



December 11, 2013

Dear Friend of the ACO:

This baby's face is a beacon of light and truth. She does not yet have adult deceptions and conceits. We first used this photo in October 2010 to illustrate our social ontology presentation on childbirth and the neonatal period. We were so taken with it that we decided to use it to illustrate our annual appeal letter that same year. Thus began our tradition over the past several years of using an image of a baby or child in our letters to capture some aspect of what we are about.

We love babies and children for their spontaneity. They become excited spontaneously. They express themselves spontaneously. They do things spontaneously. They spontaneously feel a wonder about the world. They spontaneously tell the truth.

Hans Christian Andersen purposely has a child rather than an adult cry out, "But he isn't wearing anything at all!" at the climax of his 1837 story, "The Emperor's New Clothes." With that cry the child cut right through the social illusions and distortions promulgated by some of the adults, even opening the eyes of some to the truth. I believe that story's popularity with children over the years comes from their almost universal longing in a contactless adult world to be able to tell the truth and be heard.

The popularity of Art Linkletter's "Kids Say the Darndest Things" segment of his TV show in the mid-20th century, in which he interviewed five-to-ten-year-olds, was witness to the universal appeal of children's guilelessness. Unfortunately, adults often miss the point and debase such direct expressions of the truth as merely "cute."

Truth Tellers

But throughout history others besides children have told the truth. I recently heard a remark, "The court jester was the only person who could safely tell the king the truth." In a similar humorous, innocent, childlike role the jester often has his modern equivalent in the clown or the comedian who is not constrained by the usual social conventions, including in recent times that of political correctness. Before recorded history we had storytellers and singers and with the advent of writing, poets and writers – all of whom told the truth each in their own way. In modern times poets have lost much visibility but their role continues with songwriters and singers.

Throughout history we have also had a few courageous warriors willing to sound the alarm about the enemies at the borders and walls or within them. And thankfully for all of us a few courageous natural scientists as clear-eyed observers of nature have told the truth, often at risk of being burned at the stake – the literal fate of Giordano Bruno and the more symbolic but equally tragic fate of Wilhelm Reich.

Wilhelm Reich as a Truth Teller

Wilhelm Reich was relentless in speaking up for the truth he saw about nature, human and otherwise. He caused a stir in the proper Viennese society of the 1920s when he wrote and talked about the function of the orgasm. Then when he described the psychological and biosocial basis of fascism in his 1933 classic, *The Mass Psychology of Fascism*, he ended up expelled from both the International Psychoanalytic Society as well as the Communist Party. When he reported on the spontaneous organization of protozoa from non-living material he was lambasted in the press as a Frankensteinian mad scientist claiming to have created life. When he discovered orgone energy in the atmosphere he reported on it as the basis of biological functions as well as weather and galaxy formation. When he found it could be accumulated and demonstrated objectively with temperature measurements he met with Einstein who said, “That is impossible. Should it be true, it would be a bombshell.” Einstein later merely dismissed the observations and when the medical and psychiatric establishment complained to the U.S. Government through the Food and Drug Administration, they labeled Reich a fraud and a quack for researching practical applications of this energy in human illness.

Elsewhere we have described Reich’s “bombshells in science.”¹ With each one he was continuously like the child crying, “But the emperor has no clothes!” as he exposed nature in progressively deeper realms from the psychological to the social and the biological and finally to the realm of a physical cosmic orgone energy.

The Simple Truth of Reich’s Basic Discovery

Underlying all of his observations and reports, Reich saw and spoke a simple, fundamental truth from which all the rest of his work and orgonomy derive. He identified spontaneous movement of a real primary energy, which he called the orgone, as the basic function in all of nature – from the microscopic to the macroscopic and cosmological. Humans in their neurotic, armored condition have lost direct contact with and are afraid of the healthy, natural, spontaneous functions within them. As a result, all of human psychopathology can be boiled down to a fear of the spontaneous.

With profound repercussions, these truths take us out of the usual realms of human armored thinking in which either the mechanistic view sees the universe as a complicated machine that has to be made to move or the mystical view that sees the universe as a magical and unknowable static oneness.

The implications of these truths are staggering. For individual personal growth and the practice of therapy alone they are profound, for social interactions in general they are tremendous. We do not need to try, nor is it useful, or even possible, to make the patient feel an emotion or to get him moving. We need only to help the individual remove the impediments to spontaneous emotions and movement. We cannot make someone healthy. We can only help them overcome what prevents them from spontaneous contact with and functioning from the health that is already in them.

