount Paid  
**318.18**

003968



67 00 000008167 879 000031818 000000000

1:06390 9001:

96

This is a copy of the original of Neil Allard's account before was at 13 day of Aug 2014

A Commissioner for Making Affidavits for British Columbia

WD 05

GENERATIONS

For V ALLARD

Billing Date

Account Number

Oct 10, 2013

8167 879

Pay By

Please Pay

Nov 01, 2013

\$347.66

BC Hydro's account services are available online for your convenience. Create a MyHydro Profile and link your account at bchydro.com/myhydro.

Ice Number: 3976273

Reading Information

Customer Service

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9601 Stn Terminal, Vancouver BC, V6B 4N1

4674109  
16544  
19954  
3410

Previous Bill

Balance payable from your previous bill 375.49  
Thank you for your payment Aug 26, 2013 375.49CR

After reading about Dec 05

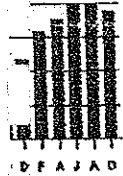
Balance from your previous bill \$0.00

Average Usage by Period

BC Hydro

Electric Charges

Aug 08 to Oct 07 ( Residential Conservation Rate 1101 )  
Basic Charge: 61 days @ \$0.15270 /day 9.31\*  
Usage Charge\*  
Step 1: 1354 kW.h @ \$0.06900 /kW.h 93.43\*  
Step 2: 2056 kW.h @ \$0.10340 /kW.h 212.59\*  
Rate Rider at 5.0% 15.77\*  
\* GST 16.56  
\$347.66



Average Comparison  
12 7 kWh  
3 56 kWh

Your total consumption for the billing period is 3410 kW.h and your Conservation Rate breakdown is as follows:

Tip to save money. Call 431 9463 or visit bchydro.com/powersmart

1354 kWh @ 6.90¢  
2056 kWh @ 10.34¢  
Your Step 1 threshold of 1354 kW.h is prorated based on 61 days

Questions? Call the number displayed in the Customer Service area at the top of this bill.

\*For more information on the Conservation Rate visit bchydro.com/conservationrate

Save energy, time and money. Create a MyHydro Profile today at bchydro.com/myhydro

Taxes

The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 331.10 16.56

Balance payable \$347.66

GENERATIONS

Return this portion with your payment  
ALL PAYMENTS SHOULD BE MADE  
PAYABLE TO BC HYDRO

Billing Date

Account Number

Oct 10, 2013

8167 879

Pay By

Please Pay

Nov 01, 2013

\$347.66

Amount Paid

K6912L BCMNR 4635 9(L) 004635

pd. Oct 20 2013

94 NEIL V ALLARD 9 (L)  
NANAIMO BC

72 00 000008167 879 000034766 000000000

Bill For  
V ALLARD  
[REDACTED]  
[REDACTED]  
[REDACTED]

Billing Date: Dec 10, 2013  
Account Number: 8167 879  
Pay By: Jan 02, 2014  
Please Pay: \$301.92

BC Hydro's account services are available online for your convenience. Create a MyHydro Profile and link your account at [bchydro.com/myhydro](http://bchydro.com/myhydro).

Account Number: 3961236

meter Reading information

Customer Service

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver, BC, V6B 4N1

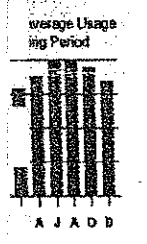
4674109  
19954  
22957  
3003

Previous Bill

Balance payable from your previous bill 347.66  
Thank you for your payment Oct 21, 2013 347.66CR

meter reading about Feb 05

Balance from your previous bill \$0.00



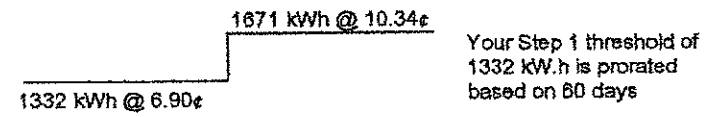
BC Hydro

Electric Charges

Oct 08 to Dec 06 (Residential Conservation Rate 1101)  
Basic Charge: 60 days @ \$0.15270 /day 9.16\*  
Usage Charge\*  
Step 1: 1332 kW.h @ \$0.06900 /kW.h 91.91\*  
Step 2: 1671 kW.h @ \$0.10340 /kW.h 172.78\*  
Rate Rider at 5.0% 13.69\*  
\* GST 14.38  
**\$301.92**

Average Comparison  
2 35 kWh  
50 kWh

Your total consumption for the billing period is 3003 kW.h and your Conservation Rate breakdown is as follows:



Join to save energy and money. Call 431 9463 or visit [bchydro.com/powersmart](http://bchydro.com/powersmart)

Questions? Call the numbers displayed in the meter Service area portion of this bill.

Energy, time and money. Create a MyHydro Profile today at [bchydro.com/myhydro](http://bchydro.com/myhydro)

Taxes

\*For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)  
The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 287.54 14.38

Balance payable \$301.92

Return this portion with your payment  
**ALL PAYMENTS SHOULD BE MADE PAYABLE TO BC HYDRO**

Billing Date: Dec 10, 2013  
Account Number: 8167 879  
Pay By: Jan 02, 2014  
Please Pay: \$301.92

Amount Paid

*Neil V Allard*  
*Dec 18*

K7498L BCMNR 4356 9(P) 004356

94 NEIL V ALLARD 9 (P)  
NANAIMO BC [REDACTED]

61 00 000008167 879 000030192 000000000

BC Hydro  
OPERATIONS  
Bill For  
NEIL V ALLARD

4320 BCMNR K8086L

Billing Date Feb 11, 2014  
Account Number 8167 879  
Pay By Mar 05, 2014  
Please Pay \$292.38

Account Number:  
7008111

BC Hydro's account services are available online for your convenience.  
Create a MyHydro Profile and link your account at [bchydro.com/myhydro](http://bchydro.com/myhydro).

Reading Information  
Customer Service

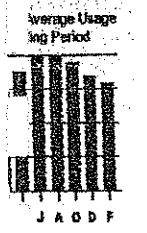
Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver BC, V6B 4N1

4674109  
22957  
25888  
2931

Previous Bill Balance payable from your previous bill 301.92  
Thank you for your payment Dec 19, 2013 301.92CR

Meter reading about Apr 04

Balance from your previous bill \$0.00

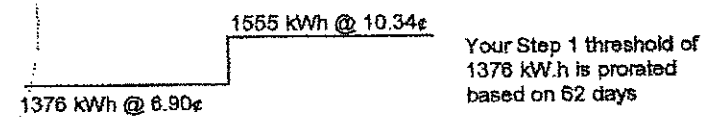


BC Hydro Electric Charges  
Dec 07 to Feb 06 ( Residential Conservation Rate 1101 )  
Basic Charge: 62 days @ \$0.15270 /day 9.47\*  
Usage Charge<sup>1</sup>  
Step 1: 1376 kW.h @ \$0.06900 /kW.h 94.94\*  
Step 2: 1555 kW.h @ \$0.10340 /kW.h 160.79\*  
Rate Rider at 5.0% 13.26\*  
\* GST 13.92  
\$292.38

Average Comparison  
13 47 kWh  
47 kWh

Your total consumption for the billing period is 2931 kW.h and your Conservation Rate breakdown is as follows:

Tip to save electricity and money.  
Call 431 9463 or visit [bc.com/powersmart](http://bc.com/powersmart)



Questions? Call the numbers displayed in the meter Service area portion of this bill.

