IN THE SUPERIOR COURT OF HART COUNTY

STATE OF GEORGIA

STATE OF GEORGIA	:	
-VS-	:	**CASE NO. 19HR234M**
NATHAN ROSS JOHNSON	:	
Defendant.	:	
_____	:	

DEFENDANT'S MOTION TO HAVE THE COURT INSTRUCT THE JURY IN THE ABOVE STATED CASE OF THE DEFENDANT'S ARTICLE III STANDING TO CHALLENGE (WITH CONSTITUTIONAL QUESTION) THOSE GEORGIA STATUTES CONCERNING THE PRIVATE POSSESSION OF CANNABIS, THE PRIVATE USE AND CONSUMPTION OF CANNABIS, THE PRIVATE SHARING OF CANNABIS FOR NO REMUNERATIONS OR FOR SMALL REMUNERATIONS NOT INVOLVING A PROFIT, AS WELL AS, THE PRIVATE HOME-GROWING OF CANNABIS SATIVA L., WHETHER THIS CANNABIS SATIVA L GROWN HAS A THC LEVEL BELOW 0.3% OR HAS A THC LEVEL ABOVE 0.3%, AS AN INALIENABLE PRIVILEGE TO BE "LET ALONE FROM GOVERNMENT INTRUSION ON MATTERS THAT DO NOT DIRECTLY AFFECT THE PUBLIC SAFETY, HEALTH AND MORALS".

COMES NOW THE DEFENDANT, Nathan Ross Johnson, by and through himself, and Moves the Court to instruct the Jury in the above stated case of the defendant's Article III Standing to challenge (with Constitutional Question) those Georgia statutes concerning the private possession of cannabis, the private use and consumption of cannabis, the private sharing of cannabis for no remunerations or for small remunerations not involving a profit, as well as, the private home-growing of cannabis sativa l., whether this cannabis sativa l. grown has a THC level below 0.3% or has a THC level above 0.3%, as an inalienable privilege to be "let alone from government intrusion on matters that do not directly affect the public safety, health and morals".

The defendant's Motion for Article III Standing to challenge (Constitutional Question) is literally to save the defendant's own life, as well as to help others to improve the quality of their own lives in old age. The defendant and other long-term cannabis users are the exact people the State of Georgia should be trying to study for those effects of long-term cannabis use; instead, the defendant and others

are prosecuted into prisons for having proved through their very existence that cannabis (marijuana and hemp) use is safe for long-term use.

When peers of the defendant are old, but not old enough to receive Social Security payments, cannabis can actually help those peers' bodies to cope with those painful aches and illnesses that reminds those peers that **we're too damn old** to be out there in the workplace competing for manual labor jobs against children half our age. However, Georgia legislators do not want to listen to us actual marijuana users from the **60s** and **70s**, instead they want to listen to law enforcement officers, even though everything those officers say is secondhand hearsay rhetoric to maintain their true agenda of **Civil Asset Forfeitures** (Harry J. Anslinger's incentive to all law enforcement officers within the **Act of 1939**. (See **defendant's exhibit #261** filed on **June 2, 2022**).

MOTION OUTLINE

(1) FOUNDATION: ARTICLE III STANDING

In the Opinion given by Judge William A. Fletcher for the United States Court of Appeals for the Ninth Circuit and filed August 30, 2021, regarding case number 20-71433 and DEA number DEA-427 concerning Suzanne Sisley, M.D., Scottsdale Research Institute, LLC; Battlefield Foundation, DBA Field to Healed; Lorenzo Sullivan; Kendrick Speagle; Gary Hess, Petitioners, v. U.S. Drug Enforcement Administration; Merrick B. Garland, Attorney General; Anne Milgram, Administrator, Drug Enforcement Administration, Respondents, Argued and Submitted June 10, 2021, (See **Defendant's Exhibit #294**, filed on June 2, 2022, at 10:21 am. "Opinion 9th Circuit Sue Sisley v. USDEA 20-71433.")