¹ Crist, P. 2007. Wilhelm Reich’s Legacy: [Bombshells in Science](#), *Journal of Orgonomy* 41(2): pages 82-87.

A Life of Courage

Courage, directly from the French *courage* meaning “heart or innermost feelings” from the Latin *cor* “heart,” originally meant literally to live from one’s heart. It subsequently took on the narrower meaning to live from one’s heart in the face of fear, out of “inner strength or bravery.” Living from and speaking the truth in our hearts, a life of courage, is truly what organomy is all about.

The word “truth” comes from the same root as “tree,” meaning to be as “steadfast as an oak.” When we talk about organomic truths we are talking about observations of nature that are as real and “steadfast as an oak.”

It is a sad commentary on the human condition that there is no single primary verb in English and most Indo-European languages meaning to “speak the truth.” While, in contrast, we have the verb “to lie” meaning to “speak falsely, tell an untruth” with several dozen synonyms. Among them are even the legal term “perjure” and several informal ones from the common “fib” to the crude “bull****.”

A Beacon of the Truth

The ACO must focus our energies and function like a beacon of the truth. We are not in a position to light up the whole world with the light of organomic knowledge even if the mass of humanity could perceive it. In speaking of “the truth” there is a danger that it will be interpreted as “Truth” with a capital “T,” taking on religious or moralistic connotations of something absolute and static. It helps to remind ourselves that, like the concept it refers to, the very origin of the word “truth” derives from something in nature that grows and develops but is nonetheless steadfast and reliable. What I hope we can do is shine a focused beam of the light of natural scientific knowledge that can sufficiently penetrate through the fog and confusion surrounding human events to be seen by and attract those who can see it.

We do not know how to find these people with any certainty. We have been saying for some time that we are more likely to be perceived by a select group that we have described as, “Those who already have a sense that there must be more to life.” Perhaps we can hone that to also say that those who can perceive what organomy is about and what it has to offer are, “Those who can already sense the deeper truths about life with less fear of the spontaneous.” These people are already in better contact with the basic core functions that Reich so simply identified as “love, work and knowledge.”

Our Messages

We have come to you with our holiday and summer appeals and reports for many years with many disparate themes. But woven through all of these communications have been the central importance of protecting and supporting the health in babies and children, and our need for better contact within our organization and contact with the outside world in order to attract new people.

What Is Genuine Contact?

In organomy we frequently hear this word “contact” used, or even sometimes overused as jargon. In recent years the tool of organometry (see below under research) has put our understanding of genuine contact on an accurate scientific functional basis.

In particular, the organometric equation for genuine organotic, i.e., energetic, contact has been identified showing that contact occurs with the fusion and integration of excitation and perception. That knowledge has been profoundly useful. But even beyond the knowledge of the two functions necessary for contact, the form of the equation is a basic organometric creation equation revealing quite simply that the process of contact is a function of creation. And as with any creative process, it occurs spontaneously.

When we experience genuine contact we are moved by something more than us. We cannot “make contact” any more than we can “make love.” Contact and love are processes that only occur *spontaneously*. They are not things that can be “made” to happen.

This creative process of excitation and perception fusing in contact is occurring on its own all the time in nature. It happens within us whenever we perceive an emotion or have a sensation as well as physiologically in each of our cells, tissues and organs. It is also occurring all the time in the social realm between energy systems whether between individuals, organizations, the public, and countries. When genuine contact occurs we are spontaneously moved and experience it as a unique, newly created moment with that magical sense of something appearing out of thin air.

Even though we cannot make the process of contact and creation happen we can set up conditions under which this natural process is more likely to occur within the individual and in the social realm. This understanding with its many subtle and complicated manifestations underlies much of the basis for what we teach regarding the medical and the social realms in our medical and social organometry training programs, respectively.

How This Knowledge Applies to the ACO

Reich’s discovery that orgone energy functions occur spontaneously applies to all the examples of organotic contact. These truths also relate to the ACO in our attempts to “make contact” with the public. This mechanistic view often insidiously insinuates itself into our thinking and causes us to push to make something happen. When that doesn’t work we push more or we get discouraged. Or, on the other hand, we can mystically hope that things will simply happen without our having to do anything, which can lead to passive inactivity and then when nothing happens, a sense of resignation.

