



THE STATE  
of **ALASKA**  
GOVERNOR MICHAEL J. DUNLEAVY

**Department of Law**

CIVIL DIVISION

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August 13, 2025

The Honorable Nancy Dahlstrom  
Lieutenant Governor  
P.O. Box 110015  
Juneau, Alaska 99811-0015

Re: *25ANMA Ballot Measure Application Review*  
AGO No. 2025102049

Dear Lieutenant Governor Dahlstrom:

You asked us to review an initiative application for a proposed bill entitled:

An Act establishing a regulated access program for certain natural medicine substances for therapeutic use; Creating the Natural Medicine Control Board to administer regulated access to natural medicine in Alaska; Decriminalizing the personal use, possession, and cultivation of natural medicine for adults 21 years of age and older; Protecting the ceremonial, spiritual, and cultural use, possession, and cultivation of certain natural traditional medicines for adults 21 years of age and older; and Establishing a traditional use council to advise and support the Natural Medicine Control Board on traditional natural medicine practices. (25ANMA)

We review initiatives to ensure they meet constitutional and statutory requirements, without considering the merits of any initiative. We have previously advised certification of a similar initiative concerning marijuana and the Marijuana Control Board, which became law. Because this initiative is like that previous initiative, the application is in the proper form, and both the proposed bill and the application comply with the constitutional and statutory provisions governing initiatives, we recommend that you certify this application.

**I. The proposed bill**

The bill proposed by this initiative has twelve sections.

**Section 1** would add a new chapter, AS 17.39, titled “The Regulation of Natural Medicine.”

**Section 2** would create a new statute, AS 17.39.010, setting out the findings and intent of the Act in three subsections.

- The first subsection states findings about Alaska’s high rate of mental illness, suicide, and substance abuse, including among its high per-capita veteran population; the inadequacy of existing treatments; a growing body of scientific research supporting that natural medicines, administered in therapeutic settings, may help; and the desire of Alaskans to decriminalize personal use and create a regulated access program for natural medicines.
- The second states that the purpose of the Act is to regulate and provide legal access to natural medicines for use by adults 21 and older; to respect the longstanding use of natural medicines by indigenous cultures; to provide public education about the safe and responsible use of these medicines; and to develop training and guidance for facilitators, practitioners, and first responders.
- The third provides that the Act does not exempt any individual or entity from complying with federal law, nor does the Act pose any obstacle to federal law enforcement of federal law.

**Section 3** would establish the Natural Medicine Control Board, the Natural Medicine Advisory Committee, and the Traditional Use Council as follows:

- **AS 17.39.100.** This statute creates the Natural Medicine Control Board as a regulatory and quasi-judicial agency housed in the Department of Commerce, Community, and Economic Development. It establishes a board of seven voting members appointed by the governor and confirmed by the legislature. The statute prescribes the qualifications and requirements of board membership and defines terms in this section of the proposed bill.
- **AS 17.39.105.** The statute requires staggered three-year terms for board members and the filling of a vacancy within 30 days. A board member who serves for three successive terms may not be reappointed for three years after last serving on the board. The board selects a chair among its members.

- **AS 17.39.110.** Board members do not receive a salary but are entitled to statutory per diem and travel expenses.
- **AS 17.39.120.** The board meets at the call of the chair and at least once a year. Four board members constitute a quorum. A majority of the entire board must approve applications for new licenses, renewals, transfers, suspensions, and revocations.
- **AS 17.39.130.** The board oversees the implementation of the natural medicine program, including licensing and regulation of various activities related to natural medicine. It is responsible for proposing and adopting regulations, reviewing license applications, hearing appeals from the actions of staff enforcing the Act, and providing training guidance to other departments.
- **AS 17.38.140.** The board must adopt necessary regulations within 12 months of the Act's effective date. The regulations cannot prohibit the operation of natural medicine facilities, including by making their operation "unreasonably impracticable." They must cover a wide range of topics, including safety, licensing, advertising, license fees, and civil penalties for violations. The board also must establish a committee responsible for a regulated access program for ibogaine within six months of the Act's effective date and adopt regulations for that program within a year or two of the Act's effective date.
- **AS 17.39.150.** The board is supported by paid staff provided by the department, including a director.
- **AS 17.39.160.** The governor shall appoint a director to the board within 60 days of the Act's effective date. The board may remove the director by a majority vote of the entire board, or the governor may remove the director for cause. The director must enforce the Act and regulations, and complete duties delegated by the board.
- **AS 17.39.170.** The statute establishes a Natural Medicine Advisory Committee to study and make regulatory recommendations to the board. The committee consists of 15 members, who are appointed by the governor (without legislative confirmation) and who serve staggered three-year terms. The statute prescribes the qualifications and requirements of committee membership and allows for the removal of members only for cause. The members receive statutory per diem and travel expenses.

