

# Physician's Medical Marijuana Approval and Exemption Letter

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

To whom it may concern,

I am a physician in good standing, licensed in the state of California.

\_\_\_\_\_ is my patient.  
After a medical examination, it is my opinion that this individual has a health condition that may benefit from the therapeutic use of cannabis and therefore by my signature below I have qualified them for medical marijuana in accordance with Health and Safety Code 11362.5.

Sincerely,

\_\_\_\_\_, M.D.

State License # \_\_\_\_\_

**Addendum:** This provision affirms that this patient has discussed their medical marijuana use with me and advised me that, due to personal circumstances, the state and county garden guidelines for qualified immunity are not adequate to provide for his/her personal medical marijuana dosage. Therefore s/he is hereby exempt from the statutory Safe Harbor guideline of HS11362.77.(a) and is authorized to cultivate and possess a reasonable greater quantity, pursuant to the California Supreme Court rulings *People v Mower* and *People v Kelly*.

\_\_\_\_\_, M.D.

Please place patient's driver's license or state ID card in this space and photocopy document before signing. Sign version with copied identification.