On **page 11** of the Opinion on Sisley v. USDEA under "section A. Article III Standing", the Honorable Judge Fletcher, Circuit Judge stated:

"Article III standing requires that a plaintiff demonstrate (1) an "injury in fact," (2) "a causal connection between the injury and the conduct complained of," and (3) a likelihood "that the injury will be redressed by a favorable decision." Lujan v. Defs. Of Wildlife, 504 U.S. 555, 560-61 (1992) quotations omitted). **An injury in fact is an invasion of a legally protected interest that is concrete and particularized and actual or imminent, not conjectural or hypothetical."** Novak v. United States, 795 F .3d 1912, 1018 (9th Cir. 2015) (quotation marks and alteration omitted) (citing Lujan U.S. at 560). **"Because a generalized grievance is not a particularized injury, a suit alleging only generalized grievances fails for lack of standing."** Id. **"The fact that a harm is widely shared does not necessarily render it a generalized grievance."** Ecological Rts. Found. V. Pac. Gas & Elec. Co., 874 F 3d 1083, 1093 (9th Cir. 2017) (quoting Novak, 795 F.3d at 1018). **"Rather a grievance too 'generalized' for standing purposes is one characterized by its 'abstract and indefinite nature –for example, harm to the common concern for obedience to law.'"** Id. (quoting Novak, 795 F.3d at 1018)."

Dear, Honorable Justice [redacted] above are those requirements to obtain Article III Standing as written by the Honorable Judge Fletcher.

The defendant wanted to first establish **foundation** along with the chance to show how **Article III Standing** was applied to **Dr. Sue Sisley et al.**, whose research to formally prove that cannabis can and does improve the quality of life for veterans without those harmful side-effects associated with FDA Approved drug usage was restrictive, as a particularized injury; due to the misclassification of cannabis and not as a generalized grievance to be quickly rebuffed and ignored.

Judge Fletcher states on **page 12, "Rather they contend they suffer direct and particularized harms due to the misclassification of cannabis. Dr. Sisley and her associated institutions contend that the misclassification impedes their research efforts, and the veterans contend that it forecloses their access to medical treatment with cannabis through the Department of Veterans Affairs."**

The Honorable Judge Fletcher also states on **page 12, "While it is undoubtedly true that the interests of third parties would be affected by a rescheduling of cannabis, this fact does not diminish Petitioners' direct and particularized interest in rescheduling.** See Americans for Safe Access v. DEA, 706 F.3d 438, 445-49 (D.C. Cir. 2013). **We therefore conclude that Petitioners have Article III standing."**

The defendant now presents a brief background on the defendant's medical history to show that cannabis flowers were the defendants only anticoagulation and analgesics (painkillers) from **Jan. 1, 2016,** to **Feb. 13, 2019,** and that the V.A. hospital let-on that the Government knew the defendant was not in compliance with the use of Crestor as of **May 1, 2018,** but was still willing to continue the defendant's V.A. medical testing.

(2) BACKGROUND HISTORY ON THE DEFENDANT'S INJURY IN FACT - OCT. 24, 2011 – FEB. 13, 2019: (BEFORE ARREST)

The defendant was diagnosed with multiple life-threatening pulmonary embolisms (PE) and deep vein thrombosis (DVT) in left lung and left leg, respectively, on **October 24, 2011,** at Northside hospital, Atlanta, GA.

None of those doctors at Northside Hospital, Atlanta, GA., nor those doctors at the Mayo Clinic, Rochester MN., (medical consultants using telemetry) could determine the causation of those thromboembolisms (blood-clots) of the defendant; due to all 10 bodily systems of the defendant operating normally, including the defendant's pulmonary system.

So unusual was the defendant's condition that those Northside Hospital doctors totally ignored the defendant's use of tobacco from the age of 13-years as a causation; but did note that the defendant had knee surgery in **2004,** as the result of a motor vehicle crash (**MVC**) as a possible causation. However, that would imply that the defendant had somehow manage to fight off strokes and even death for over 7-years without any medical pharmaceuticals … thus, warranting more extensive and expensive research testing, in which the defendant would have to pay 20% of it, while on fixed-income.