- **AS 17.39.180.** The statute creates a Traditional Use Council to guide and support the board and Natural Medicine Advisory Committee on traditional or indigenous uses of natural medicine. The statute prescribes the qualifications for council members and allows removal only for cause. The Council has at least five members, who are appointed by the governor (without legislative confirmation) and who serve staggered three-year terms. Among other duties, it must develop guidance, educational resources, and a credentialing process for traditional practitioners. The members receive statutory per diem and travel expenses.

**Section 4** would create three new statutes relating to the personal use and consumption of natural medicine:

- **AS 17.39.200.** Adults 21 or older may lawfully cultivate, possess, and give away certain natural medicines (plants and fungi).<sup>1</sup> The cultivation area may not exceed 12 feet by 12 feet.
- **AS 17.39.210.** Cultivation of plants or fungi may only occur on the cultivator's own property or with the owner's consent in an area no larger than 12 feet by 12 feet. The cultivation area may not be subject to public view without the use of binoculars, aircraft, or other optical aids. Cultivated plants and fungi may not be sold and must be reasonably secured from access by those under 21. A person who violates this section may be fined up to \$1,000.
- **AS 17.39.220.** The statute bans the consumption of natural medicine in public with fines of up to \$100 for violations.

**Section 5** would create a new statute, **AS 17.39.230.** This statute decriminalizes the possession, cultivation, preparation, distribution, and use of traditional medicine by a traditional practitioner for traditional purposes. It also decriminalizes the possession, transport, and use of traditional medicine by a person over 21 years of age under the guidance or direction of a traditional practitioner. A traditional practitioner must be certified as a traditional practitioner by the Traditional Use Council. Traditional use practices are exempt from provisions of the Act or regulations that interfere with cultural or spiritual traditions, but traditional use is not exempt from general health and safety regulations established by the Act, the board, or the council.

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<sup>1</sup> These are "fungi containing psilocybin or psilocyn, psilocybin or psilocyn in extract or concentrated form, or plants or fungi capable of producing psilocybin, psilocyn, dimethyltryptamine (DMT), or mescaline (except for Peyote)." Section 4, AS 17.39.200(a)(1).

**Section 6** would create a new statute, **AS 17.29.240**, allowing a person 21 or older to manufacture, possess, sell or buy natural medicine or traditional medicine accessories.

**Section 7** would create four new statutes related to licensing:

- **AS 17.39.300.** Licensed operations and conduct related to natural medicine facilities are lawful and protected from criminal or civil penalties.
- **AS 17.39.310.** The board may issue various types of licenses for facilities and individuals involved in the natural medicine and ibogaine industries.
- **AS 17.39.320.** This statute requires the board to review applications for licenses and to begin receiving and processing applications no later than July 1, 2028. The board must issue an annual registration to an applicant within 90 days after receiving an application, unless the board finds that the applicant is not in compliance with the applicable statutes and regulations.
- **AS 17.39.330.** This statute requires that individuals be licensed to practice facilitation and that licensed facilitators provide certain information to participants before specified types of sessions defined in AS 17.39.900.

**Section 8** creates a new statute, **AS 17.39.340**. This statute requires the board to work with the advisory committee and other organizations to develop free public educational resources on the safe use of natural medicine.

**Section 9** creates a new statute, **AS 17.39.400**. This statute states that local governments cannot prohibit licensed natural medicine facilities from operating or ban the transportation of natural medicine, natural medicine products, or traditional medicine within its jurisdiction. Local governments may regulate the operation of natural medicine facilities as long as the local rules do not conflict with the state statutes.

**Section 10** creates a new statute, **AS 17.39.500**. This statute clarifies the limits of the Act, including stating that the Act does not allow operating vehicles or aircraft while under the influence of natural or traditional medicine; transferring natural or traditional medicine to or possession or cultivation by a person under the age of 21; possessing natural medicine or traditional medicine with the intent to sell other than for use or consumption at licensed locations or in the context of traditional use; and consuming natural medicine in public. It also states that the Act does not restrict employers from regulating or banning use nor does it require persons or entities to allow use or cultivation on their property. Lastly, the section states that nothing in the Act “is intended to require a person to violate federal law, to exempt a person from a federal law, or to obstruct the

enforcement of a federal law,” while offering protection from professional disciplinary actions against those who hold other types of licenses on the basis that they may have violated federal law by providing advice or services related to a natural medicine license.