Save energy, time and money. Create a MyHydro Profile today at [bc.com/myhydro](http://bc.com/myhydro)

*Handwritten signature and date: Neil V Allard, Feb 19*

Taxes

\*For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)  
The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 278.46 13.92

Balance payable \$292.38

WD 05

BC Hydro OPERATIONS

Return this portion with your payment  
ALL PAYMENTS SHOULD BE MADE PAYABLE TO BC HYDRO

Billing Date Feb 11, 2014  
Account Number 8167 879  
Pay By Mar 05, 2014  
Please Pay \$292.38

Amount Paid

K8086L BCMNR 4320 9(R) 188 004320

94 NEIL V ALLARD 9 (R)  
NANAIMO BC

70 00 000008167 879 000029238 000000000

06390 900

96

GENERATIONS

For V ALLARD

Billing Date

Account Number

Apr 09, 2014

8167 879

Pay By

Please Pay

May 01, 2014

\$322.76

Invoice Number: 7397566

BC Hydro's account services are available online for your convenience. Create a MyHydro Profile and link your account at bchydro.com/myhydro.

Customer Service

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver BC, V6B 4N1

4674109  
25888  
28675  
2787  
4674109  
28675  
29044  
369

Previous Bill

Balance payable from your previous bill 292.38  
Thank you for your payment Feb 20, 2014 292.38CR

BC Hydro

Balance from your previous bill \$0.00

Electric Charges

Feb 07 to Mar 31 ( Residential Conservation Rate 1101 )  
Basic Charge: 53 days @ \$0.15270 /day 8.09\*

Usage Charge\*  
Step 1: 1176 kW.h @ \$0.06900 /kW.h 81.14\*  
Step 2: 1611 kW.h @ \$0.10340 /kW.h 166.58\*

Feb 07 to Apr 07 ( Residential Conservation Rate 1101 )  
Rate Rider at 5.0% 14.64\*

Apr 01 to Apr 07 ( Residential Conservation Rate 1101 )  
Basic Charge: 7 days @ \$0.16640 /day 1.16\*

Usage Charge\*  
Step 1: 155 kW.h @ \$0.07520 /kW.h 11.66\*  
Step 2: 214 kW.h @ \$0.11270 /kW.h 24.12\*  
\* GST 15.37

\$322.76

\*For more information on the Conservation Rate visit bchydro.com/conservationrate

Taxes

The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 307.39 15.37

Balance payable \$322.76

meter reading about Jun 05

Average Usage Billing Period



J A O D F A

Average Comparison  
13 52 kWh  
14 53 kWh

tips to save energy and money.  
1-800-431-9463 or visit bchydro.com/powersmart

Questions? Call the number displayed in the Customer Service area at the top of this bill.

Save energy, time and money.  
Create a MyHydro Profile today at bchydro.com/myhydro

GENERATIONS

Return this portion with your payment  
ALL PAYMENTS SHOULD BE MADE  
PAYABLE TO BC HYDRO

Billing Date

Account Number

Apr 09, 2014

8167 879

Pay By

Please Pay

May 01, 2014

\$322.76

Amount Paid

X8664L BCMNR 4171 9(J) 178 004171

94 NEIL V ALLARD 9 (J)

NANAIMO BC

66 00 000008167 879 000032276 000000000



FOR GENERATIONS  
 or ALLARD  
 NAIMO BC  
 e Number:  
 06643515

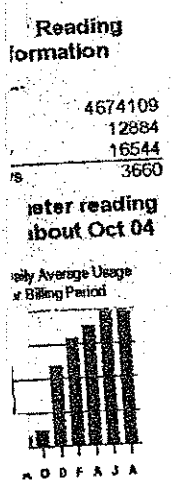
4682 BCMNR K6331L

Billing Date Aug 12, 2013 Account Number 8167 879

Pay By Sep 03, 2013 Please Pay \$375.49

BC Hydro's account services are available online for your convenience. Create a MyHydro Profile and link your account at [bchydro.com/myhydro](http://bchydro.com/myhydro).

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
 Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver BC, V6B 4N1



Previous Bill	Balance payable from your previous bill	357.12
	Thank you for your payment Jun 21, 2013	357.12CR
		<hr/>
	Balance from your previous bill	\$0.00
BC Hydro	Electric Charges	
	Jun 07 to Aug 07 (Residential Conservation Rate 1101)	
	Basic Charge: 62 days @ \$0.15270 /day	9.47*
	Usage Charge <sup>1</sup>	
	Step 1: 1376 kW.h @ \$0.06900 /kW.h	94.94*
	Step 2: 2284 kW.h @ \$0.10340 /kW.h	236.17*
	Rate Rider at 5.0%	17.03*
	* GST	17.88
		<hr/>
		\$375.49

Your total consumption for the billing period is 3660 kW.h and your Conservation Rate breakdown is as follows:

2284 kWh @ 10.34¢	Your Step 1 threshold of 1376 kW.h is prorated based on 62 days
1376 kWh @ 6.90¢	

<sup>1</sup>For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)

Taxes The following is a summary of taxes billed to your account since your last invoice:

GST at 5 % on 357.61	17.88
----------------------	-------

Balance payable \$375.49

*Aug 23 Pld*

BC Hydro FOR GENERATIONS

Return this portion with your payment  
**ALL PAYMENTS SHOULD BE MADE PAYABLE TO BC HYDRO**

Billing Date Aug 12, 2013 Account Number 8167 879  
 Pay By Sep 03, 2013 Please Pay \$375.49

Amount Paid

K6331L BCMNR 4682 9(W) 004682

04 NEIL V ALLARD 9 (W)  
 NANAIMO BC

74 00 000008167 879 000037549 000000000

Bill For  
**ALLARD**  
[REDACTED]  
NANAIMO BC [REDACTED]

Billing Date: Jun 11, 2013  
Account Number: 8167 879  
Pay By: Jul 03, 2013  
Please Pay: \$357.12

Account Number:  
6521599

BC Hydro's account services are available online for your convenience.  
Create a MyHydro Profile and link your account at [bchydro.com/myhydro](http://bchydro.com/myhydro).

Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver BC, V6B 4N1

Reading Information  
IC: 4674109  
9403  
12884  
RS 3481

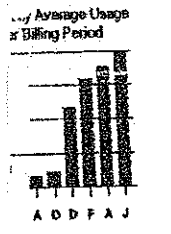
**Customer Service**

**Previous Bill**

Balance payable from your previous bill 318.18  
Thank you for your payment Apr 25, 2013 318.18CR

meter reading about Aug 06

Balance from your previous bill \$0.00



**BC Hydro**

**Electric Charges**  
Apr 09 to Jun 06 (Residential Conservation Rate 1101)  
Basic Charge: 59 days @ \$0.15270 /day 9.01\*  
Usage Charge:  
Step 1: 1309 kW.h @ \$0.06900 /kW.h 90.32\*  
Step 2: 2172 kW.h @ \$0.10340 /kW.h 224.58\*  
Rate Rider at 5.0% 16.20\*  
\* GST 17.01  
**\$357.12**

Your total consumption for the billing period is 3481 kW.h and your Conservation Rate breakdown is as follows:

1309 kWh @ 6.90¢	2172 kWh @ 10.34¢	Your Step 1 threshold of 1309 kW.h is prorated based on 59 days
------------------	-------------------	---

Action to save electricity and money.  
Call 431 9463 or visit [bc.com/powersmart](http://bc.com/powersmart)

For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)

For questions? Call the numbers displayed in the Customer Service area at the top of this bill.