The defendant checked himself out of Northside Hospital against those doctors' advice and against those doctors' attempt to forcibly hold the defendant there with a 1013 medical hold. The 3-day hospital stay had already exceeded $20,000 bringing the defendant's cost to approximately $4,000, in which the defendant did payoff the entire balance due, after receiving a $217,000 inheritance in **2013.**

The defendant left Northside Hospital and under the care of the V.A. hospital, the defendant was subjected to both coumadin (warfarin) anticoagulation and later various statin anti-cholesterol drugs, as brain-fog producing preventors of **arteriosclerosis** (contributing causation of **DVT** and **PE**) that were only tolerable to the defendant with the use of cannabis flowers.

Natural cannabis flowers and the V.A. hospital's synthetic drugs were all the defendant used from the end of **2011** through the end of **2015**.

During this stated period the V.A. did note mild emphysema and several small pulmonary nodules within the defendant's left lung that the V.A. found to be non-worsening and non-cancerous, respectively … These findings were due to the mild emphysema failing to get any worse (while the defendant continued to chain-smoke tobacco cigarettes and smoke cannabis flowers whensoever possible) year after year.

On **January 1, 2016,** the defendant stopped taking all synthetic medications prescribed by the V.A. hospital, after the defendant had failed a V.A. drug screen for cannabis abuse on **Dec. 8, 2015,** and all hydrocodone (opiates) were stopped. The defendant then started to rely totally upon natural cannabis flowers for the defendant's analgesic and anticoagulation needs, from **January 1, 2016,** to **February 13, 2019,** while continuing medical testing with the V.A. hospital.

The V.A. hospital observed no worsening of the mild emphysema nor was there any reoccurrence from DVT or PE experienced during this 3-years plus period of local and homegrown cannabis use only.

On **Apr. 12, 2018,** the V.A. hospital found the defendant's lungs clear, as stated on **page 32,** in the **Radiology Reports** section of the **defendant's Exhibit #2** (see white Medical Records notebook filed on **Oct. 2, 2019**) and the statement from Rebecca L. Salad DO, Staff Physician (Verifier), **"Findings**: Frontal and lateral projections of the chest were performed. The cardiomediastinal configuration is **normal**. The **lungs** are **clear** without effusion or consolidation. **Impression:** No evidence of an acute cardiopulmonary process."

On **May 1, 2018,** the V.A. hospital found that all of the defendant's labs were within acceptable limits as stated on **page 119** in the **Progress Notes** section of the **defendant's Exhibit #2** (see white Medical Reports notebook filed on **Oct. 2, 2019**), and the statement from Carol E. White, Registered Nurse, "PI advice pt that **all labs** are within **acceptable limit**, except lipids are very high, PI advice diet and exercise. And to be compliant with Crestor

Patient verbalized understanding."

The defendant addressed as the pt (patient) above, understood the following six things from the above medical reports : **(1)** the cardiomediastinal configuration of the cannabis abusing defendant's was normal, **(2)** the cannabis abusing defendant's lungs were clear without effusion or consolidation, **(3)** The cannabis abusing defendant showed no evidence of an acute cardiopulmonary process, **(4)** All labs of the cannabis abusing defendant were within acceptable limit, except lipids were very high, **(5)** The reclusive cannabis abusing defendant needs to diet and exercise more, and **(6)** The reclusive cannabis abusing defendant needs to start using (be compliant with) the FDA Approved Crestor (synthetic statin drug).

At this point it is clear thar the V.A. hospital knew the defendant was not compliant with the use of the Government's FDA Approved Crestor (synthetic Statin drugs) but the V.A. hospital still continued to send those statin medications to the reclusive cannabis abusing defendant anyway; so as the V.A. could continue running medical testing on this reclusive cannabis abusing defendant.

The V.A. hospital finds no need to scold or threaten to cutoff services to the reclusive cannabis abusing defendant, when the defendant's own behavior (action or inaction), doesn't cause the defendant any bodily harm?

This is evidenced by not one word being mentioned about the defendant needing to **stop chain-smoking tobacco cigarettes** (that the defendant has been smoking since **1973**) or to **stop smoking cannabis** (that the defendant has been smoking since **1973**, minus the 4-years in the U.S. Navy); however, there might (speculatively speaking) have been a slight V.A. (Government) acknowledgement

of the defendant's continued cannabis use as well, as was expressed in-directly with the statement, "except **lipids** are **very high**,".