**Section 11** contains 26 definitions of terms used in the Act, including “natural medicine” and “traditional medicine or traditional natural medicine.”

**Section 12** is a standard severability clause providing that if any portion of the Act is found invalid or unconstitutional, the remainder will not be affected. The section also provides that the Act supersedes any conflicting state or local laws.

## **II. Analysis**

Under AS 15.45.070, the lieutenant governor must review an initiative application within 60 calendar days of receipt and “certify it or notify the initiative committee of the grounds for denial.” The Division of Elections received the application for 25ANMA on June 18, 2025. Sixty calendar days later is August 17, 2025.

In evaluating an initiative application, the lieutenant governor must determine whether it is in the “proper form.”<sup>2</sup> Under AS 15.45.080, the lieutenant governor must deny certification if “(1) the proposed bill to be initiated is not confined to one subject or is otherwise not in the required form; (2) the application is not substantially in the required form; or (3) there is an insufficient number of qualified sponsors.” The lieutenant governor must decide whether the application complies with “the legal procedures for placing an initiative on the ballot, and whether the initiative contains statutorily or constitutionally prohibited subjects which should not reach the ballot.”<sup>3</sup> This requires consideration of both the form of the application and the form of the proposed bill.

### **A. Form of the application**

The form of an initiative application is prescribed by AS 15.45.030, which requires that an application include the

- (1) proposed bill;
- (2) printed name, the signature, the address, and a numerical identifier of not fewer than 100 qualified voters who will serve as sponsors; each signature page must include a statement that the sponsors are

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<sup>2</sup> Alaska Const. art. XI, § 2.

<sup>3</sup> *McAlpine v. Univ. of Alaska*, 762 P.2d 81, 87 n.7 (Alaska 1988).

qualified voters who signed the application with the proposed bill attached; and

- (3) designation of an initiative committee consisting of three of the sponsors who subscribed to the application and represent all sponsors and subscribers in matters relating to the initiative; the designation must include the name, mailing address, and signature of each committee member.

The 25ANMA application includes the proposed bill and the requisite statement on each signature page. It also designates an initiative committee of three sponsors, who provided their information. We understand the Division of Elections has reviewed the sponsor signatures and determined that the application contains the signatures and addresses of 218 qualified voters, which satisfies the 100-sponsor requirement.

## **B. Form of the proposed bill**

The form of a proposed bill is prescribed by AS 15.45.040, which requires that (1) the bill be confined to one subject; (2) the subject be expressed in the title; (3) the bill contain an enacting clause that states, “Be it enacted by the People of the State of Alaska”; and (4) the bill includes no prohibited subjects. The lieutenant governor may deny certification if a proposed bill does not meet these requirements or if “controlling authority establishes its unconstitutionality.”<sup>4</sup> The bill proposed by 25ANMA meets the statutory requirements and is not clearly unconstitutional under existing authority.

### **1. The proposed bill satisfies AS 15.45.040.**

First, the bill is confined to the subject of regulating the use of “natural medicine.”<sup>5</sup> As discussed in more detail below, the bill’s definitions of “natural medicine” and “traditional natural medicine” include hallucinogenic plants and fungi and their derivatives. As expressed in the title, the bill proposed by 25ANMA “establishes a regulated access program for certain natural medicine substances for therapeutic use,” establishes the Natural Medicine Control Board to “administer regulated access to natural medicine,” decriminalizes the use, possession, and cultivation of natural medicine by

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<sup>4</sup> *Kohlhaas v. State*, 147 P.3d 714, 717 (Alaska 2006) (quoting *Kodiak Island Borough v. Mahoney*, 71 P.3d 896, 900 (Alaska 2003)); *State v. Vote Yes for Alaska’s Fair Share*, 478 P.3d 679, 690 n.58 (Alaska 2021).

<sup>5</sup> Section 11, AS 17.39.900(12) of the proposed bill defines natural medicine as “psilocybin, psilocyn, dimethyltryptamine, or mescaline (excluding peyote) derived from natural plants or fungi, or any other natural medicine approved by the board pursuant to this chapter.”

adults, creates protections for the cultural use of “certain traditional medicines,”<sup>6</sup> and establishes a traditional use council to advise the Natural Medicine Control Board on “traditional natural medicine practices.”