The following is a summary of taxes billed to your account since your last invoice:  
GST at 5 % on 340.11 17.01

**Taxes**

Balance payable **\$357.12**

Return this portion with your payment  
**ALL PAYMENTS SHOULD BE MADE PAYABLE TO BC HYDRO**



*June 19 2013*  
*[Signature]*

Billing Date: Jun 11, 2013  
Account Number: 8167 879  
Pay By: Jul 03, 2013  
Please Pay: \$357.12

Amount Paid

K5747L BCMNR 4982 9(T) 004982

94 NEIL V ALLARD 9 (T)  
NANAIMO BC [REDACTED]

Progressive Growth  
#41 - 1925 Bowen Rd  
Nanaimo, B.C. V9S 1H1  
250 756 9592

Progressive Growth  
#41 - 1925 Bowen Rd  
Nanaimo, B.C. V9S 1H1  
250 756 9592

**Sales Receipt**

Transaction #: 29676  
Account #: Hb12309  
Date: 11/6/2012 Time: 1:53:38 PM  
Cashier: 7 Register #: 1

Item	Description	Amount
4067	Speedster Motor Sp	\$31.46
5070	Can Fan 4"	\$145.00
1022	Perlite 110 Litre	\$25.00
1001	Back Draft Damper	\$33.00
gf2kg	Rubicon Bat Suano	\$18.68
7140	Adaptor 3/4 ins x	\$1.02
5072	Pump Ecopius 264 g	\$26.00
um6b	HPS 600 Lumatek Bu 3 @ \$58.00	\$174.00

Sub Total \$454.14  
HST \$54.50  
Total \$508.64

DEBIT Tendered \$508.64  
Change Due \$0.00

**You saved \$56.61!**



29676  
Thank you for shopping  
Progressive Growth  
We hope you'll come back soon!

**Sales Receipt**

Transaction #: 42588  
Account #: 0000000000  
Date: 5/17/2014 Time: 3:36:28 PM  
Cashier: 7 Register #: 1

Item	Description	Amount
5072	Can Fan 6" HO	\$187.50
Sub Total		\$187.50
GST		\$9.38
PST		\$13.13
Total		\$210.01

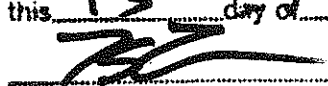
DEBIT Tendered \$210.01  
Change Due \$0.00

**You saved \$12.45!**



42588  
Thank you for shopping  
Progressive Growth  
We hope you'll come back soon!

This is Exhibit "G" referred to in  
the affidavit of Neil Allard  
sworn before me at Duncan BC  
this 13 day of Aug 2014

  
A Commissioner for Taking Affidavits  
for British Columbia

# Invoice

INSULPRO INSULATION INC

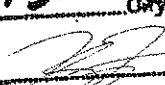
100-2550 KENWORTH RD  
NANAIMO, BC V9T 3Y4

Phone #	Fax #	Date	Invoice #
250 751 1108	250 751 1628	10/03/2012	200

Invoice To
NEIL ALLARD
████████████████████
NANAIMO B.C.
████████████████████

Terms	P.O. No.

Item	Description	Amount
INSULATION	SUPPLY AND INSTALL INSULATION AS PER QUOTE PAYABLE UPON RECEIPT HST (BC) on sales	800.00  96.00

This is Exhibit "H" returned to me  
the affidavit of Neil Allard  
sworn before me at Duncan, BC  
this 13th day of Aug 2014  
  
Commissioner for taking Affidavits  
for British Columbia

GST/HST No. 822344081

Thank you for your business.	<b>Total</b>	\$896.00
------------------------------	--------------	----------

TRIDON HYDROPONICS

#12-1708 BOWEN RD.

NANAIMO, B.C.

V9S 1G9

(250)755-1900

**INVOICE**

NO: 178052

DATE: JAN 31/14

PAGE: 1

Cash Sale

S  
H  
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P  
T  
O

ITEM NO.	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
	1		CANLITE 600 CFM FILTER 6"	169.00	169.00
* Item PST Exempt					
Subtotal:				169.00	169.00
GST:					8.45
PST:					11.83
TOTAL					189.28

REMARKS: Method of payment: CASH

Method of payment: CASH

Total:

TRIDON HYDROPONICS  
 #12-1708 BOWEN RD.  
 NANAIMO, B.C.  
 V9S 1G9  
 (250)755-1900

**INVOICE**

NO: 178256

DATE Feb 19/14

PAGE 1

Cash Sale  
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 O

ITEM NO.	QUANTITY	UNIT	DESCRIPTION	GST	PST	UNIT PRICE	AMOUNT
	1		CANLITE 600 CFM FILTER 6"			175.00	175.00
	1	*	PRO MIX HP			32.00	32.00
	1		G.H. PH TEST INDICATOR 8 oz			12.95	12.95
* Item PST Exempt							
Subtotal:						219.95	
GST:						11.00	
PST:						13.16	
<b>TOTAL</b>							<b>244.11</b>

COMMENTS:  
 ##### GST + PST = HST  
 Method of Payment: CASH



**More saving.  
More doing.™**

6555 METRAL DR., NANAIMO, B.C.  
NEIL LANG -STR MGR(250)390-9093

7040 00009 07923 10/10/12 08:04 PM  
CASHIER LORA - LKC2930

03923876902	STH 2" STL R <A>	
4@1.59		6.36
054007496564	ELEC TAPE <A>	
2@0.63		1.26
039003094877	CASTER <A>	1.98
071589039354	THERMOMETER <A>	8.97
033923503112	STH 1 1/2 COR <A>	3.08
061788788115	LNDRYTUB KIT <A>	
2@10.80		21.60
063236899459	TEMP & HUMID <A>	12.99
779387664012	6X4 INC/RED <A>	10.69
673534	6" ATTO <A>	
2@12.99	EACH	25.98
673529	4" ATTOWD <A>	
EACH		10.99

	SUBTOTAL	103.90
	PST/GST	0.00
	GST/HST	12.47
	TOTAL	\$116.37
XXXXXXXXXX4084	DEBIT	116.37
AUTH CODE 313792		
AID A0000002771010	INTERAC	



7040 09 07923 10/10/2012 8516

12% HST R135772911

RETURN POLICY DEFINITIONS  
POLICY ID DAYS POLICY EXPIRES ON  
A 1 90 08/01/2013

THE HOME DEPOT RESERVES THE RIGHT TO  
LIMIT / DENY RETURNS. PLEASE SEE THE  
RETURN POLICY SIGN IN STORES FOR  
DETAILS.

KEEP YOUR RECEIPT FOR FASTER RETURNS  
SHOP ONLINE AT WWW.HOMEDEPOT.CA  
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\*\*\*\*\*  
ENTER FOR A CHANCE  
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HOME DEPOT GIFT  
CARD!

