
From: Lesley Groff <[REDACTED]
Sent: Friday, November 15, 2013 8:30 PM
To: Jeffrey Epstein
Subject: Bill Spear
Attachments: ProposedMethodologyforResearch.doc; Untitled attachment 00485.htm; SRLogoDesign.png; Untitled attachment 00488.htm

Bill Spear called to follow up on the below email...He would like to speak with you or to your foundation head person to discuss...Bill said he has spoken with Boris...

[REDACTED]

Begin forwarded message:

From: William Spear <[REDACTED]
Subject: Letter of Intent from Fortunate Blessings

Date: November 12, 2013 4:07:19 PM EST

To: Jeffrey Epstein <[REDACTED]

Leslie,

Kindly pass this on to Jeffrey.

Many thanks,

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Dear Jeffrey:

I've tried a number of times through Leslie to see you but it looks as if our paths keep moving in different directions. I hope she communicated to you that most of all I simply wanted to catch up, as a friend with birthday wishes and mutual interests. Perhaps we can find a time before the end of the year to meet. By the way, I did arrange for a family to meet with Andres Serrano but he failed to return my calls.

I am writing to you today wearing my disaster response hat and reaching out to you as a possible source of funding. I am sending this letter of intent in advance of a phone conversation I hope to schedule with either you or your foundation's director this week.

As you know, beyond my work in feng shui and end-of-life care, for the past nine years, the Foundation my wife Joan and I founded has worked globally to prevent PTSD in children traumatized by natural disasters and tragic events. This is really the heart of my work.

Through an initiative we call Second Response, our teams implement simple, body-centered and proven therapeutic events offered as "93PLAYshops" with two specific goals:

- Reduce the PTS (Post Traumatic Stress) that exists in the affected population after a disaster and prevent the onset of full-blown PTSD;
- Build on-the-ground capacity that is both cost-effective and easily replicated through pre-emptive trainings of local providers before a disaster strikes.

We have seen remarkable results and recently retained a mental health care researcher to further investigate the efficacy of our method that makes a measurable difference in preventing PTSD.

This past year, our Board of Directors, Advisory Council and staff – including physicians, clinical psychologists, entrepreneurs and PhD educators – have guided our efforts to develop and position Second Response as a "best practice

methodology", the broader, two-year goal of which is collaboration with larger disaster response organizations. Toward this end, we have begun accumulating past research that will become a "White Paper" further authenticating our approach; in addition, we are developing a proposed research methodology, a copy of which is attached below.

This effort will result in a significant expense that we estimate to be \$100,000 covering staff salaries and infrastructure needs to underwrite the two-year study. Michelle Wang, PsyD, currently Program Director for the San Francisco Veteran's Administration PTSD Clinic, is developing and will oversee the specific methodology under guidance of our Board of Directors and Advisory Council.

All of us feel that this is an opportunity to significantly reduce the extraordinary burden that full-blown PTSD places upon an affected population. Our time-tested interventions commence shortly after first responders stabilize communities at the conclusion of the emergency phase of disaster response. For example, in the case of the current disaster in the Philippines, this would mean getting on the ground there sometime in mid-December.

Costs of our interventions are a fraction of those incurred by local mental health providers and municipalities as a result of currently deployed palliative care – interventions that have never been proven to reduce incidences of PTSD in populations.

It is not our intent to develop a larger infrastructure as a disaster response agency but rather to continue to focus on developing effective intervention methodologies that can be incorporated within existing organizations. Upon the completion of this study, it is our intent to collaborate with groups like Doctors Without Borders, Mercy Corps, Save the Children and others with whom we have worked closely and who would incorporate our methodologies to create their own Second response units.

Second response PLAYshops provide a unique approach and invaluable opportunity that is otherwise not available in disaster response. I very much look forward to speaking further with you about our proposal. I will contact Leslie for direction in this regard.

In Health and peace,

Bill

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