But as we said we have another choice. Besides pushing for contact or resigning ourselves to fate, we can work to set up conditions under which contact is more likely to occur. In fact, we have already been doing this instinctively at the ACO often without the specific explicit awareness of the process.

We cannot do much about the perceptual capacity of people out in the world. But we can make sure that we are more visible (and audible) to those who might perceive us. Likewise, we need to perceive the excitation in others and their responses to better identify those people who are more likely to feel what we have to offer and with whom the spontaneous process of contact is more likely to occur. It bears repeating that we need to continue to support and ensure that the excitation within our organization is alive and vital through the productive work we do.

How Are Our Arms and Organs Functioning?

In my [2012 Holiday letter](#), I described how organometric functional thinking could identify true functional equivalents and depict actual energetic processes functioning identically in two

systems as different as an organism in the biological realm and an organization in the social realm.

We can describe organizational structures that are the equivalent of somatic structures in an individual: individuals in an organization are the equivalent of “cells” and various individuals make up “tissues” and a work group made up of those is the equivalent of an “organ.”

The ACO’s is fundamentally an educational institution with the core function: *to preserve the quality of work in ergonomics and to develop and expand this science so that many more people can benefit from the unique and remarkable perspective that ergonomics offers.*

For years we have identified the “core functions” of the ACO as training, public education, publications and research. Each of these represents a major “organ” or “arm” of the organization.

Arms represent those functions that are more peripheral and reach out into the world. We have two: public education and publishing. Organs represent those functions that are deeper and closer to the vital core of the organization of which we also have two: training and research. I will briefly report on each of the four, leaving training to the last as a transition into reporting on our need to find new trainees, i.e., new “cells” to populate that vital organ.

None of the other arms and organs could function without the College’s **Administrative** arm. Consisting primarily of our two paid staff, Debra Sansanelli, our Executive Director, and Rose Littlefield, our new administrative assistant, these two “cells” keep the administrative “tissue” of our organization intact by keeping our members, faculty, students, editors, writers, presenters, volunteers and many others coordinated and working together, as well as maintaining and coordinating our contact with the public. They are supplemented by volunteer “cells” that perform considerable administrative work in certain aspects of the ACO particularly in publishing, training, and the property improvement project.

Our **Public Education** arm has been remarkably active with the last two years in particular seeing a remarkable and sustained growth in the number of ACO public education programs and events. We have our ongoing social ergonomics public presentation series now entering its eighth year, ACO Movie Night in its second year and one event so far in our new “Conversations With an Ergonomist Series.”

We decided to experiment with integrating these three series into a “[Variations on a Theme](#)” approach so that our constituents now have the opportunity to engage with us about a particular topic in three different venues and styles of events. One result of this approach has been that we have a full complement of six upcoming events scheduled all the way out to May of 2014.

The College also now has two regular social (rather than educational) events, the "Springtime in New York Social" and our ACO Summer Picnic. Each has been held for two years in a row and appear on their way to becoming annual events.

At our public social ergonomics presentations our regular attendance continues to be good and we see signs of movement and growth in a small but steady number of new attendees. We are

excited that our next event in the series on Saturday, February 1, 2014, “[Right From the Start: Pregnancy, Birth & Emotions](#),” presented by Drs. Theodota Chasapi and Susan Marcel will turn to the vital subject of raising emotionally healthy children right from the beginning of pregnancy.

Our ACO Movie Night series has entered its second year with lively and insightful discussions of the movies regularly attended including some new people. Our [next ACO Movie Night](#) will be on Saturday, February 22, 2014 following the theme of pregnancy, birth and emotions with a showing of *Juno*, allowing a platform for discussion of the difficult and highly charged subjects of teenage sexuality and pregnancy.

In November we also had our first event in our brand new (and renamed) “[Conversations With an Orgonomist Series](#)” in which Dr. David Holbrook had the opportunity with a small group of participants to delve more deeply into the subject of his October presentation on dealing with difficult people. The [next in that series](#) will be Sunday afternoon, March 16, 2014 when Dr. Susan Marcel will lead a small group discussion on the theme of pregnancy, birth and emotions.

We are also planning an entirely new course in sociopolitical orgonomy slated to start in the fall of 2014 organized by Dr. Edward Chastka. He is using Dr. Charles Konia’s new book, [Neither Left Nor Right](#), as the outline for the 12 sessions of the course. Stay tuned for more information about the course after the first of the year.