Your Opinion Counts! We would like to  
hear about your shopping experience.  
Enter to win a \$3,000 Home Depot Gift  
Card by completing a brief survey about  
your store visit at:

[www.homedepot.com/opinion](http://www.homedepot.com/opinion)

You will need the following to enter  
on-line:

User ID:  
23175 16144

Password:  
12510 16135

Entries must be entered by 09/11/2012.  
Entrants must be 18 or older to enter.

**CANADIAN TIRE #362**

6900 N.ISLAND HWY  
NANAIMO, BC V9V 1P6

(250)390-1400 or 1-800-255-6250

THANK YOU FOR CHOOSING OUR STORE

WE APPRECIATE YOUR PATRONAGE

REG #:4 07/15/2013 17:57:06 TRANS #:318

OPERATOR #: 2662 Float: 001

2X059-4892-4	@ \$	25.990 ea.
	PRO-MIX MYCOR3.	\$ 51.98
	SUBTOTAL	\$ 51.98
	GST 5%	\$ 2.60
	PST 7%	\$ 3.64
	TOTAL	\$ 58.22
DEBIT CARD #:*****4084		
CHIP CARD		
APPROVAL #: 00 546128 001		
	DEBIT TEND.	\$ 58.22
	CHANGE	\$ 0.00
	BASE CT MONEY	\$ 0.20

DEBIT CARD TRANSACTION RECORD

CANADIAN TIRE #362  
6900 N.ISLAND HWY.  
NANAIMO, BC  
V9V 1P6

OPERATOR: 2662 REG #:4 TRANS #:318

TYPE: PURCHASE  
ACCT: INTERAC CHEQUING

**\$ 58.22**

CARD NUMBER: \*\*\*\*\*4084  
CHIP CARD  
2013/07/15 17:57:42  
REFERENCE: 28274343 0010016070 C

AUTHORIZATION: 546128  
A0000002771010  
Interac  
80000080006800

00 APPROVED - THANK YOU 001

CUSTOMER COPY

When cash is used as payment, the  
total amount due is rounded and change  
is issued to the nearest 5 cents.

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Canadian Olympic Team

At Canadian Tire, We Care!

Tell us how we did today. You could win  
a \$1000 Canadian Tire Gift Card monthly!  
Submit a survey at: [www.telicdnfire.com](http://www.telicdnfire.com)  
OR via telephone: 1-888-431-5595

No purchase necessary. Contest ends  
12-31-13. Must correctly answer a skill  
testing question. Odds of winning depend  
on number of entries received during  
the month. See website for rules.

CANADIAN TIRE #362

6900 N. ISLAND HWY  
NANAIMO, BC V9V 1P6  
(250)390-1400 or 1-800-255-6250  
THANK YOU FOR CHOOSING OUR STORE  
WE APPRECIATE YOUR PATRONAGE  
REG #:84 10/05/2009 12:10:22 TRANS #:21  
OPERATOR #: 84 Float: 001

060-0522-4 FOLDING DOLLY/T \$ 39.99  
(SAVED \$ 40.00)

SUBTOTAL \$ 39.99  
G.S.T \$ 2.00  
PROV SALES TAX \$ 2.80  
T O T A L \$ 44.79

DEBIT CARD #:\*\*\*\*\*4084

CHIP CARD

APPROVAL #: 00 467357 001

DEBIT TEND \$ 44.79  
CHANGE \$ 0.00  
BASE CT MONEY \$ 0.10

TODAY YOU SAVED  
\$ 40.00  
AT CANADIAN TIRE.

DEBIT CARD TRANSACTION RECORD

CANADIAN TIRE #362  
6900 N. ISLAND HWY.  
NANAIMO, BC  
V9V 1P6

OPERATOR: 84 REG #:84 TRANS #:21

TYPE: PURCHASE

ACCT: CHEQUING \$ 44.79

CARD NUMBER: \*\*\*\*\*4084  
2009/10/05 12:11:13  
REFERENCE: 20866168 0010011310 C

AUTHORIZATION: 467357  
809EB58AD2153AA328  
40088737E8A6F02912  
A0000002771010  
Interac  
8000008000

00 APPROVED THANK YOU 001



For a full refund, the receipt, CT Money packaging and original condition must be presented within 90 days of purchase. Unless stated otherwise under warranty.  
GST# 898242284

CANADIAN TIRE #362

4585 Uplands Drive  
NANAIMO, BC V9T 6M8  
(250)585-8045 or Service (250)585-7477  
THANK YOU FOR CHOOSING OUR STORE  
WE APPRECIATE YOUR PATRONAGE  
REG #:3 01/23/2014 12:54:01 TRANS #:49  
OPERATOR #: 4842 Float: 001

065-3028-4 LW4-PK MTL FL/H \$ 14.99  
(SAVED \$ 5.00)

065-3027-6 LW MLI-PUR BATT \$ 9.99  
059-3854-2 EZ SPRAYER 500M \$ 1.99  
067-6000-6 TUCK TAPE 60MMX \$ 6.69  
(SAVED \$ 2.30)

2X067-0836-4 @ \$ 3.990 ea.  
SEAL.SIL.GE.BAT \$ 7.98  
064-1002-8 SUN,CAULKING CA \$ 3.29

SUBTOTAL \$ 44.93  
GST 5% \$ 2.25  
PST 7% \$ 3.15  
T O T A L \$ 50.33

DEBIT CARD #:\*\*\*\*\*4084

CHIP CARD

APPROVAL #: 00 729942 001

DEBIT TEND \$ 50.33  
CHANGE \$ 0.00  
BASE CT MONEY \$ 0.20

TODAY YOU SAVED  
\$ 7.30  
AT CANADIAN TIRE.

DEBIT CARD TRANSACTION RECORD

CANADIAN TIRE #362  
4585 UPLANDS DRIVE  
NANAIMO, BC  
V9T 6M8

OPERATOR: 4842 REG #:3 TRANS #:49

TYPE: PURCHASE

ACCT: INTERAC CHEQUING

\$ 50.33

CARD NUMBER: \*\*\*\*\*4084  
CHIP CARD  
2014/01/23 12:54:59  
REFERENCE: 28274343 0010012490 C

AUTHORIZATION: 729942  
A0000002771010  
Interac  
80000080006800

00 APPROVED - THANK YOU 001

CUSTOMER COPY

When cash is used as payment, the total amount due is rounded and change is issued to the nearest 5 cents.