All cannabinoids (THC, CBD, CBN, etc.) and all terpenes (Myrcene, limonene, Pinene, etc.) are **lipids** (substances that dissolve into fats and oils, but do not dissolve into water). Thus, those **very high lipids levels** were in direct correlation to the amount of very high cannabinoid and terpene being consumed from the defendant's privately homegrown cannabis plants.

The defendant elected through a **free-will** choice, not to destroy the defendant's own brain functioning abilities using the Government's FDA Approved Crestor (RosuvaStatin calcium) and chose instead to use the much safer Non-Government Approved cannabis plant (original treatment from the defendant's good LORD God and fair Mother Nature).

EVIDENTIARY PROOF: (a) The reclusive defendant's medical condition **stabilized** when using a combination of natural cannabis plants with the V.A. hospital's synthetic drugs; while **(b)** the reclusive defendant's medical condition **greatly improved** when the reclusive defendant used only the reclusive defendant's homegrown cannabis plants having a very high percentage of THC and **(c)** the reclusive defendant's diet and exercise routines were not contributing factors in the defendant's medical condition greatly improving.

(6) BACKGROUND HISTORY ON THE DEFENDANT'S INJURY IN FACT - FEB. 13, 2019, – PRESENT DAY: (AFTER ARREST)

The defendant's medical testing of cannabis sativa linnes' therapeutic effects on the defendant's body with the looking-the-other-way V.A. hospital, took an abrupt and unexpected turn when the defendant was arrested on **Feb. 13, 2019.**

The defendant could only wait unprotected by any anticoagulant (cannabis sativa linne consumption ended on **Feb. 13, 2019**) until the defendant's diet of poisonous FDA Approved foods, lack of routine exercise and chain-smoking of tobacco products brought on the reoccurrence of deep vein thrombosis (DVT) and pulmonary embolisms (PE.)

Around the end of **June 2020,** the defendant could feel those telltale signs of returning pain in the defendant's left leg and foot and quickly filed a motion for a medical necessity hearing to be allowed to use cannabis marijuana on **Jul 6, 2020**, which was promptly denied by the Court on **Aug. 6, 2020**.

Approximately **16-days** after the defendant's medical necessity motion was denied on **Aug. 6, 2020,** the defendant's left foot in sheer agonizing pain was diagnosed on **Aug. 20, 2020,** by Dr. Tom Tien Dang DPM at **Innovative Foot Care Inc.** as being "discolored toes and cold feet with dry scaly skin." and Dr. Dang ordered a CV VAS DOPPLER VENOUS of the LEFT LEG to be performed that same day at **Piedmont Athens Regional Royston Health Campus** (formerly known as **Royston Diagnostics**) where no DVT was detected.

The defendant's friend and tenant, Ms. Melissa Roebuck, informed the reclusive defendant that several stores in the surrounding area had begun selling actual hemp flowers and would the defendant like to see what they have? The defendant knowing the venous vasodilation properties of cannabidiol (CBD) and other cannabinoids, went that same day of **Aug. 20, 2020,** to PAPS in Hartwell, GA., and bought some very expensive flowers for the low quality and small quantity offered.

Dr. Dang had also ordered the defendant to go and see Dr. Jennifer M. Thomas MD (vascular surgery) in Anderson, SC., for a second opinion. So approximately **1-month** and **4-days** after the defendant's medical necessity motion was denied on **Aug. 6, 2020,** the defendant was diagnosed on **September 10, 2020,** at **Anderson Heart and Vascular** in Anderson, SC with a **very severe case** of **atherosclerosis** in the defendant's left leg aka **peripheral arterial disease (PAD)**, which the defendant knew was the direct result of having used no THC anticoagulation for approximately **1-year** and **7-months** after the arrest.

