

**W**onderberry is a hybrid strain of cannabis popular among medical marijuana patients who don't want to get too stoned. Flowery-smelling and with a slight blueberry taste, it's said to be an effective analgesic, strong enough to dull the pain but not so strong it gives the user "couch lock"—the sluggish high induced by more-potent marijuana. You can get up and do things on wonderberry. Plus, the product is reasonably priced: \$250 to \$300 an ounce, compared with \$800 an ounce for high-grade weed. That's an important consideration for patients who live on government assistance.

On the morning of February 17, 2007 60-year-old marijuana activist Ken Gorman received a substantial consignment of wonderberry—three or four grocery bags of it—at his modest one-story brick duplex on South Decatur Street on Denver's west side. One of his regular growers had driven three hours to deliver the pot, which had been cultivated in a barn in the Colorado countryside. Gorman opened one of the bags and sniffed the contents to check the quality. The pot was cured and dry enough to smoke. Satisfied, he told the grower to come back that evening to pick up his money.

Gorman needed a lot of pot. Under Colorado law he was a registered caregiver. In 2000 54 percent of Colorado voters approved Amendment 20, which legalized marijuana for medicinal purposes. Amendment 20 allows people diagnosed with a serious illness to possess up to two ounces of marijuana or grow as many as six plants. The law also permits patients to choose a caregiver to cultivate or purchase the pot for them. The state tries to limit the number of patients for each caregiver to five, but in reality some caregivers look after many more. Gorman legally sold marijuana to more than 120 patients.

By the afternoon Gorman's crowded living area looked like a mini Lourdes. Every couch and chair was filled as patients dropped by to pick up their medicine. Some came in wheelchairs; others hobbled on crutches. Their afflictions were legion: HIV, multiple sclerosis, muscular dystrophy, epilepsy, fibromyalgia, liver disease, pancreatic cancer, Parkinson's disease—a world of suffering. Gorman sat in a high-backed leather chair, weighing out the weed on a measuring scale. A surveillance

PLAYBOY  
SPECIAL REPORT

# THE MEDICAL MARIJUANA MURDER

THE AVAILABILITY  
OF MARIJUANA FOR  
MEDICINAL PURPOSES  
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OUT THAT WAY

BY  
FRANK  
OWEN





Clockwise from above left: Ken Gorman shortly before he was gunned down in Denver; his daughter, Valency; Dr. Sona Patel, a.k.a. Doc 420, advertising her services in Los Angeles; Thomas Lawrence (far right), owner of the Colorado Compassion Club, with his ill-fated posse.

camera hung from the ceiling, but it wasn't hooked up. A statue of Nataraja, the Hindu lord of the dance, sat on a coffee table. A psychedelic poster depicting Gorman smoking pot adorned one of the walls. Every so often Gorman would go into the kitchen to retrieve more marijuana as a new flood of patients streamed through the front door. Among the genuinely afflicted was a handful of fakers, healthy young people claiming to be sick with a mystery ailment who in reality just wanted to get high. Not that Gorman minded. To him, all use was medical. "Everybody has a qualifying illness," he often said. "It's just a matter of finding it."

Gorman, a big man with a gray pallor who suffered from severe arthritis, was a controversial figure in Denver's medical marijuana circles. One week earlier a local television station had captured Gorman on a hidden camera, advising a young station employee on how to use the state's medical marijuana law to possess pot for recreational purposes. "When we passed the law, we passed a great, great law," Gorman told the TV employee. "There are so many holes in it, the police can't do anything."

After the segment aired, Gorman's fel-

low medical marijuana advocates vented their anger on pro-pot websites. Gorman had screwed up. For years they'd put up with his publicity pranks—the annual "smoke-out" on the steps of the state capitol, where Gorman would throw bags of pot to hundreds of protesters, and his unsuccessful 1994 run for governor that earned him the nickname Governor Pot-head—but he had gone too far this time. Gorman was playing into the hands of opponents who claimed medical marijuana was just a front for drug dealing, a big scam exploiting people's compassion for the sick and dying to justify pot-heads' desire to get baked. But anger was about to turn to grief.