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Canadian Olympic Team





**More saving.  
More doing.<sup>SM</sup>**

6555 METRAL DR., NANAIMO, B.C.  
NEIL LANG -STR MGR(250)390-9093

7040 00007 57971 28/09/12 05:44 PM  
CASHIER MAYA - MXK4041

062602061841	VAN PRIMER <A>	19.97
714071	ECO FEE <A,U>	
	EACH	-0.60
016963541139	PRE-ASSBLED <A>	17.97
779387054097	5" ATTO <A>	11.99
628076231199	17L BUCKET <A>	3.97
060672130818	CLAMP 5" <A>	
	301.95	5.85
060672130276	CLAMP 4" <A>	
	201.55	3.10
060672300310	CLAMP 6" <A>	
	202.19	4.38
779387041448	5X90GAL ELBO <A>	
	203.59	7.18
775583880119	CORD, <A>	59.98
046677238759	50W PAR20 4P <A>	13.78
033656304505	ALUM. FOIL D <A>	5.19
779387087910	5"X4" INC/RE <A>	10.89
	SUBTOTAL	164.85
	PST/QST	0.00
	GST/HST	19.78
	TOTAL	\$184.63
XXXXXXXXXXXX4084	DEBIT	184.63
AUTH CODE 486283		
AID A0000002771010	INTERAC	

<U> - NON-DISCOUNTABLE ITEM



7040 07 57971 28/09/2012 9605

12% HST R135772911

**RETURN POLICY DEFINITIONS**

POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	27/12/2012

THE HOME DEPOT RESERVES THE RIGHT TO  
LIMIT / DENY RETURNS. PLEASE SEE THE  
RETURN POLICY SIGN IN STORES FOR  
DETAILS.

KEEP YOUR RECEIPT FOR FASTER RETURNS  
SHOP ONLINE AT WWW.HOMEDEPOT.CA  
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CARD!**

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Enter to win a \$3,000 Home Depot Gift  
Card by completing a brief survey about  
your store visit at:

[www.homedepot.com/opinion](http://www.homedepot.com/opinion)

You will need the following to enter  
on-line:

**User ID:  
123271 116238**



**More saving.  
More doing.<sup>SM</sup>**

6555 METRAL DR., NANAIMO, B.C.  
NEIL LANG -STR MGR(250)390-9093

7040 00029 23985 12/10/12 04:17 PM  
CASHIER BYRON - BXU6AB  
\* ORIG REC: 7040 007 57971 28/09/12 TA \*

779387041448	5X90GAL ELBO	-3.59
033656304505	ALUM. FOIL D	-5.19
060672130276	CLAMP 4"	
	20-1.55	-3.10
060672130818	CLAMP 5"	
	30-1.95	-5.85
060672300310	CLAMP 6"	
	20-2.19	-4.38
	PST/QST	0.00
	GST/HST	-2.64

\* ORIG REC: 7040 009 07923 10/10/12 TA \*

061788788115	LNDRYTUB KIT	
	20-10.80	-21.60
071589039354	THERMOMETER	-8.97
	PST/QST	0.00
	GST/HST	-3.68

	SUBTOTAL	-52.68
	PST/QST	0.00
	GST/HST	-6.32
	TOTAL	-\$59.00
XXXXXXXXXXXX4084	DEBIT	-59.00
AUTH CODE 958814		
AID A0000002771010	INTERAC	

**REFUND-CUSTOMER COPY**

12% HST R135772911

KEEP YOUR RECEIPT FOR FASTER RETURNS  
SHOP ONLINE AT WWW.HOMEDEPOT.CA  
More saving. More Doing.

\*\*\*\*\*

**ENTER FOR A CHANCE  
TO WIN A \$3,000  
HOME DEPOT GIFT  
CARD!**

Your Opinion Counts! We would like to  
hear about your shopping experience.  
Enter to win a \$3,000 Home Depot Gift  
Card by completing a brief survey about  
your store visit at:

[www.homedepot.com/opinion](http://www.homedepot.com/opinion)

You will need the following to enter  
on-line:

**User ID:  
55299 48288**

**Password:  
12512 48259**

Entries must be entered by 11/11/2012.  
Entrants must be 18 or older to enter.  
See complete rules on website. No  
purchase necessary.

(Le sondage est également offert en  
français sur le Web.)

May 20, 2013.

\$50<sup>00</sup>  
CASH

Kim Chambers

Sold 5000 BTU AirConditioner  
Unit

*Richard*

LANNY SMITH  
HAS BEEN PAID IN FULL  
A TOTAL OF 1,060.00  
SEPT 4, 2012



LANNY SMITH  
*[Signature]*

Progressive Growth  
#41 - 1925 Bowen Rd  
Nanaimo, B.C. V9S 1H1  
250 756 9592

Progressive Growth  
#41 - 1925 Bowen Rd  
Nanaimo, B.C. V9S 1H1  
250 756 9592

**Sales Receipt**

**Sales Receipt**

Transaction #: 35017  
Account #: Hb12309  
Date: 5/16/2013 Time: 3:19:50 PM  
Cashier: 7 Register #: 1

Transaction #: 31371  
Account #: 0000000000  
Date: 1/12/2013 Time: 3:09:29 PM  
Cashier: 10 Register #: 1

Item	Description	Amount
5072	Can Fan 6" HO	\$180.00
4112a	Grozone TV-2	\$115.00
1072	Duct Y 6x6x6	\$24.00
0045	ORG. Steamed Bone	\$14.41
Sub Total		\$333.41
GST		\$16.67
PST		\$22.33
Total		\$372.41
DEBIT Tendered		\$372.41
Change Due		\$0.00

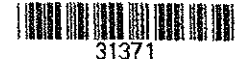
Item	Description	Amount
28310	Pump Eco Plus 396	\$29.00
4027	Tray Insert	\$7.00
	5 @ \$1.40	
4112a	Grozone TV-2	\$123.15
5072	Can Fan 6"	\$184.76
wr28	Rooting Gel-PowerR	\$7.88
Sub Total		\$351.79
HST		\$42.21
Total		\$394.00
DEBIT Tendered		\$394.00
Change Due		\$0.00

**You saved \$62.44!**

**You saved \$48.51!**



35017  
Thank you for shopping  
Progressive Growth  
We hope you'll come back soon!



31371  
Thank you for shopping  
Progressive Growth  
We hope you'll come back soon!

Progressive Growth  
 #41 - 1925 Bowen Rd  
 Nanaimo, B.C. V9S 1H1  
 250 756 9592

Progressive Growth  
 #41 - 1925 Bowen Rd  
 Nanaimo, B.C. V9S 1H1  
 250 756 9592

**Sales Receipt**

Transaction #: 40101  
 Account #: 0000000000  
 Date: 12/23/2013 Time: 1:23:20 PM  
 Cashier: 3 Register #: 1

Item	Description	Amount
0114	Bio Bizz Top Max 1	\$58.46
iffy7100	Jiffy 7 100 pack	\$13.46
1025	Pro Mix Hp 2 @ \$34.95	\$69.90

=====  
 Sub Total \$141.82  
 GST \$7.09  
 PST \$5.84  
 Total \$154.75

DEBIT Tendered \$154.75  
 Change Due \$0.00

**You saved \$7.98!**



40101

Thank you for shopping  
 Progressive Growth  
 We hope you'll come back soon!

**Sales Receipt**

Transaction #: 36808  
 Account #: Hb12309  
 Date: 29/07/2013 Time: 2:56:33 PM  
 Cashier: 11 Register #: 2

Item	Description	Amount
7450059	MH 400 Plantmax 2 @ \$21.21	\$42.42
iffy7100	Jiffy 7 100 pack	\$12.71
075	T5 Bulb 2 ft 6400K 2 @ \$11.00	\$22.00
hbr11	GH Bio Root 1L	\$16.11

=====  
 Sub Total \$93.24  
 GST \$4.66  
 PST \$5.40  
 Total \$103.30

DEBIT Tendered \$103.30  
 Change Due \$0.00

**You saved \$16.46!**



36808

Thank you for shopping  
 Progressive Growth  
 We hope you'll come back soon!



