

**Illinois Department of Public Health
Intent to Present Technical Evidence about a Petition Being Reviewed**

Persons wishing to present technical evidence about a petition being reviewed are required to file a statement of intent with the Department. **Statements of Intent to Present Technical Evidence must be submitted to the Division of Medical Cannabis via email to dph.medicalcannabis@illinois.gov by 5 PM on Wednesday, September 30 or postmarked by September 28, 2015 if sent via regular mail.** One statement of intent to present is required for each speaker. Organizations are encouraged to select one speaker to represent the group. Incomplete statements shall not be accepted. The statement of intent to present technical evidence shall include:

1. **Name of the person filing the statement and organization represented (if any).**

2. **For which petition for a debilitating condition do you wish to present technical evidence?**

Check one

<input type="checkbox"/> Autism	<input type="checkbox"/> Intractable Pain
<input type="checkbox"/> Chronic Pain due to Trauma	<input type="checkbox"/> Irritable Bowel Syndrome
<input type="checkbox"/> Chronic Pain Syndrome	<input type="checkbox"/> Osteoarthritis
<input type="checkbox"/> Chronic Post-Operative Pain	<input type="checkbox"/> Post-Traumatic Stress Disorder

3. **Do you support or oppose the petition at issue.** Check one

<input type="checkbox"/> I support the petition	<input type="checkbox"/> I oppose the petition
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4. **Indicate the approximate amount of time needed to present (limit to no more than 3 minutes).**

5. **Indicate if a closed session is requested.** Check one

<input type="checkbox"/> I request closed session to present my technical evidence	<input type="checkbox"/> I will present in the open forum
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6. **List of exhibits, if any, to be offered into evidence at the hearing.**

7. **Provide a summary or outline of the anticipated testimony you will provide at the hearing.**

Mail the statement of intent to Division of Medical Cannabis, Illinois Department of Public Health, 535 W. Jefferson Street; Springfield, IL 62761-0001.