The defendant had met initially with Dr. Thomas on **September 3, 2020,** who ordered a Vas Arterial duplex lower extremity bilateral and a Vas Aorta duplex scan complete be performed on **September 4, 2020,** of the defendant's lower extremities. On **September 10, 2020,** when the defendant returned to Dr. Thomas office, Dr. Thomas stated that the defendant had a very severe case of peripheral arterial disease **(PAD)** that could cause the defendant's left leg to be lost in a below the knee amputation **(BKA)**, if Dr. Thomas didn't immediately insert a mechanical stent within the defendant's left leg and wanted to immediately place an **in-office stent** within the defendant's left leg (stents which are known to collapse and block blood-flow more severely than the **atherosclerosis**) and to start the defendant taking **aspirin** (a dangerous **NSAID** known to cause **ulcerogenics (open sores)** in the stomach and intestinal linings) along with another type of statin drug, PravaStatin (another member of those Statin drugs known to cross the blood brain barrier and interfere with the delicate balance of cholesterol produced by the brain for exclusive brain cell use)

The defendant told Dr. Thomas that the defendant was not going to take any aspirin, pravastatin or even allow the doctor to give the defendant an in-office stent. The defendant told Dr. Thomas that the defendant had started using hemp flowers on **Aug. 20, 2020,** due to CBD being a great venous vasodilator and that the defendant wanted to try hemp with a vitamin routine first.

Dr. Thomas looked at the defendant in disbelief, as to say **it is your leg**, if you don't mind losing it, who am I to argue about it? Dr. Thomas requested that I come back in **December of 2020**, but Dr. Thomas was all booked up until **Jan. 14, 2021**.

On **Jan. 14, 2021,** the defendant had lab work done first and then would visit with Dr. Thomas afterwards. When Dr. Thomas entered the office, Dr. Thomas was smiling from ear to ear. Wow! The defendant's improvement was miraculous or something to that effect. Dr. Thomas showed the defendant the lab work that had been done on **September 4, 2020,** and the new lab work done on **Jan. 14, 2021.**

Dr. Thomas showed the defendant where the most spectacular improvements had taken place. Dr. Thomas pointed to the **Jan. 14, 2021**, lab results and said the defendant's **Lt CFA PS** is now **116.91 cm/s**, it was approximately **26 cm/s** on **September 4, 2020**; and the defendant's **Lt Pop PS** is now **68.01 cm/s** it was **0 cm/s** on **September 4, 2020**, and whatever the defendant was doing, to keep on doing it along with walking around the defendant's home.

The defendant then informed Dr. Theodor Schock, D.O. at Medlink Georgia in Hartwell, Georgia, about the Vascular Surgeon's revelation and Dr. Schock was also amazed. There was just one area we still needed to check out and that was the defendant's lungs.

Dr. Schock referred the defendant to Athens Pulmonary and Sleep Medicine for a breathing test on **Apr. 14, 2021** and a lung catscan on **April 15, 2021**, (approximately **1-month** and **3-days** before the defendant was admitted for a **3-day** stay at Saint Mary's Sacred Heart hospital for **multiple DVTs** and **multiple PEs**) to see, if any pulmonary embolisms or pulmonary nodules still remained in the defendant's left lung.

Dr. Afoma Jane King, M.D. met the defendant on **April 14, 2021,** at Athens Pulmonary and Sleep Medicine and had the defendant to do a Physical Exam, in which everything was **within normal ranges**. Dr. King did a Review of Systems check, in which the **12-point review of systems was negative.** Dr. King had the defendant to do a Full PFT w/Bronchodilator and the defendant's breathing was **within normal ranges**.

Dr. King had the defendant to do a creatine blood with GFR test in which everything was **within normal ranges,** and finally Dr. King had the defendant to do a CT chest pulmonary embolism with contrast and there was **NO Pulmonary emboli present**, but there were two pulmonary nodules present instead of several (4 to 6) and those two nodules were considerably larger than those nodules seen by the V.A. hospital in the past. One nodule measured at **5.4 mm** in size and the second nodule measured at **11.5 mm** in size.

On **May 17, 2021**, after pushing the defendant's legs to walk 7-continuous laps around the defendant's home, followed by 3-additional laps, something broke loose within the defendant's left leg and the pain was intense; however, the defendant has dealt with intensive pain in the past or the defendant would have never gone from barely able to stand up in the shower longer than a minute or two to walking 10-laps a day around the defendant's home smoking hemp flowers.