By early evening the house on South Decatur Street was empty. The patients had gone home to smoke their medicine. Also absent were Gorman's Vietnamese bodyguards, a coterie of Asian kids who hung around the house and protected him from local gangs in exchange for all the pot they could smoke. Gorman phoned his neighbor Dominic Mestas and told him, "I'm going to the store. Do you want anything?" Just before seven P.M., Mestas looked out his window and saw a red compact car with its headlights off pull up to the front of

Gorman's house. Mestas thought nothing of it and went back to relaxing with his girlfriend in the bedroom, but within five minutes he was startled to hear the sound of gunshots next door. Running into the living room, Mestas ordered his three children to lie on the floor. The panicked neighbor phoned Gorman, but nobody picked up. Then he called 911.

Out on the street, Vu, a close friend of Gorman's and one of his Vietnamese protectors, had just pulled up in his car. Mestas ran into the street and told Vu, "I just heard gunshots coming from Ken's place." Together Vu and Mestas approached Gorman's house. "I was scared to death," says Mestas. "I didn't know if the gunmen were still in the house." The front door was open. No surprise there. The door was nearly always open, despite the large amount of money and marijuana Gorman kept in the house. Vu and Mestas found Gorman facedown on the living-room floor. An upturned bookcase indicated there had been a struggle. Vu turned over his friend's body and saw a cut on the bridge of his nose. Then Vu noticed a quarter-inch bullet hole in Gorman's chest.

An ambulance took Gorman to a Denver Health (continued on page 58)

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*Masked intruders attacked two people with baseball bats and emptied a large safe containing cash and pot.*

Medical Center about two miles away. When he arrived, doctors in the emergency room attempted to resuscitate him. In a last-ditch effort to save his life, they performed a thoracotomy, cracking open his chest and manually massaging his heart. But it was too late. Ken Gorman was pronounced dead at 7:37 P.M.

"I told Ken he needed to be more careful," says Mestas. "There were too many people coming in and out of the house."

A year later the killing remains unsolved. Denver police say they are pursuing all leads. But the manner of his demise was not unexpected. Gorman saw it coming. "My father predicted his own death," says his daughter, Valency Gorman. "He told me he knew he would be shot. This wasn't the first time somebody had tried to steal from him."

Gorman's murder is not isolated. Since 2003 at least six medical marijuana suppliers have been killed for their pot. In November 2005 marijuana advocate Les Crane, an ordained minister who believed pot was a holy sacrament allowed by the Bible and who referred to his dispensary (a storefront where pot is sold) as a church, was shot multiple times in the bedroom of his secluded home in Laytonville, a small community 150 miles north of San Francisco. Several masked intruders burst in, attacked two other people with baseball bats and emptied a large safe containing cash and pot. Though no arrests were ever made, local police speculated Crane must have known his killers because they were clearly familiar with the layout of the residence.

A month before Gorman's death, *PC World* editor Rex Farrance was murdered during a home invasion by robbers who police believe were out to steal his son's medical marijuana plants. Around nine P.M. on the evening of January 9, 2007 Farrance, 59, was working on his computer at his one-story house on a quiet cul-de-sac in Pittsburg, California when four masked men broke down the front door and demanded money. Alarmed, Farrance ran into his bedroom to get his gun. The intruders followed and shot him once in the chest.

On the night of the shooting the police discovered a sophisticated grow operation in the attic of the house—109 marijuana plants and more than three and a half pounds of harvested

pot, an amount far in excess of that permitted under Proposition 215, California's medical marijuana law. The plants belonged to the murdered man's son Sterling Farrance. Rather improbably, Sterling told the *San Francisco Chronicle*, "I have a prescription. I'm a patient. It was medical."

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Look at a map of where medical marijuana is legal in America and you'll see what seems to be a shining example of a political success story. Twelve states from Maine to California have medical marijuana laws on the books, and at least half a dozen more are considering legislation. One in six Americans lives in a state where marijuana can be legally possessed for medicinal purposes. And more would be happy to do so, judging by the overwhelming public support medical marijuana enjoys. An estimated 300,000 Americans now toe weed on their doctor's orders. All the Democratic presidential candidates back the cause in varying degrees. At least on the legislative front, medical marijuana has been one of the most successful social reform movements of recent times.