147 Craig St.  
 Nanaimo, B.C. V9R 3V2  
 T 250-616-9805  
 piet@jonkercustombuilding.com  
 www.jonkercustombuilding.com  
 H.S.T. # 85410 3006 RT0001  
 Invoice #1011

This is Exhibit "I" referred to in  
 the affidavit of Nest Allard  
 sworn before me at Wesley BC  
 this 13 day of Aug 2014

A Commissioner for taking Affidavits  
 for British Columbia

Oct 28th, 2012

Original Quote for basement work at [REDACTED]

Including;

- material and labor to frame perimeter wall,
- build a division wall complete with two doors and hardware,
- alteration of plumbing to allow for a laundry tub,
- R-22 insulation around perimeter,
- 6 mm vapor barrier,
- walls to be sheeted with 3/8" standard sheathing,
- and the coordination of all sub-trades.

\$ 5255.34

Extra's

- 34' of extra wall(room at south end of basement, and division wall in grow room), \$ 640.46
- bedroom door, \$ 85.00
- interior wall insulation, \$ 250.00
- ceiling insulation, \$ 200.00
- 3/8" sheathing on ceiling, \$ 360.00
- ductwork, \$ 75.00
- removal of hotwater tank, \$ 39.00
- soffit and gable end vents, \$ 350.00
- laundry tubs, \$ 59.00
- less plumbing rough-in for laundry tubs, -\$ 500.00
- weatherstripping on basement door, \$ 35.00
- rekeying of locks, \$ 25.00

\$ 1618.46

- Electrical rough-in as per quote \$ 3695.00

Subtotal \$ 10568.80  
 H.S.T. \$ 1298.26  
 Total \$ 11837.06

**Neil Allard**

From: "M S Canada" <info@m-s-canada.com>  
Date: Sunday, July 14, 2013 1:00 PM  
To: [REDACTED]  
Subject: Order confirmation for order #2-61647

single marijuana seeds canada

This is Exhibit "J" referred to in  
the affidavit of Neil Allard  
sworn before me at Amman  
this 13 day of Aug 2014  
[Signature]  
A Commissioner for Taking Affidavits  
for British Columbia

**Order Confirmation — #2-61647**

Thank you for your order, placed 14 Jul 2013.

PLEASE NOTE this transaction will appear as 'Daniel Son'.

**Shipping address**

Neil Allard

[REDACTED]

Nanaimo, British Columbia [REDACTED]  
Canada

**Billing address**

Neil Allard

[REDACTED]

Nanaimo, British Columbia [REDACTED]  
Canada

**Your order:**

- 3x KC Brains KC36 - Regular \$2.03
- 3x KC Brains Leda Uno - Regular \$2.03
- 3x KC Brains Mind Bender - Regular \$2.03
- 1x Simply Female Highland Sunshine - Feminized \$4.97
- 1x Simply Female Spineapple - Feminized \$4.97
- 1x Simply Female Mega Lemonista - Feminized \$4.97
- 1x Female Purple Maroc - Feminized \$7.29
- 1x Green House Pure Kush - Feminized \$7.46
- 3x KC Brains Sweet Dreams - Regular \$2.03
- 5x KC Brains Northern Light Special - Regular \$2.03
- 3x KC Brains Mango - Regular \$2.03
- 3x Bomb Berry Bomb - Regular \$4.32
- 3x Bomb Hash Bomb - Regular \$2.86

2x Bomb Big Bomb - Feminized	\$7.00
5x Nirvana Aurora Indica - Regular	\$2.94
3x Green House The Doctor - Feminized	\$4.58
5x Green House Super Bud - Feminized	\$5.45
1x Green House Jack Herer - Feminized	\$7.69
4x Nirvana Papaya - Regular	\$2.97
3x Mandala Mandala #1 - Regular	\$4.69

Subtotal: \$190.47

Shipping: \$8.50

VAT: \$0.00

**Total: \$198.97 CAD**

PLEASE NOTE this transaction will appear as 'Daniel Son'.

All the best!

Single Marijuana Seeds Canada

[Home](#) | [Latest Seeds](#) | [Best Sellers](#) | [Twitter](#) | [Facebook](#)



**Neil Allard**

---

**From:** "M S Canada" <info@m-s-canada.com>  
**Date:** Monday, January 27, 2014 6:32 PM  
**To:** [REDACTED]  
**Subject:** Order confirmation for order #2-66086

 single marijuana seeds canada

**Order Confirmation — #2-66086**

Thank you for your order, placed 28 Jan 2014.

PLEASE NOTE this transaction will appear as 'Daniel Son'.

**Shipping address**

Neil Allard

[REDACTED]

Nanaimo, British Columbia [REDACTED]  
Canada

**Billing address**

Neil Allard

[REDACTED]

Nanaimo, British Columbia [REDACTED]  
Canada

**Your order:**

1x CBD Crew Critical Mass - Feminized	\$13.13
1x CBD Crew Shark - Feminized	\$13.13
1x CBD Crew Nordle - Feminized	\$13.13
4x Mr Nice Shit - Regular	\$3.92
3x Mr Nice Early Queen - Regular	\$5.05
6x KC Brains Mango - Regular	\$0.70
1x Barney's Farm Pineapple Chunk - Feminized	\$10.67
1x Dutch Passion Strawberry Cough - Feminized	\$14.07
3x Sensi Ruderalis Skunk - Regular	\$7.67
3x KC Brains Mango - Feminized	\$3.24
3x Barney's Farm LSD - Feminized	\$3.88
1x Next Generation Timewarp - Regular	\$8.58
2x Barney's Farm Critical Kush - Feminized	\$11.18

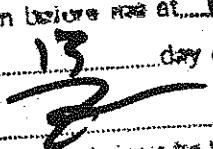
Subtotal: \$174.47  
Shipping: \$8.50  
VAT: \$0.00  
**Total: \$182.97 CAD**

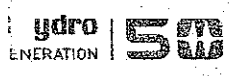
PLEASE NOTE this transaction will appear as 'Daniel Son'.

All the best!