This year we have also scheduled a combined Introductory and Advanced [Laboratory Workshop in Orgone Biophysics](#) from June 21 to June 24, 2014.

I hope you will visit the [events page](#) on our website for more information about all of these programs as well as the ones announced for April, May and June of 2014.

Our **Publishing** arm, which is essential to documenting and disseminating the work in orgonomy, continues to publish the *Journal of Orgonomy* twice a year with high quality articles on a wide range of subjects. In particular, we have a steady stream of therapy case reports, many coming from patients presented in our clinical training seminars. Our new “Personal Experiences with Orgonomy” section has already drawn considerable notice with just its first article. We certainly need more subscribers to the *Journal* than our steady but small number of 200 and hope you will think of a gift subscription for someone who you may want to introduce to or who wants to learn more about orgonomy.

Our **Research** organ has been active in work done by individual orgonomists such as in orgonometry, particularly by Drs. Charles Konia and Robert Harman. The research into this little-known form of mathematics developed by Reich to clarify and determine the functional relationships between specific functions in nature has revealed important theoretical as well as practical applications of orgonomic knowledge. This is true both from Reich’s discoveries as well as those made since his death. Key among those has been our deepening understanding of orgonotic contact, as mentioned above. Some of this research, particularly by Dr. Konia, has been published in the *Journal of Orgonomy* and some has been presented in the ACO Orgonometry Course. Taught since 2001 by Dr. Harman, he introduces members of our professional training programs to this valuable discipline.

Our other area of organomic research steadily supported by the ACO is Project Protozoa. Our laboratory technician, Steve Dunlap, has filmed microscopic preparations for thousands of hours in an attempt to capture and document the spontaneous development of protozoa. Again, the truth that nature functions spontaneously is the basis of this project.

Our **Training** organ is central to and a direct expression of our core function as an organization without which we would die. Both the medical and social organomy training programs are going well. The current session of the Didactic Seminar, the beginning course for both social and medical organomy training now in the second of its three years, has naturally organized into a cohesive work group. The good working relationships among this group of nine students with disparate backgrounds facilitate their education. Our ongoing clinical seminars are also contributing high quality continuing education of members through useful practical discussions that improve the therapy of the patients presented. The fees from our training programs continue to fund a significant portion of the ACO's annual budget. While currently going well, both the medical and social organomy training programs have room for more trainees. The major problems facing them, especially our medical training program, remains the lack of an obvious source of new trainees.

The Truth About Finding New Medical Organomy Trainees

We have repeatedly flagged the importance of recruiting new trainees in medical organomy to ensure the long-term survival of organomy. But we still do not know where they will come from. I often hear reactions from people indicating that the reality of what that entails is not clear. Let me attempt to tell you the unvarnished truth about finding new trainees in medical organomy. I hope that rather than discourage you, the serious reality of our situation will motivate you to help us in the most important endeavor we currently have for the survival of the ACO and thus organomy.

We expect that new trainees will come into our training program in the same way that they always have. While we are open to trying new approaches, we have no reason to believe an entirely new process will develop. I often get questions about what we need to do to make contact with pre-med or medical students. While we are certainly open to contact with these groups, for many reasons we do not feel it will be fruitful. First, it is likely that those that far along in their medical careers are already deeply inculcated in and/or committed to a mechanistic approach. And second, the reality is that only one out of our current group of organomists and trainees learned about organomy after enrolling in medical school. In fact, the vast majority of our organomists decided to go to medical school because of their desire to become a medical organomist.

Therefore, the usual pattern for our current organomists and trainees has been that they learned about organomy and began therapy usually in their teens or 20s, attended medical school because of their interest in becoming a medical organomist, subsequently began a residency in psychiatry and then started in our training program. Typically, the time frame for all of that has been 10 to 15 years (or more). The trainees then require a minimum of another four to five years in our training program before beginning in practice as a medical organomist. This total of 15 to 20 years from first contact to practicing organomist means that the people we make contact with this year might be functioning as young inexperienced organomists some time between 2028 and 2033. It is a sobering timetable when we consider that we currently have only one medical trainee in his 30s. The rest of our organomists range in age from 52 to 82 years old.