The idea behind medical marijuana was to create a discrete zone separate from the black market that would allow patients safe and legal access so they wouldn't have to procure their medicine from shady street dealers. But behind the scenes, many growers and patients are worried. While allowing use of the drug in principle, legislators neglected to set up a system to deliver marijuana to the patient. Instead, they left it up to advocates and their lawyers, who cobbled together an unregulated medical underground where pot dealers with no professional training give dubious medical advice to sick people ("smoking pot cures cancer") and dispense medicines with names like train wreck, Durban poison and Amsterdam bubble funk.

A shadowy economy has emerged, semilegal and sometimes deadly, by which pot grown for medical purposes is routinely diverted to the black market and black-market weed is sold as medicine. Patients have been killed for their medical marijuana, and patients have killed to protect their gardens. In January 2007 Los Angeles cancer patient Jerry Cress shot and killed a 15-year-old boy who was allegedly

trying to steal marijuana plants from Cress's garden shed just before daybreak. Eight months later a Sacramento woman protecting her medical marijuana garden shot a 17-year-old male in the face. This time the teenager survived the shooting.

Meanwhile, medical marijuana has also become a big business, especially in California. The Drug Enforcement Administration estimates that two recently indicted brothers, Winslow and Abraham Norton, sold as much as \$50 million worth of pot in just three years through their California dispensary, the Compassionate Collective of Alameda County. This is the same facility where armed robbers tied up the employees in February 2005 and stole \$50,000. Four months later a masked gunman fired four shots into a dispensary employee's car as he arrived for work. Last July a patient was killed by thieves after he left the facility. In fact, the two Norton brothers themselves were shot and wounded in a gun battle in a local hotel a year ago.

The legal status of dispensaries is complicated. The original backers of medical marijuana laws did not envision the kind of commercial dispensary the Norton brothers ran. These dispensaries were originally intended as not-for-profit buyers clubs made up of patients banding together to purchase pot in bulk from growers. Over time they evolved into for-profit businesses. It was never the intention of the med-pot laws to allow free and open commerce in marijuana, but that's how it has turned out.

Although dispensaries appear to be tacitly legal in some states with medical marijuana laws on the books, federal law still dictates that pot is illegal to grow, sell, possess or smoke under practically any circumstance. And federal law trumps state law, a fact a number of California dispensary operators found out when they were arrested in a string of high-profile DEA raids.

A close look at the customers of these dispensaries reveals a not so shocking truth: Many are not ill at all. Exactly how many medical marijuana patients are really sick and how many exaggerate minor aches and pains in order to get high is impossible to gauge. It's not hard to get a medical marijuana recommendation, though most doctors won't write letters for cannabis. "They're scared of losing their federally issued DEA numbers," says Dr. Elke Glazer, a rare physician in the Denver area willing to recommend pot for medical purposes. "The DEA number allows us to write prescriptions. We depend on it for our incomes. They're also scared

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# MARIJUANA

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that if the word got out that they write recommendations for marijuana they'd be flooded with bogus patients."

This leaves the field open for a small number of "pot docs" who advertise in the back pages of alternative magazines and on such websites as potdoc.com. They make large sums of money running prescription mills that charge patients up to \$250 a visit for a cursory consultation. In San Francisco, where some of the original backers of medical marijuana are now in open revolt, it's estimated that a third of all those who hold official medical marijuana cards come on the recommendation of only three pot docs. One Los Angeles pot doc, Sona Patel, who uses the name Doc 420, advertises her services on her MySpace page, dressed in hot pants and spiked heels.

Glazer used to work for the Hemp and Cannabis Foundation, a pro-pot group based in Oregon that organizes monthly registration sessions in Denver to sign up medical marijuana patients. Glazer says she quit working for THCF after the group pressured her to sign approvals for patients with bunions. According to Glazer, the foundation currently employs Dr. Thomas Orvald, a heart surgeon who flies in from Yakima, Washington for the day to write approvals for dozens of people in a hotel room at \$200 a head. While Orvald's actions appear to be legal, at least under state law, Glazer questions the ethics. "Having a doctor come in from another state to sign up 90 patients a day is not good for the health of the patients, and it's not good for the credibility of the movement," she says. "I'm amazed the Colorado Medical Society has turned a blind eye to this."

