



United States Cannabis Coalition  
PO Box 329  
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Drug Enforcement Agency  
8701 Morrisette Drive  
Springfield, Virginia 22152

Re: Docket No. DEA-1362

Attn: Administrator Anne Milgram

I am writing to formally request a meeting and public hearing with the Drug Enforcement Administration to discuss the current re-scheduling of cannabis under the Controlled Substances Act. The scientific evidence and shifting societal attitudes strongly indicate that cannabis's current Schedule I classification is no longer tenable.

However, I want to caution against the possibility of cannabis simply being rescheduled to Schedule III. While this would represent an improvement over the status quo, in many ways it could be just as problematic, if not worse, than the current paradigm.

Schedule III substances are still considered to have an accepted medical use, but also a moderate to low potential for abuse and physical/psychological dependence. This would subject cannabis to a complex web of regulatory requirements and restrictions that could severely limit patient access and the development of a legitimate, regulated industry.

Rescheduling cannabis to Schedule III could also perpetuate many of the same law enforcement and criminal justice issues that we've seen with the current Schedule I status. Police could still use the presence of cannabis as probable cause for searches and arrests. Individuals could face felony charges for possessing or distributing amounts that exceed arbitrary thresholds.



In contrast, the only reasonable path forward is the full de-scheduling of cannabis from the Controlled Substances Act altogether. This is the approach taken by both the Democrat-sponsored Marijuana Opportunity Reinvestment and Expungement Act (H.R.3617) and the Republican-sponsored Common Sense Cannabis Reform for Veterans, Small Businesses, and Medical Professionals Act (H.R.1017)

De-scheduling would allow states to regulate cannabis as the people they represent see fit per the 10<sup>th</sup> Amendment of the U.S. Constitution; moreover, it would remove the current barriers to research, medical use, and the development of a legitimate, safe industry. It would also eliminate the racially disparate enforcement and criminalization that has defined the failed "War on Drugs."

I believe a thorough, evidence-based review by the DEA would inevitably lead to this conclusion. That is why I am once again formally requesting an in-person meeting, as well as a public hearing where medical experts, patients, and other stakeholders can provide testimony on this critical issue.

The health and well-being of the American people are at stake. I look forward to working constructively with the DEA to chart a new, sensible path forward on cannabis policy. Please let me know how I can assist in this process.

Sincerely,

Patrick H Moore

Director

United States Cannabis Coalition