It is also important to recognize that the motivation for our orgonomists to pursue training came from their own experience in medical orgone therapy. Therefore, it is imperative that we make contact with young people who want to go into therapy to improve their functioning and who might subsequently be motivated to consider a career in orgonomy.

A New Referral Service

Another exciting new ACO program that may help our outreach is a referral service that we are setting up in order to provide young people with the opportunity to be introduced to therapy if they are not able to afford the usual fees. We recently completed the renovations of our examination room at the ACO for its use for this program, spending only \$2876 of the PIP funds listed for “interior renovations and furnishings” in our 2013 Summer Appeal. We are now in the process of promoting this important experiment that we hope will provide us with more information about connecting with our target age group. The program is in place and we now need to see what interest there is among young people who want to begin therapy.

Varying Depths of Contact

Years ago a fundraising professional taught me “The three I’s” about the engagement of people with an organization. He said there are those who are *Interested*, those who are *Involved* and those who are *Invested*. I now understand that these categories apply much more broadly than fundraising and represent a functional description of the level of contact an individual has with an organization and its work.

If you are reading this letter it means that you are at least interested in the work of the College, and that most likely you are on our mailing list or e-mail list. Others may be interested and log on to our website to read material there or purchase a single publication or otherwise show interest without significant involvement. If you attend a presentation or a course or subscribe to the *Journal*, volunteer at a minimal level or make a modest donation, you are involved. If you are a member of the ACO Board of Regents, member of one of our training programs, a volunteer with a significant ongoing work responsibility, a member-donor or significant other financial contributor or have any other participation that indicates a deep engagement in the work of the College, you are invested in the ACO.

Historically, we have been best at deepening the contact with those who are already significantly engaged with us. Our recent decision to experiment with “Variations on a Theme” that integrates our public presentation with Movie Night and “Conversations with an Orgonomist” have so far primarily addressed deeper contact with those already involved or invested.

While recently we have had a small number of new people attending our public events, we struggle most with increasing the number of new people interested in orgonomy and the College. Clearly, this area is where we must improve our outreach. We also do not yet have any objective evidence to indicate which out of all of those who become interested might eventually become new trainees.

We must remember that interest, involvement or investment in medical orgone therapy does not necessarily mean that the person will be interested in orgonomy or engaged with the ACO. Some people are invested in their therapy but have little or no interest in the science of orgonomy and therefore no interest in the ACO, while others hunger to learn about the science behind it. What makes for this difference is currently a mystery.

New trainees will come from those who are already well along the spectrum to being involved if not already invested. We must assume that we need a large number of people interested in therapy to end up with a few who will be interested in ergonomics; and of those, fewer still who will become involved and fewer still to become involved enough to be motivated to train as medical ergonomists.

We Need Experimental and Creative Approaches to Outreach

While we continue our current activities as described above, I believe it is imperative that we try new and creative approaches to improve our contacts with new people. The Business Advisory Board and the ACO Strategy Group both recommended that we budget some funds for well-circumscribed experiments in outreach. I am pleased that the ACO Executive Committee approved \$10,000 in our 2014 budget for this purpose. Proposals for outreach projects of up to \$1000 each will be reviewed for creative new approaches. We want these to have measurable results in order to objectively evaluate our success with a particular experimental approach and the advisability of further pursuing it.

Brief Update on Our Property Improvement Project (PIP)

I encourage you to review the detailed descriptions about the rationale and the plans for PIP in the 2011 Annual Report and Holiday Appeal and the 2012 and 2013 Summer Updates and Appeals which [can be accessed online](#) from the “Support the ACO” page of our website. As we have mentioned previously, PIP already has had the important effect of vitalizing our organization by sparking the development of new endeavors as well as supporting the success of many of our ongoing activities as described above.

Jim Wittes has continued to bring his creative problem-solving approach as our volunteer PIP Project Manager. Since the 2013 summer update, the project has proceeded on less publicly obvious aspects of the work. We have continued to build our team of professionals with the hiring of a land use attorney. In October, our engineer presented a preliminary layout to the Executive Committee showing the major foundational improvements we plan as depicted in our 2013 summer report. Our engineer and our attorney continue to research the public records in order to obtain approvals needed for proceeding. Our summer appeal raised another \$25,000 that can be used for PIP, which with the funds already raised gives us a total of \$133,000 raised to date. This leaves us about \$132,000 short of the needed \$264,600 that we outlined. Nevertheless, the initial phases of our plans are proceeding as scheduled with the funds we have.