While the proposed bill is comprehensive, its provisions share a nexus and are logically related to regulating natural medicine use, whether that use is personal, therapeutic, or traditional.<sup>7</sup> 25ANMA therefore satisfies the single-subject rule.

Next, the proposed bill includes the requisite enacting language and a title that expresses the subject of regulating the use of natural medicine.

Finally, the bill does not contain a prohibited subject. Under article XI, section 7 of the Alaska Constitution and AS 15.45.010, a proposed bill may not dedicate revenue; make or repeal appropriations; create courts, define their jurisdiction, or prescribe their rules; or enact local or special legislation. Laws that “merely create new government programs or liabilities do not constitute appropriations,” so the creation of the Natural Medicine Control Board, Natural Medicine Advisory Committee, and Traditional Use Council does not make an appropriation.<sup>8</sup> The bill applies statewide, so it is not a local or special act. Nor does it dedicate revenue, or create courts or prescribe their jurisdiction or rules. Thus, the bill’s regulation of the use of natural medicine is not a prohibited subject.

## **2. The proposed bill is not clearly unconstitutional.**

In reviewing an initiative application, the lieutenant governor does not conduct a comprehensive pre-election review of the constitutionality of a proposed bill but may reject a bill if it “proposes a substantive ordinance where controlling authority establishes

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<sup>6</sup> Section 11, AS 17.39.900(25) of the proposed bill defines “traditional medicine” or “traditional natural medicine” to mean “plants or fungi, including but not limited to psilocybin-containing mushrooms, ayahuasca, and other dimethyltryptamine-containing substances, iboga and other ibogaine containing substances, San Pedro cactus, and other mescaline containing cacti (except Peyote) and other entheogenic substances approved by the board, used for healing or spiritual purposes in traditional use contexts.”

<sup>7</sup> *Meyer v. Alaskans for Better Elections*, 465 P.3d 477, 499 (Alaska 2020) (“[T]he question is not whether the initiative could be split into separate measures, but whether the various provisions ‘embrace some one general subject.’”) (quoting *Gellert v. State*, 522 P.2d 1120, 1123 (Alaska 1974)).

<sup>8</sup> *McAlpine v. University of Alaska*, 762 P.2d 81, 90–91 (1988) (holding that an initiative would make an appropriation where it “designat[e] the use of state assets in a manner that is executable, mandatory, and reasonably definite with no further legislative action”).



its unconstitutionality.”<sup>9</sup> This is a high bar, requiring clear unconstitutionality, as would be the case, for example, if the bill would mandate school segregation based on race or would call for Alaska’s secession from the United States.<sup>10</sup>

Psilocybin, psilocyn, dimethyltryptamine, mescaline, and iboga—substances, among others, that 25ANMA defines as “natural medicine” or “traditional natural medicine”—are Schedule 1 hallucinogenic substances under the federal Controlled Substances Act (CSA).<sup>11</sup> The federal government categorizes Schedule 1 drugs as having no currently accepted medical use for treatment in the United States and lacking accepted safety for use of the drug under medical treatment.<sup>12</sup> In contrast to other substances classified by the CSA, it is illegal to prescribe, administer, or dispense Schedule 1 drugs for medical use.<sup>13</sup> And under federal law, simple possession of Schedule 1 substances can result in a prison sentence of up to one year.<sup>14</sup>

We have previously considered the “interplay between restrictive federal drug control laws and permissive state laws that allow the medical or personal use” of another Schedule 1 substance—marijuana.<sup>15</sup> In 2013, we reviewed an initiative petition—13PSUM—that provided for the personal use of marijuana and the operation of retail marijuana stores.<sup>16</sup> 13PSUM also created the Marijuana Control Board, tasked with

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<sup>9</sup> *Kohlhaas*, 147 P.3d at 717 (quoting *Kodiak Island Borough*, 71 P.3d at 900); *Pebble Ltd. P’ship ex rel. Pebble Mines Corp. v. Parnell*, 215 P.3d 1064, 1077 (Alaska 2009) (permitting “pre-election review of initiatives where the initiative is clearly unconstitutional or clearly unlawful”); *State v. Tr. the People*, 113 P.3d 613, 625 n.50 (Alaska 2005); *Vote Yes for Alaska’s Fair Share*, 478 P.3d at 690 n.58.

<sup>10</sup> *Kohlhaas*, 147 P.3d at 717.

