



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Medical Use of Marijuana Program
99 Chauncy Street, 11th Floor, Boston, MA 02111

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

Tel: 617-660-5370
www.mass.gov/medicalmarijuana

June 29, 2016

Ms. Ellen Rosenfeld
CommCan, Inc.
730 Main Street
Millis, MA 02054

Re: Request for Information

Dear Mr. Rosenfeld,

This letter is to inform you that the Department of Public Health ("Department") has reviewed CommCan, Inc.'s *Siting Profile* (Application 1 of 3). The *Siting Profile* requires the following information before the Department may complete its evaluation:

1. The Medway lease submitted on June 3, 2016 appears to be the same December, 2015 lease cited in the Department's letter of March 22, 2016 regarding Section 19 calling for the Lessors, under certain circumstances, to re-possess the leased premises and any property therein, as well as move property to another location. The terms of this lease are not consistent with the amended lease submitted in support of Application 2 on April 29, 2016, which contained additional language to safeguard regulated assets. Please submit the amended lease in support of this application or explain the discrepancy.

If the applicant has been requested to resubmit their response to a question, please do so using the page on the application form for that particular question, and include an initialed attestation at the bottom of the page. The applicant need not resubmit the entire application and may submit only the page for the particular question that needs to be submitted.

Please remember to type all responses in the information or materials resubmitted to the Department, other than any required signatures, as well as include the name of the Applicant Non-Profit Corporation *and* the number of the application (e.g., Application 1 of 1) at the top of each page of the resubmitted information or materials.

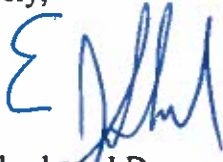
Please resubmit the additional or revised information as outlined above, via U.S. mail or hand-delivery, to:

Department of Public Health
Medical Use of Marijuana Program
RMD Applications
99 Chauncy Street, 11th Floor
Boston, MA 02111

Upon receipt, the Department will review the information and will notify the applicant if it will proceed or if further information is required.

If you have questions or need assistance, you may contact the Department at 617-660-5370 or RMDapplication@state.ma.us.

Sincerely,

A handwritten signature in blue ink, appearing to read 'E. Sheehan', is written over the printed name.

Eric Sheehan, J.D.
Interim Bureau Director
Bureau of Health Care Safety and Quality
Massachusetts Department of Public Health