As more smokers try to use medical marijuana laws to support their relatively harmless habit and growers find themselves in a position to practice their trade legally, money has flooded this new economy. Prices have gone up. "One of the arguments for medical marijuana in the beginning was that it would provide cannabis for patients at prices far below street value," says Dr. Steve Heilig, director of public health and education at the San Francisco Medical Society. Yet as far as Heilig can see, pot dispensaries mostly sell at street value. "I've seen medical marijuana I've grown end up on the street," says marijuana grower Diana McKindley. "I traced it all the way back to one of my patients. She smoked only one ounce and sold the other ounce. I ended up dropping her as a patient."

Kurt Riggan, a Colorado federal attorney and marijuana patient, says the scale of the diversion of medical marijuana in Denver is much greater than the odd patient selling an excess ounce. Riggan, who walks with a cane and smokes pot to ease his glaucoma and soothe his severe

nausea, says it's common knowledge in Denver pot circles that one cannabis club operator ships medical marijuana out of state and sells it on the black market. "He gets the medicine, ships it to the East Coast and sells it for \$600 to \$800 an ounce," Riggin says. "What the patients end up getting here is commercial compressed weed, which you can buy for \$800 a pound. He sells it to patients for \$350 an ounce. He's making money on both ends, and the patients end up getting screwed."

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The news spread rapidly: Ken Gorman, the public face of pot in the Mile High City, was dead, murdered in a home invasion. Mourners gathered in a huddle outside his residence, the crowd growing all night. Standing on the small lawn in front of the yellow police tape that stretched across Gorman's home, they warmed their hands over a makeshift bonfire, lit joints with the embers and paused to remember a life spent getting high and challenging authority.

In the 1980s Gorman was an air traffic controller and became a leader of the Professional Air Traffic Controllers strike, which ended when President Ronald Reagan fired him and more than 11,000 others. Later Gorman stirred up the natives in Papua New Guinea, where he was arrested after broadcasting harangues against the government for exploiting the local population. To those who knew him only as the crazy old stoner who organized the 420 demonstration every April in Denver's Civic Center Park, Gorman was a hero, a zonked-out prophet of civil disobedience. He would give away pounds of high-quality weed at these rallies, and hundreds of people would brazenly take up in defiance of the police. Gorman admitted to the press that he wanted to be arrested to garner more publicity for his crusade.

But to his intimate acquaintances, family and close friends, Gorman was a tragic figure, a man out of time, fearful of the fate that awaited him but also resigned to his own death. In the months prior to the killing, Gorman had become dispirited

with the direction of the medical marijuana movement, which now favored behind-the-scenes lobbying over in-your-face protest. To many in the movement, he was a liability at a time when medical marijuana needed respectability.

Gorman initially saw medical marijuana as a back door to full legalization. But he had come to believe the opposite could be true. After all, more people (more than 700,000, according to the feds) were being arrested for recreational use than at any other time in the country's history.

In addition, Gorman was bothered by the criminal element that had crept onto the scene. He told friends he had been robbed at least a dozen times. He bought a shotgun and talked about installing secu-

rallies. In May 1995, not long after his failed gubernatorial bid, police arrested Gorman with 300 pounds of marijuana in the backseat of his car. He claimed the haul was medical, but a jury didn't buy his defense, and he served five years on felony drug charges, both in prison and on probation. After his release from prison, Gorman resumed his pro-pot rallies, this time on an even bigger scale.

The night before the murder, police visited Gorman's house after they received a call from a neighbor who saw someone leaving Gorman's dwelling fire a gun into the air. Police saw a substantial number of marijuana plants growing inside. The cops didn't arrest Gorman

after he assured them he had a license to grow the pot, but they did photograph his plants. "There was no shortage of enemies in Ken's life," says Michael Gorman. "There were lots of people who hated his lifestyle and his arrogance."

