

**From:** Dave Cardell <dave@eyeonapp.com>  
**To:** Kester, Tonykester@aging.sc.gov  
**Date:** 11/6/2014 8:14:08 AM  
**Subject:** Re: Sharing what we've done with the State of Georgia

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Hi Tony,

Great! I think taking you through a few of my slides from the conference would be a good first step. I can do this via we conference. How about sometime next week? Maybe Tuesday, Wednesday, or Thursday morning (10 or 11am)? I could also do Monday or Tuesday at 2pm.

Dave  
[www.EyeOnApp.com](http://www.EyeOnApp.com) - Extending Independence

On Nov 5, 2014, at 1:14 PM, Kester, Tony wrote:

Dave,

Thanks for the information. Jay talked about the phone assurance at a previous meeting and I was planning to contact him about the possibility of more information. A presentation would be great.

How do we move forward on this?

Thanks.

Tony

Tony Kester  
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**From:** Dave Cardell [mailto:dave@eyeonapp.com]  
**Sent:** Wednesday, November 05, 2014 10:16 AM  
**To:** Kester, Tony  
**Subject:** Sharing what we've done with the State of Georgia

Hello Tony,

Several people approached me after my joint presentation alongside Dr. Jay Bulot (Director of Georgia's Division of Aging Services) at the HCBS Conference to suggest that I reach out to other states and share what we are doing in Georgia. In the presentation, we spoke about two apps that my company has delivered to the State of Georgia (flyer from conference attached). There was a general feeling in the audience that this technology would be beneficial to a larger community. The two apps are:

1. EyeOn App - a simple but elegant way to check-in on people living alone. The app notifies friends/family if the user doesn't

respond to scheduled checks (think the opposite of "I've fallen and I can't get up"). Georgia is using this to help extend independent living.

2. GANE App (Georgia Abuse, Neglect, and Exploitation) - a powerful tool designed for Law Enforcement and APS. It's an easily accessible tool to help identify and assist at-risk adults. It includes agency contact information, screenings for different situations providing which questions to ask, and what to do based on how the adult responds (when to call, who to call, etc). It also includes applicable Laws, Temporary Housing options, etc.

I'd be happy to speak with you or someone on your staff to see if it makes sense to customize this technology for your state. If it would be of value, I could do a short web conference highlighting the presentation Dr Bulot and I did at the HCBS Conference.

Dave

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