<sup>11</sup> 21 C.F.R. § 1308.11(d). The proposed bill would supersede current Alaska statutes making all possession of the substances illegal. *See* AS 11.71.150 (Schedule IIA(b)); AS 11.71.050(a)(4) (providing that possession of any schedule IIA hallucinogenic is a misdemeanor, misconduct involving a controlled substance in the fifth degree).

<sup>12</sup> 21 U.S.C. § 812(b)(1) (explaining findings necessary to place a drug or substance in Schedule 1).

<sup>13</sup> Off. of Diversion Control, U.S. Drug Enf’t Admin., Practitioner’s Manual (2023) at 9.

<sup>14</sup> 21 U.S.C. § 844(a).

<sup>15</sup> *See* 2013 Op. Alaska Att’y Gen. (June 11), 2013 WL 7029127.

<sup>16</sup> *Id.* at \*1 – 2.

adopting regulations governing marijuana facilities and overseeing the registration and operation of those establishments.<sup>17</sup>

In analyzing 13PSUM’s constitutionality, we recognized that conflicts between federal and state drug laws can “raise[] complex, often highly academic questions of federalism, pre-emption, and enforcement.”<sup>18</sup> While the CSA strictly prohibits the manufacture, distribution, and possession of marijuana, we found no controlling authority sufficient to declare the initiative unconstitutional on its face.<sup>19</sup> Medical marijuana laws in effect at that time in Alaska and other states were—and in many cases still are—in apparent conflict with CSA.<sup>20</sup> In reviewing earlier ballot measures attempting to legalize marijuana for personal use, we previously advised certification.<sup>21</sup> For those reasons, we recommended certification of 13PSUM, which was passed into law and remains in effect today.<sup>22</sup>

The same reasoning holds true when applied to 25ANMA—we see no significant distinction based on the type of Schedule 1 substance at the center of the initiative application. Questions of federal enforcement (or lack thereof) and pre-emption when a state enacts divergent drug control laws remain largely unresolved.<sup>23</sup> To the extent 25ANMA presents pre-emption and enforcement concerns, Alaska’s marijuana regulatory scheme currently implicates those same legal issues.

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<sup>17</sup> *Id.* at \*3.

<sup>18</sup> *Id.* at \*5. The doctrine of pre-emption generally requires that “[u]nder the Supremacy Clause of the federal constitution, state laws that interfere with federal laws are invalid.” *See State v. Dupier*, 118 P.3d 1039, 1049 (Alaska 2005). There is, however, a presumption against federal preemption of state law. *Allen v. State, Dep’t of Health & Soc. Servs., Div. of Pub. Assistance*, 203 P.3d 1155, 1160 (Alaska 2009).

<sup>19</sup> 2013 Op. Alaska Att’y Gen. (June 11), 2013 WL 7029127 at \*6.

<sup>20</sup> *Id.* at \*5.

<sup>21</sup> *See* 2001 Inf. Op. Att’y Gen. (Nov. 9), 2001 WL 34695590 (recommending certification of ballot measure proposing to decriminalize and regulate marijuana).

<sup>22</sup> 2013 Op. Alaska Att’y Gen. (June 11), 2013 WL 7029127 at \*6; *see* AS §§ 17.38.010–900 (Chapter 38, The Regulation of Marijuana).

<sup>23</sup> *See* Alex Kreit, Federal Nonenforcement in the Face of State Drug Policy Reforms, 21 Ohio St. J. Crim. L. 239, 252 (2024) (“Because of the anti-commandeering principle, Congress cannot use preemption to require a state to retain a prohibition law that it wants to eliminate.”); Erwin Chemerinsky et al., Cooperative Federalism and Marijuana Regulation, 62 UCLA L. Rev. 74, 103 (2015) (“A state can constitutionally decide not to criminalize conduct under state law even if such conduct offends federal law.”).

Moreover, in recent years, two other states have passed legislation similar to 25ANMA. In 2020, Oregon voters passed a ballot measure legalizing the manufacture, distribution, and possession of psilocybin for therapeutic purposes.<sup>24</sup> And in 2022, Colorado passed a similar proposition authorizing the distribution and use of psilocybin at “healing centers,” or licensed service centers.<sup>25</sup> Like 25ANMA, Colorado’s law goes beyond the Oregon scheme and authorizes the personal use, cultivation, and sharing without remuneration of natural medicine (defined as psilocybin, DMBT, ibogaine, and mescaline).<sup>26</sup> Neither state’s laws have resulted in a court challenge or act by the federal government that would lead us to believe that 25ANMA is clearly unconstitutional.