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In the immediate aftermath of Gorman's murder, police questioned Thomas Lawrence, owner of the Colorado Compassion Club. Housed in a dingy storefront on Colfax Avenue, the CCC is the largest dispensary in Denver, catering to more than 200 patients. The club's motto—IMPROVING YOUR QUALITY OF LIFE—is painted on the blackened window outside. Gorman helped Lawrence

set up the dispensary, but just before the establishment opened, three years ago, they had a falling-out over missing grow lamps. "My dad didn't trust him," says Valency Gorman. "He said he was shady."

Rival marijuana growers paint a disturbing portrait of Lawrence as a wannabe drug kingpin getting rich off the suffering of patients. It is said he had a motive for Gorman's elimination: Lawrence wanted to monopolize the Denver medical marijuana business. "If you interview him, make sure you go strapped," I was warned.

If Lawrence is living large off the backs of the ill, it's not obvious to the

rity cameras in his home. A workman was due to put metal bars on his windows.

His brother, Michael Gorman, expected Ken to be murdered. "I was sad, but I wasn't particularly surprised," he says. According to Michael, in the months prior to his murder Gorman had received a number of anonymous death threats over the phone: "He told me, 'These guys are coming after me, and I know it. That's why I got a gun this time. I'm going to take some of them with me.'"

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Gorman was well-known to the Denver police and not just because of his pot

casual observer. The night I meet him he is wearing an inexpensive Kenneth Cole watch and driving a secondhand car, a 1997 Chevrolet Cavalier. With his Caesar haircut and trendy but cheap clothes, he looks like a typical white nightclubber, not the stone-cold killer I've been led to expect.

"The rumor on the street was that I had Ken killed to control the local medical marijuana scene," Lawrence admits as he drives through the darkened streets, a spliff in his mouth and rapper Too Short blaring out of the speakers. "Why would I kill Ken? I loved the man. Ken was the reason I got into this business in the first place."

If Gorman represented the old countercultural face of marijuana, its Merry Prankster past, Lawrence is its shiny new visage. He's a member of the blunts generation, those who got into marijuana through hip-hop. "I'm not some dirty-ass hippie who hates society," Lawrence says. "I'm all about being a capitalist." Lawrence came to Denver from his hometown of Washington, D.C. just days before 9/11 in the hope of striking green gold. Denver ranks with San Francisco as one of the most marijuana-friendly places in the States. In the city where the first federal marijuana arrest in America was made, on October 2, 1937, not only is it

now legal to smoke pot for health purposes, but last November 57 percent of city voters approved a measure making possession of up to an ounce of pot "the lowest law-enforcement priority."

"Denver is becoming the new Amsterdam," Lawrence says with a gleam in his eye, dreaming of the day he can open a string of Dutch-style hash houses.

Lawrence's posse accompanies us as we flit from nightclub to nightclub. They look not like dangerous street thugs but ordinary Mexican and black kids dressed in baggy clothing. Perfectly healthy-looking on the outside, nearly all possess a doctor's recommendation to smoke marijuana. "I medicate from the time I get up in the morning to the last thing at night," Lyle Mestas, a chubby-faced Mexican kid, tells me. Despite their illnesses, none of them seems to have any trouble staying up drinking and dancing until two in the morning.

At a basement nightclub called Hush in downtown Denver, as the Beastie Boys' "Brass Monkey" booms in the background, Lawrence dismisses accusations that he exploits sick people by selling them medicine at inflated prices. "As far as I know, we live in America," he says, "and everybody who lives in America is entitled to make a living. If you want to call making a living being a profiteer,

then I guess I am. Pot is not free to grow. It's not cheap to run a dispensary."

In the early hours of November 4, 2007 Lawrence's posse was ambushed outside Hush by a single shooter with a small-caliber machine gun who fired a spray of bullets and then ran away on foot. Seven people were shot, including three of Lawrence's group I'd met three months earlier at the same nightclub. One of them, Teddy Padilla, died of his wounds. The local media portrayed the incident as a dance-floor beef over Padilla's flashy jewelry that had spilled out onto the street. But the speculation in Denver marijuana circles is that the gunman's real target was Lawrence, who was scheduled to come to the club but was absent that night.