The defendant realized too late that **Newton's third law of mechanical physics** states "for every action there is an equal and opposite reaction". Therefore, if the amount of blood traveling down the defendant's arteries in the left-leg has increased tremendously, then the amount of blood returning upwards through the defendant's veins of the left-leg must also increase tremendously within a closed-loop system.

Thus, using those cannabidiol **lipids** of CBD found within hemp flowers as a **venous vasodilator** able to dissolve into those fatty obstructionary clots when water-based blood cannot … did indeed increase the amount of blood and pressure flow able to move through the defendant's arteries and veins; but without those THC cannabinoid **lipids** to dissolve away those clots before the additional pressure caused those clots to break loose and become free-moving embolus the defendant was bound to produce DVTs and PEs by continued walking.

The defendant must stay away from walking until the defendant's trial is over or **risk** a third bout with multiple PEs, in which the defendant very well might not recover in time for trial, if ever.

(7) THE ARGUMENT FOR ARTICLE III STANDING: INJURY IN FACT

The defendant received an **"injury in fact"**, when approximately **two-years** and **three months** after the defendants arrest on **Feb. 13, 2019**, and approximately **9 months** after the **Aug. 6, 2020 denial** of the defendant's medical necessity motion filed on **July 6, 2020**, to be allowed to use cannabis sativa linne (marihuana plants **medicinally**), with a THC percentage far higher than 0.3% to prevent those **life-threatening pulmonary embolisms** and **deep vein thrombosis** from reoccurring that the defendant could feel forming within the defendant's left-side of body ... the defendant did suffer another **life-threatening attack** of multiple **PE** and **DVT (Injuries in fact)** on **May 17, 2021,** but was documented on **May 18, 2021** (the day the defendant was wheelchaired into the emergency room at Saint Mary's Sacred Heart hospital, Lavonia, GA.)

THE ARGUMENT FOR ARTICLE III STANDING: A CAUSAL CONNECTION BETWEEN THE INJURY AND THE CONDUCT COMPLAINED OF

The defendant, at great risk to the defendant's own life, did prove a **causal connection** existed between the **injury in fact** and the defendant's unlawful **conduct of** growing and using the homegrown cannabis sativa linne to prevent the **injury**, as evidenced by the defendant having used cannabis sativa linne (marihuana / resin) as the defendant's only anticoagulant from **January 1, 2016** to **February 13, 2019** (approximately 3 years and one month) without any adverse reactions or **injury** of **atherosclerosis (PAD)** or **life-threatening pulmonary emboli (PE) attacks** and **then** the lack of any anticoagulant (including **THC**) leading to those predictable **injuries** stated above.

The defendant asserts with evidentiary proof that cannabis sativa linne (marihuana / resin) poses **no threat** to **public health** and **public safety** and that those illogical statutes of Georgia, which are based upon downright **fraud** by the State rejecting those lawful recommendations made by the

honorable Raymond P. Shafer's National Commission on Marihuana in **1972,** in favor of a political hit-job on marihuana (resin) by former president Nixon; is forcing the defendant in old age to rely upon **highly dangerous synthetic drugs (Coumadin, Statins** and now **Eliquis)** having severe life-threatening side-effects **(sudden unstoppable bleeding with or without an antidote)** as the defendant's only medical care for **venous thromboembolisms** (VTE) **... thus,** reducing the quality of the defendant's remaining **life, without the defendant receiving any due process of law per the 14th amendment.**

A reduction in the **defendant's quality of life,** attributable to **(1)** the **fear** of acquiring any cuts, lacerations or other injuries **(car wrecks, scrapes, etc.)** requiring blood coagulation by venturing outside the safety of the defendant's home and **(2)** the **fear** that the State doesn't want to know the truth and that the defendant would be **self-incriminating** himself **(violation of 5th amendment)** by stating the defendant's positive experiences with cannabis sativa linne to Georgia lawmakers. **Fears** that are raising the costs of Medicare and Medicaid unto all Georgians and American taxpayers.

THE ARGUMENT FOR ARTICLE III STANDING:

A LIKELIHOOD THAT THE INJURY WILL BE REDRESSED BY A FAVORABLE DECISION.