Thus, we do not believe 25ANMA is clearly unconstitutional under existing authority, such that you should deny certification.

#### **IV. Proposed ballot title and summary**

We have prepared a ballot title and summary to assist you in complying with AS 15.45.090 and AS 15.45.180, as is this office’s standard practice. Under AS 15.45.090(a)(2), petitions for a certified initiative must include “an impartial summary of the subject matter of the bill.” Under AS 15.45.180(a), the lieutenant governor may also have to prepare a ballot proposition, including a “true and impartial summary of the proposed law,” and a ballot title. The ballot title must “indicate the general subject of the proposition” in 25 words or less, and the word count of the summary must be less than 50 times the number of sections in the proposed bill.<sup>27</sup> The proposition must adhere to the readability policy described in AS 15.80.005 and ask whether the proposed bill should become law.<sup>28</sup>

The bill proposed by 25ANMA has twelve sections, which would allow a summary of up to 600 words. Below is a ballot title with 18 words and a summary with 291 words. Using the readability formula described in AS 15.80.005(c), the summary has a score of 35.76, which falls short of the target score of 60. This is likely because the proposed bill is lengthy and complex, and includes uncommon or difficult terms like “dimethyltryptamine,” and “psilocybin.” These terms must be included in the ballot

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<sup>24</sup> Oregon Psilocybin Services Act, 2021 Or. Laws ch. 1, § 33 (Ballot Measure 109) (codified at Or. Rev. Stat. §§ 475A.210-722 (2022)).

<sup>25</sup> Kreit, *supra* note 23, at 268-69.

<sup>26</sup> Colo. Rev. Stat. § 18-18-434(5)(a); Colo. Rev. Stat. § 18-18-434(12)(b)(I).

<sup>27</sup> AS 15.45.180(a). “Section” here means “a provision of the proposed law that is distinct from other provisions in purpose or subject matter.” *Id.*

<sup>28</sup> AS 15.45.180(b).

summary to accurately explain the proposed bill. Where otherwise possible we have tried to use simple words. Our office has recommended a proposed ballot summary with a lower score for a complicated ballot initiative, and that summary was upheld by the Alaska Supreme Court.<sup>29</sup> We submit this ballot title and summary for your consideration:

**An Act Decriminalizing and Regulating the Use, Possession,  
and Cultivation of Hallucinogens**

The act would decriminalize and regulate the use of hallucinogens for therapeutic and traditional purposes. It would create a Natural Medicine Control Board, Traditional Use Council, and advisory committee. The act would apply to psilocybin, psilocyn, dimethyltryptamine (DMT), mescaline (excluding peyote), ibogaine, and other approved substances that come from plants or fungi.

The act would allow people 21 or older to possess and use these substances in private. It would also allow them to grow these substances, except for ibogaine, outside of public view in limited areas on their own property or someone else's property with permission. People could not sell the substances they grew. Violators of these provisions would be subject to fines of up to \$1,000.

The act would allow the distribution of hallucinogens by certified practitioners for traditional or indigenous practices. People older than 21 could use hallucinogens under the practitioners' guidance. Practitioners could be paid for their services.

The act would also allow the board to regulate facilities that handle and provide hallucinogens. These could include healing centers, where a licensed facilitator could provide hallucinogens, and facilities for cultivation, manufacturing, and testing for safety and potency. The bill would ban people from providing hallucinogens without a license.

The board would also develop free, evidence-based education on the best practices for using hallucinogens.

Among other limits, the act would not allow a person to operate a vehicle or aircraft while under the influence of hallucinogens or a person under 21 to possess, grow, or use hallucinogens. The act would allow a local

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<sup>29</sup> See 2007 Op. Alaska Att'y Gen. (Oct. 17), 2007 WL 3118191; *Pebble P'ship ex rel. Pebble Mines Corp.*, 215 P.3d at 1082–84.

government to regulate hallucinogens if it did not conflict with the act. The act would not require that people violate federal law and people would still be subject to federal law.

Should this initiative become law?

**V. Conclusion**

This initiative application is in the proper form. Both the application and the proposed bill comply with the constitutional and statutory provisions governing the use of the initiative. We therefore recommend that you certify the initiative application and notify the initiative committee of your decision. You may then begin to prepare a petition under AS 15.45.090.

Please contact us if we can further assist you on this matter.

Sincerely,

TREG TAYLOR  
ATTORNEY GENERAL

By: \_\_\_\_\_  
Claire C. Keneally  
Assistant Attorney General