"It could have been an assassination attempt," says Lawrence, who stepped up security at both his home and the Colorado Compassion Club after the shooting. "I was supposed to be there that night. I don't know for sure. What I do know for sure is that some people definitely don't want me around, doing what I'm doing. I don't want to sound paranoid, but you know how much people love me in this town."

Beyond the question of whether dispensaries are ripping off patients is the more fundamental issue of whether pot qualifies as a medicine in the first place. Marijuana advocates assert the issue is cut-and-dried and point to history to underscore their claim. "Marijuana has been regarded as a medicine for maybe 5,000 years," says Dr. Donald Abrams of the University of California, San Francisco Medical Center, a cancer specialist and leading researcher of medical marijuana. "It's been regarded as not a medicine only for 70 years in the United States."

A lot depends on how you define *medicine*. Anything can be labeled a medicine, just as anything can be labeled a disease, says author and psychologist Jeffrey Schaler, a professor at American University in Washington, D.C. "Marijuana is no more a medicine than is water."

Reformers paint marijuana as a wonder drug, a suitable treatment for a range of diseases. Drug warriors call it a menace. Hyperbole on one side is countered by hysteria on the other. Pot causes cancer, say the prohibitionists, citing studies that show pot contains more carcinogens than cigarettes. Pot cures cancer, say the advocates, citing a November 2007 study by scientists at the California Pacific Medical Center Research Institute that reports a chemical compound found in marijuana, called CBD, shows promise in halting the spread of breast cancer. (The researchers warn, however, that it is well-nigh impossible to obtain the necessary concentration of CBD simply by smoking the drug.)



There is as yet no solid proof that smoking pot cures anything. Instead, there is a small mountain of evidence—both anecdotal and scientific—that suggests pot is a useful palliative for some people, good for boosting appetite among HIV patients and suppressing nausea among cancer patients undergoing chemotherapy. Patients may feel better after smoking marijuana, and life may seem more bearable, but until further research is done it's impossible to say whether the drug is doing anything to retard the progress of their disease.

Nearly all illegal drugs possess some medical utility. Heroin was introduced in the late 19th century as a treatment for opium addicts. In the 1950s methamphetamine was used to treat everything from depression to alcoholism to Parkinson's disease. Yet nobody is talking about medical meth.

Are there more-effective treatments for the various illnesses marijuana supposedly helps combat? "Multiple drugs are available that work just as well if not better, and they don't keep you stoned all day," says Schaler, a libertarian who believes pot should be legal for everyone, afflicted and healthy. Take the example of glaucoma. Pot crusaders often push marijuana as a great treatment for the degenerative eye disease. It's true that pot reduces intraocular pressure—so does alcohol. But the marijuana advocates fail to mention you have to smoke up to 10 joints a day for the drug to work, whereas with a product such as Xalatan, you put a couple of drops in your eyes in the morning and you're ready to go.

Medical marijuana advocates argue pot is an effective pain reliever. They point to Queen Victoria's reported use of marijuana to relieve menstrual cramps. Most doctors agree pot isn't strong enough to combat serious chronic pain, nor do its effects last long enough. "There are much more effective drugs to treat chronic pain than cannabis," says the San Francisco Medical Society's Heilig. "I don't think any truly knowledgeable pain specialist would consider pot a first-line therapy."

However, recent research by UC San Francisco's Abrams with HIV patients suffering from foot pain points to a useful role for marijuana in treating some types of neuropathic pain, though not the chronic variety. "A drug that relieves nerve pain, increases appetite, decreases nausea and vomiting, induces sleep and produces some mild mood elevation is a pretty useful substance for patients with a terminal illness," he says. (Another recent study, this one by researchers at the University of California, San Diego, examined the effects of marijuana on healthy volunteers after they had been injected with capsaicin, the substance that causes the heat in chili peppers. It concluded that pot in moderate doses

may significantly decrease pain but in large doses may actually increase pain.)

In the end, the debate over medical marijuana may have less to do with science than with evangelism. Both sides believe in the righteousness of their cause with a religious fervor. "Being pro-marijuana is a religious crusade, just as being anti-marijuana is a religious crusade," says Schaler. "It has nothing to do with medicine. The reformers lie about marijuana just as much as the prohibitionists. To say marijuana is a cure-all is just as ridiculous as saying it's evil. It's neither."