Single Marijuana Seeds Canada

[Home](#) | [Latest Seeds](#) | [Best Sellers](#) | [Twitter](#) | [Facebook](#)

This is Exhibit "K" returned to me  
 the affidavit of Neil Allard  
 sworn before me at Quayside BC  
 this 13 day of Aug 2014  
  
 A Commissioner for taking Affidavits  
 for British Columbia



5029 BCMSR X0368L

Billed For  
**V ALLARD**  
 [Redacted]  
**NAIMO BC** [Redacted]

Billing Date: Jun 06, 2012  
 Account Number: 8167 879  
 Pay By: Jun 28, 2012  
 Please Pay: \$26.25

Account Number: 005842161  
 Go paperless and get instant access to your account. To get started, visit [bchydro.com/youraccount](http://bchydro.com/youraccount)

meter reading information  
 meter # 4674109  
 176  
 389  
 days 213

**Customer Service**

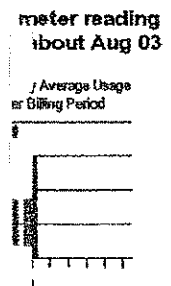
Phone: 1-800-224-9376 Power Out? 1-888-769-3766  
 Mail to: BC Hydro, PO Box 9501 Stn Terminal, Vancouver BC, V6B 4N1

**Previous Bill**

Balance payable from your previous bill 26.19  
 Thank you for your payment Apr 20, 2012 26.19CR

**BC Hydro**

Balance from your previous bill \$0.00  
**Electric Charges**  
 Apr 05 to Jun 05 (Residential Conservation Rate 1101)  
 Basic Charge: 62 days @ \$0.15050 /day 9.33\*  
 Usage Charge\*  
 Step 1: 213 kW.h @ \$0.06800 /kW.h 14.48\*  
 Step 2: 0 kW.h @ \$0.10190 /kW.h 0.00  
 Rate Rider at 5.0% 1.19\*  
 \* HST 3.00  
 BC HST Residential Energy Credit 1.75CR  
**\$26.25**



Action to save  
 utility and money.  
 431 9463 or visit  
[bchydro.com/powersmart](http://bchydro.com/powersmart)

*pd*  
*June 15, 2012*

Your total consumption for the billing period is 213 kW.h and your Conservation Rate breakdown is as follows:

0 kWh @ 10.19¢  
 213 kWh @ 6.80¢  
 Your Step 1 threshold of 1376 kW.h is prorated based on 62 days

\*For more information on the Conservation Rate visit [bchydro.com/conservationrate](http://bchydro.com/conservationrate)

**Taxes**

The following is a summary of taxes billed to your account since your last invoice:  
 HST at 12 % on 25.00 3.00

**Balance payable \$26.25**

This is Exhibit "L" returned to in  
 the affidavit of Neil Allard  
 sworn before me at Duncan BC  
 this 13 day of Aug 2014  
 \_\_\_\_\_  
 A Commissioner for Taking Affidavits  
 for British Columbia



# STATEMENT OF USER RATES

ACCT NUMBER: 119909 BILLING PERIOD: Feb 14, 2012 972  
 ACCESS CODE: 159442 TO: Jun 11, 2012  
 DUE DATE: Jul 10, 2012 BILLING DATE: Jun 18, 2012



NAME: ALLARD NEIL VICTOR RENE  
 FOR SERVICE AT: [REDACTED]  
 ACCOUNT TYPE: RESIDENTIAL-SFD

ROUTE: 1702

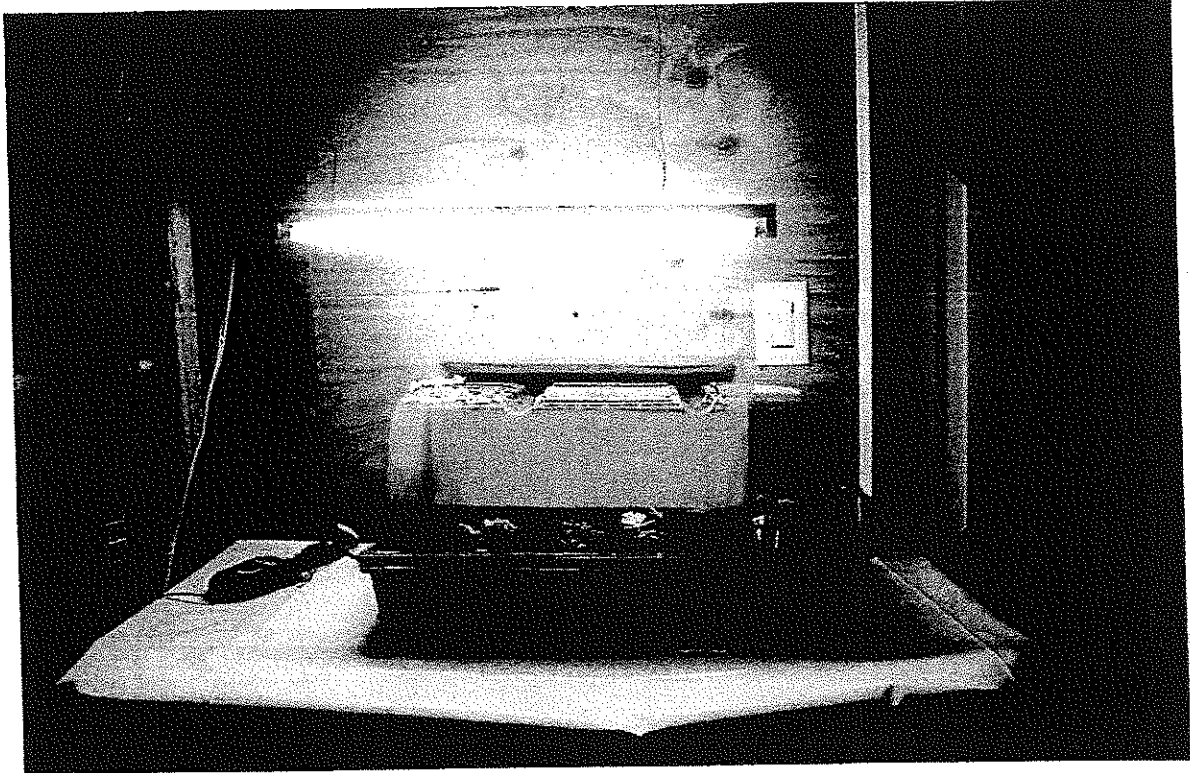
DATE	METER NO.	NO. OF DAYS	CURRENT READING	PREV READING	CONSUMPTION	AMOUNT
Jun 11, 2012	A-68648550	119	132	123	9 CU METERS / 1980 GALLONS	
					PREVIOUS BILL AMOUNT	135.94
Mar 5, 2012					PAYMENT	-20.40
Mar 5, 2012					PAYMENT	-129.14
					DISCOUNT	-6.80
Jun 18, 2012					WATER-METERED (A)	55.30
Jun 18, 2012					SEWER-SINGLE FAMILY RESIDENCE (A)	31.62
Jun 18, 2012					GARBAGE-CITY (A)	39.45