Thank You For Your Generosity

I am always overwhelmed by the generosity of our contributors and cannot adequately put into words the depth of our appreciation. Our very survival continues to financially rely on your donations to keep our general operations going. We have been very fortunate to have your ongoing support over the years. Many recent donations came out of one-of-a-kind circumstances that allowed several supporters to contribute significant funds. Without these we would have been so focused on mere survival that we would have been unable to consider our property improvement and other new outreach projects.

Our 2013 Year End Financial Status and Needs for 2014

Because of the generosity of our supporters like you we will end the year in the black. On the surface we are in better shape financially than we were last year. At the same time, as I outlined

in the [2012 Holiday Appeal](#) we are still in a precarious position to be so highly dependent on transfusions from your ongoing support just for our operating expenses.

To simplify looking at our financial situation we can say that other than the PIP expenses (offset by PIP income), our expenses for 2013 were in the same ballpark as last year with the exception of about a \$10,000 increase in salaries for staff, essential to support our increased activities. We are fortunate that our donors were again generous with us in 2013. Our general operating fund (GOF) donations were \$31,000 -- very close to the budgeted goal of \$32,000. We were also very pleased with the \$22,000 response to our storm preparedness fund appeal which exceeded the goal of \$21,000. And so far in 2013 we have had a total of \$75,000 come in that can be used for our Property Improvement Project.

In 2014 we have two major categories that need funding with contributions: our GOF and PIP. We have once again budgeted \$32,000 in general donations for 2014. In addition to that we will need to cover the new \$10,000 item for experimental outreach approaches and about \$12,000 in increased staff salaries essential for ongoing support of our greater public education activities. As mentioned, we also need to raise an additional \$132,000 to cover our estimated expenses for PIP as outlined in the 2013 Summer Update and Appeal. And as is typical of such projects, there will undoubtedly be additional unforeseen expenses.

The Real Hope for the Future

The holiday time is the time to celebrate light in the darkness of the winter season and to celebrate children and gift giving. The real hope for the future of humanity lies in supporting the health in children right from conception and raising them in a way that keeps alive their capacities for love, pleasure and satisfying work in the face of the human perversion of armor.

Raising children in this way requires special awareness and a real understanding of a child's true emotional and biological needs. For this to be possible we must educate parents or potential parents about what these needs are. We must also educate parents about their own need for therapy to help them overcome their own difficulties and rigidities that prevent them from making the essential, real contact their infant and child needs.

We must train a wide range of social ergonomists including teachers, social workers, family and couples' therapists and others who will be able to work with and educate children as well as work with parents and potential parents about the genuine needs of children. Happily, our social ergonomistry training program continues to bring in people in a wide range of fields who have contact with the public and can make a genuine difference in people's lives.

And, as we have said, essential for any of the other steps to be possible, we MUST train well-qualified medical ergonomists who can help patients as well as social and medical ergonomistry trainees live and work in a way that is in touch with their deeper biological and emotional core.

All of this is a huge undertaking, one that will require generations. The ACO is the only organization with so many of the pieces in place to accomplish it. We are already developing plans to carry it beyond the lifetime of many of our current members.

A Great Investment In a Hopeful Future

Go back to the image of the infant at the beginning of this letter and take a few moments to recognize how special your gift to the American College of Orgonomy is. Where else can you make an investment in supporting the truth about life that supports an organization dedicated to championing that truth, training people in the practical application of that truth to make a difference in people's lives, a difference to help babies grow up to live, love, work and learn spontaneously?

Your contribution supports our efforts to create and sustain a home for orgonomic knowledge and the programs that keep it alive. I hope you will join with us by continuing your financial support to insure our success in this monumental endeavor. The American College of Orgonomy has so much to offer. With the enclosed card or [on-line](#) at www.orgonomy.org, please send your donation or sign up as a [member-donor](#) so we can count on a steady income to sustain us in the coming months and years ahead. And if you are not already on our e-mail list, please help us make contact with you more quickly by joining our [mailing list online](#).

From all of us at the ACO, I thank you for your support and generosity. I wish you and yours a happy Holiday Season and a healthy New Year, and I hope to see you in the near future at one of our events at our Princeton home.

Sincerely,



Peter A. Crist, M.D., President

[Please support the ACO today](#)