Who murdered Ken Gorman? The people closest to him smoke so much pot that it sometimes affects their mental clarity, which makes it hard to distinguish between truth and drug-induced fantasy. "The CIA did it," one of them says. "It was meant to send a message to the rest of us." But the most likely scenario, the one that sounds least like a pothead conspiracy theory, comes from a good friend of Gorman's, Diana McKindley. She believes Gorman was the victim of a botched robbery. "I know who killed Ken Gorman," she says. "It was a grower he'd fired. He set Ken up to be robbed."

In the weeks following Gorman's death the mood was tense among Denver growers and patients. With killers on the loose, anybody could be the next

victim. Growers started carrying guns to protect themselves. Some installed security cameras. Others moved their gardens to secret locations. "We're scared to death," says McKindley. "Everybody is hiding their bud." The concern intensified when news leaked that police had obtained a search warrant for Gorman's home and had confiscated his papers and a computer. Detectives were combing his hard drive, looking for the names of patients and suppliers. "Some of Ken's patients felt they were in such jeopardy that they picked up and left Denver in the middle of the night," says Timothy Tipton, a friend and fellow marijuana advocate.

At the first annual Ken Gorman Memorial Rally, held in Civic Center Park two months after his death, a thousand people turned out for what was one of the biggest pro-pot demonstrations in the state's history. Gorman would have been proud. Instead of a traditional remembrance, the rally was more akin to a giant joint-rolling ceremony. Gorman's willowy daughter, Valency, a school administrator, addressed the carnival throng. "He loved you guys. Thank you for loving him," she said to the crowd.

The general consensus among Gorman's closest friends is that his murderer had to come from close by. Whoever killed Gorman wasn't a stranger. "It had to be an inside job," says Tipton. "The people who did this must have known

that Saturday night was when Ken had all the money. He'd get pot delivered on Saturday morning, and by late afternoon it would all be sold. There would have been \$10,000 easy."

The events of the evening of February 17 fit the pattern of previous home invasions. "Ken would always get robbed the night just after it was all harvested in," says McKindley. "They would take only the bud and the stuff associated around the bud. In other words, these guys knew exactly what they were doing. And they knew exactly where to go. They didn't have to go through his cabinets. They knew which cabinet he kept his medicine in. Ken told me he thought it was the same three people in ski masks every time." Did he ever report these robberies to the police? "No. The police would have laughed at him," says McKindley. "They laugh at all of us."

A year later the mystery surrounding Gorman's death has only deepened. But McKindley recalls a conversation she had with Gorman in his living room a month before his murder. A marijuana grower McKindley dubbed Boston used to be a fixture at Gorman's place. "I would always introduce myself, but he would never tell me his name. Ken would laugh and say, 'He doesn't give out his real name.' I called him Boston because he looked like a guy from Boston. He was scrawny, he had black greasy hair and black clothes, and he spoke in a Boston or New York accent," she says.

In January McKindley noticed the scruffy East Coaster wasn't hanging around anymore, so she asked Gorman, "Where's Boston?"

"That son of a bitch," McKindley claims Gorman said. "I found out he was ripping me off. He was setting me up."

McKindley asked Gorman if he was sure Boston was behind the string of robberies, to which Gorman replied, "I am so sure." Is this guy Boston still around? I ask. "No one will tell me," says McKindley. "No one will answer me. I've asked. I put it out publicly that PLAYBOY was coming to Denver to investigate Ken's murder, but people were scared to come forward. They were like, 'Are you kidding me? I'm not going to be the next one to get shot down.'"

A year after Ken Gorman's murder the police have yet to make an arrest. In the end, who killed Gorman may be less important than why he was killed. His friends blame prohibition: If pot were fully legal, this wouldn't have happened. But Gorman's death resulted from a poorly thought-out system that puts patients and growers in peril even when they act within the limits of the law. "Turning a black-market commodity into a legitimate medicine," Thomas Lawrence admits, "has been a lot more difficult than any of us thought."



*"I wrote this to make me rich and to get laid."*

