

# Petition Florida Senators Martinez and Nelson: **Support Medical Marijuana Research Now!**

**To Hon. Mel Martinez and Hon. Bill Nelson:**

As your constituents, we the undersigned are asking you to support medical marijuana research by co-signing the Kennedy/Kerry letter to Acting DEA Administrator, Michele Leonhart, urging her agency to follow the recommendation of Administrative Law Judge Mary Ellen Bittner and grant a license to Prof. Lyle Craker of UMass Amherst to grow marijuana exclusively for federally-approved research.

1.

Name	Signature		
Email Address	Phone Number		
Street Address	City	State	Zip Code

2.

Name	Signature		
Email Address	Phone Number		
Street Address	City	State	Zip Code

3.

Name	Signature		
Email Address	Phone Number		
Street Address	City	State	Zip Code

4.

Name	Signature		
Email Address	Phone Number		
Street Address	City	State	Zip Code

**Please send petitions to Americans for Safe Access \* 1322 Webster St. Ste. 402 \* Oakland, CA 94612 \* Fax: (510) 251-2036\***

Thank you for signing ASA's petition. The information you have provided in signing this petition will be added to ASA's national e-mail alert list.

# Petition Florida Senators Martinez and Nelson: **Support Medical Marijuana Research Now!**

5.

---

Name	Signature
------	-----------

---

Email Address	Phone Number
---------------	--------------

---

Street Address	City	State	Zip Code
----------------	------	-------	----------

6.

---

Name	Signature
------	-----------

---

Email Address	Phone Number
---------------	--------------

---

Street Address	City	State	Zip Code
----------------	------	-------	----------

7.

---

Name	Signature
------	-----------

---

Email Address	Phone Number
---------------	--------------

---

Street Address	City	State	Zip Code
----------------	------	-------	----------

8.

---

Name	Signature
------	-----------

---

Email Address	Phone Number
---------------	--------------

---

Street Address	City	State	Zip Code
----------------	------	-------	----------

9.

---

Name	Signature
------	-----------

---

Email Address	Phone Number
---------------	--------------

---

Street Address	City	State	Zip Code
----------------	------	-------	----------