The **defendant argues** that **if** those Georgia statutes are **redressed by a favorable decision** by the Court / Jury, **then** this would allow the defendant and other Georgians to be restored our Constitutional liberty to choose SYNTHETIC or NATURAL plant medicine **food,** grow and use our own natural healthcare **food** with dignity and with smiles, as we await our own natural and blessedly painless deaths to come.

In closing, the defendant and challenger pray that this Constitutional challenge be granted and presented before a jury of the defendant's peers; for we have no **Ballot Initiative** in the State of Georgia and **if** this State Court refuses to intervene on this **Constitutional question per Georgia's**

Constitution and Federal Statutes, when the challenger has **Article III standing** (hard to obtain) and has **exhausted all administrative remedies of motions … then** no one can challenge those illogical and unjust laws passed by the Georgia General Assembly and **WE THE PEOPLE** of Georgia shall have only those Constitutional rights that the General Assembly **wishes to give to us** or **sell to us,** on any given day.

REFERENCE:

In **1992**, the Court crystallized the **Article III standing test** into its modern formulation, imposing significant new requirements for what constitutes a judicially cognizable **"injury in fact."** As the Court wrote in Lujan v. Defenders of Wildlife:

First, the plaintiff must have suffered an **"injury in fact"**—an invasion of a legally protected interest which is **(a)** concrete and particularized and **(b)** "actual or imminent, not 'conjectural' or 'hypothetical[.]'" **Second,** there must be a causal connection between the injury and the conduct complained of—the injury has to be "fairly … trace[able] to the challenged action of the defendant, and not … th[e] result [of] the independent action of some third party not before the court. **Third,** it must be "likely," as opposed to merely "speculative," that the injury will be "redressed by a favorable decision."

The defendant's Motion for Article III Standing to challenge those Georgia statutes that makes those innocent cannabis flowers unlawful for the defendant to privately cultivate, to privately possess, to privately use, to privately share for no remuneration or for small remunerations not involving a profit, is an attack on **(1)** the defendant's **4th amendment privilege** against unreasonable search of the defendant's private home, papers, etc. **(2)** an attack upon the defendant's **14th amendment privilege** to receive the same due process of law as affluent Georgians receive who can afford privacy fences and real lawyers, by first being **proven guilty** of some related crime against public safety, health and morals, before a **search warrant** can be granted in the hopes of making a possession charge at least, when the police haven't got the evidence needed **to prove** any of the allegations being made against the defendant or enough evidence to receive an **arrest warrant** from a sitting Judge (**If** screenshots of a possibly photoshopped photo, along with having a legal privacy fence with the gate wide-open and a green

porchlight, where no suspected drug traffic is ever observed coming or going, were enough **to prove** the defendant's guilt, then an **arrest warrant** should have been issued for the defendant and not a **search warrant** to look for the evidence the officer was **too lazy** or **lying** to acquire through real police work). Along with **(3)** an obvious attack upon the defendant's **5th amendment privilege** not to have to incriminate himself under duress to save the life of a loved-old-friend with dangerously high vital signs of **200/100 blood pressure** and a **pulse rate of 113,** from being thrown in jail where this loved-old-friend may very well die from an increased-fright produced stroke or heart attack … for a crime that literally has no victims, except those who are caught possessing this innocent and beneficial plant.

Especially when the defendant can prove beyond a shadow of a doubt that cannabis has always been a political target of lame politicians trying to run on a hard on drugs campaign. Politicians who want to vilify this innocent plant in order to make monetary profit for those private prisons for profit interests, those private drug abuse rehabs for profit interests and those synthetic pharmaceutical drugs for profit interests, by arbitrarily defining some cannabis plants as being hemp with less than 0.3% THC per gram of dried weight or arbitrarily defining other cannabis plants as being marijuana having higher than 0.3% THC per gram of dried weight.

Now the defendant is ready to die painfully in the defendant's own bed or to die painfully in some Georgia State prison cell; for one thing is sure, without a constant supply of fresh cannabis sativa flowers, the defendant is already dying and will surely die painfully.

Respectfully submitted to the office of the honorable Judge [redacted] and the district attorney's office by email cc this 13th day of June 2022.

Nathan R. Johnson

Nathan R. Johnson

Pro se defendant

[redacted]

Hartwell, Georgia. 30643