*pd June 28, 2012*

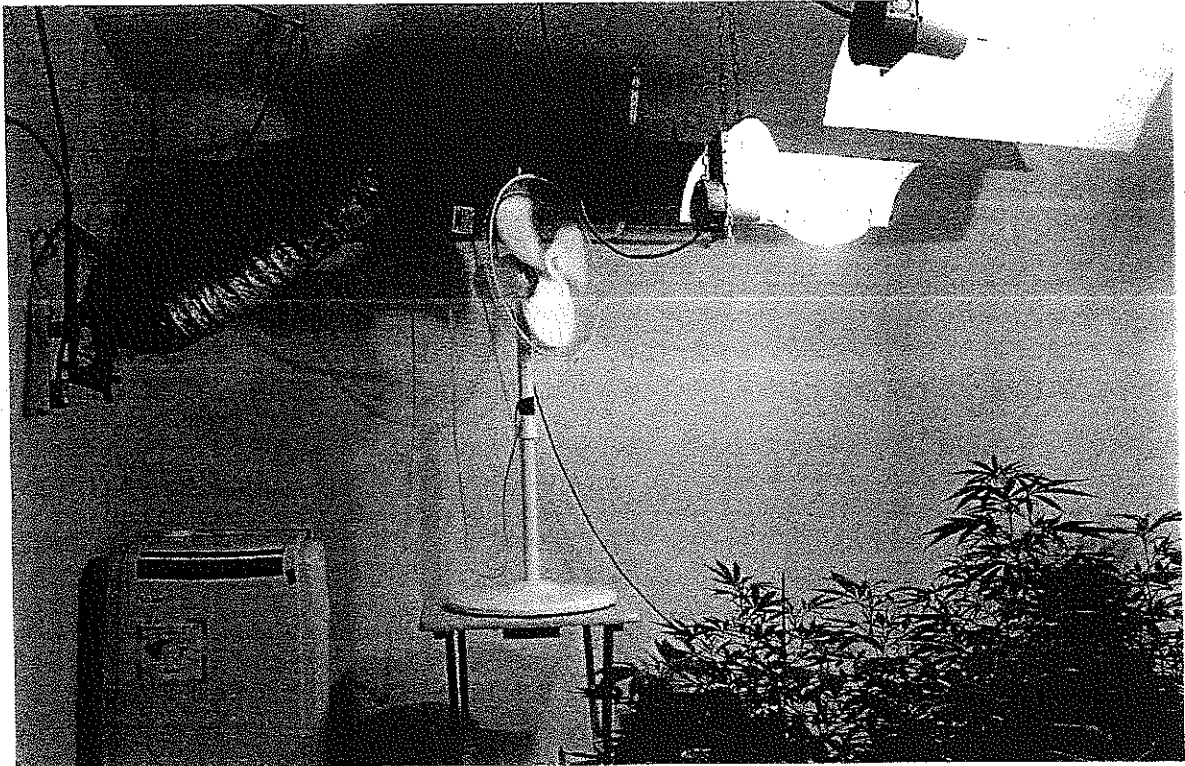
IF PAID AFTER DUE DATE: 105.97  
 DISCOUNT AVAILABLE: 6.32  
 IF PAID ON OR BEFORE DUE DATE: 99.65

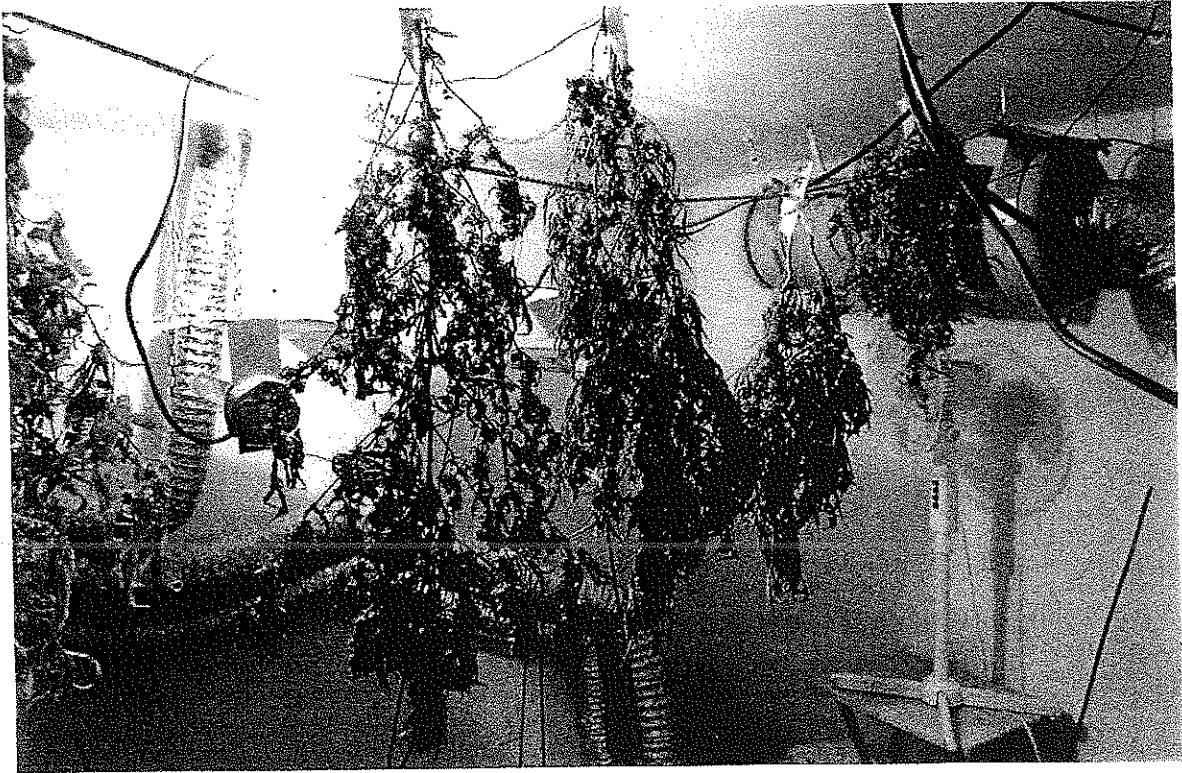
PLEASE NOTE: Watering restrictions are in effect until September 30, 2012.

MYCITY: Register your City Accounts, keep track of payment history, and track water consumption. Your all-in-one location for Tax, Utility, Dog, and Business License Accounts. Go to [mycity.nanaimo.ca](http://mycity.nanaimo.ca) click on "Register Now" and follow the online instructions.



This is Exhibit "M" referred to by  
the affidavit of Neil Allard  
sworn before me at DUNCAN BC  
this 13 day of Aug 2014  
[Signature]  
A Commissioner for Taking Affidavits  
for British Columbia





1. Introduction

2. Background

3. Methodology

4. Results

5. Discussion

6. Conclusion

7. References

8. Appendix

9. Index

10. Table of Contents

11. Abstract

12. Summary

13. Notes

14. Footnotes

15. Endnotes

16. References

17. Appendix

18. Index

19. Table of Contents

20. Abstract

21. Summary

22. Notes

23. Footnotes

24. Endnotes

25. References

26. Appendix

27. Index

28. Table of Contents

29. Abstract

30. Summary

31. Notes

32. Footnotes

33. Endnotes

34. References

35. Appendix

36. Index

37. Table of Contents

38. Abstract

39. Summary

40. Notes

41. Footnotes

42. Endnotes

43. References

44. Appendix

45. Index

46. Table of Contents

47. Abstract

48. Summary

49. Notes

50. Footnotes

51. Endnotes

52. References

53. Appendix

54. Index

55. Table of Contents

56. Abstract

57. Summary

58. Notes

59. Footnotes

60. Endnotes

61. References

62. Appendix

63. Index

64. Table of Contents

65. Abstract

66. Summary

67. Notes

68. Footnotes

69. Endnotes

70. References

71. Appendix

72. Index

73. Table of Contents

74. Abstract

75. Summary

76. Notes

77. Footnotes

78. Endnotes

79. References

80. Appendix

81. Index

82. Table of Contents

83. Abstract

84. Summary

85. Notes

86. Footnotes

87. Endnotes

88. References

89. Appendix

90. Index

91. Table of Contents

92. Abstract

93. Summary

94. Notes

95. Footnotes

96. Endnotes

97. References

98. Appendix

99. Index

100. Table of Contents