[long gap on tape before recording begins]
HENRY: Hello.
SCOTT: Hello.
HENRY: Hello.
SCOTT: Yeah.
HENRY: Who's this?
SCOTT: Scott.
HENRY: Scott, this is Henry.
SCOTT: Pardon?
HENRY: This is Henry.
SCOTT: Henry, oh, Henry, hi.
HENRY: How are you doing Scott?
SCOTT: Oh, I'm doing fine.
HENRY: How far are you away from David?
SCOTT: Oh, about 50 feet.
HENRY: Tell him that I need to talk to him.
SCOTT: Okay, if, if he can. Hold on.
[gap]
SCOTT: Hello, Henry.
HENRY: David?
SCOTT: Oh, no, this isn't David, it's Scott.
HENRY: Hi, Scott.
SCOTT: We're still waiting.
HENRY: I need to talk to David.

SCOTT: You just want to tell him something?

HENRY: Yes, I need to talk to him.

SCOTT: Okay, 'cause I don't think he's going to talk to you. He'll listen to you but he won't reply unless he's told to.

HENRY: That's fine. If he wants to listen to me that's fine but I need to talk directly to him.

SCOTT: Oh, okay. I'll see -- hold on.

[gap]

SCOTT: Hello, Henry.

HENRY: Hello, David?

SCOTT: No, no, this is Scott again. He's resting, he's sleeping right now.

HENRY: Scott.

SCOTT: Yeah.

HENRY: We're going to have a changing of the shifts.

SCOTT: Yeah.

HENRY: Okay? So there's going to be movement in different areas, okay, including the vehicles that are in -- out there.

SCOTT: Right.
HENRY: Okay? As soon as he wakes up, I need to talk to him.

SCOTT: Okay.

HENRY: What, what has happened is, we need to deliver a message to him, and the message is, you know, one that he needs to consider very seriously.

SCOTT: Okay.

HENRY: Okay. What has happened is, the news media is putting out stories that, you know, that are discrediting him because of his failure to live up to his promise.

SCOTT: Right.

HENRY: Okay. I need to talk to him directly.

SCOTT: Okay.

HENRY: Okay? When did he fall asleep?

SCOTT: I don't know. I'm in another room.

HENRY: Okay. Are you sure that he's asleep? He's not passed out?

SCOTT: Yeah, he's -- he's still alive, he's just not -- he's not awake.

HENRY: Okay. Well, at some point or another we're going to have to -- who is the second
person in charge there in his absence?

SCOTT: At this point, right now, since we've been told to wait, there is no one.

HENRY: Okay, now, has somebody taken his blood pressure? We need to take his blood pressure because we need to know what his current medical condition is. See, one of the things that's happening is, somebody needs to be -- somebody needs to take the initiative, Scott --

SCOTT: Right.

HENRY: Because he's gonna die on us because of, of somebody's failure to take action.

SCOTT: Right.

HENRY: Okay?

SCOTT: I understand what -- your concern.

HENRY: Okay, so, we need for somebody other than David to be responsible. I know the weight of responsibility is quite heavy, and nobody wants to usurp his authority, but at the same time we need for somebody to be a secondary leader. The whole group needs this. We can't just rely on David, and not because David isn't strong, he's very strong, and he's very wise, but at the same time there is an awful lot of people that are dependant on this --

SCOTT: Right.
HENRY: So, we need, Scott, for somebody to take the bull by the horns and to become an aggressive leader.

SCOTT: Right.

HENRY: Okay. I want you to discuss this with somebody and --

SCOTT: I'll talk to Steve.

HENRY: -- we need for somebody to come forward.

SCOTT: All right.

HENRY: Okay.

SCOTT: Thanks a lot, Henry.

HENRY: Okay.

SCOTT: Who's going to be the next guy after you?

HENRY: I'm going to be here.

SCOTT: Oh, it's you.

HENRY: Yeah, because Jim -- what has happened is Jim has been removed because he feels that he was let down. There was a lot of responsibility that he put on his shoulders because he, he trusted David completely, and not -- not that there's anything wrong with that because that's what he needed to do --

SCOTT: Right.

HENRY: But we need for somebody to come
forward now.

    SCOTT: Right.

    HENRY: Okay?

    SCOTT: Okay, Henry, tell him, you know, tell Jim it's all right.

    HENRY: Okay, well I'll do the best I can, but the bosses are -- the bosses are unhappy with him.

    SCOTT: Right, I know he's not the top guy so we're not holding him responsible. Okay.

    HENRY: Okay.

    SCOTT: I'll let him know, Henry.

    HENRY: Okay. I'll talk to you in a little bit. But remember, somebody needs to take his blood pressure. Okay?

* * * * *

[phone ringing]

    SCOTT: Hello.

    HENRY: Hello. Who is this, Scott?

    SCOTT: Yes.

    HENRY: Who is this, Scott?

    SCOTT: Yeah.

    HENRY: Scott, I need to talk to David.

    SCOTT: He's still resting.

    HENRY: Well, I need to talk to him. Has anybody taken his blood pressure?
SCOTT: Huh?
HENRY: Has anybody taken his blood pressure?
SCOTT: Yeah, hold on. I think his wife did. I'll get her.
HENRY: Okay, let me talk to her.
SCOTT: Okay.
HENRY: (Talking in the background) He's going to get -- (Talking in the background) -- David's wife. (Indiscernible)
(Conversations in background not discernible)
[gap]
UNIDENTIFIED MALE SPEAKER: Testing one, two, three, four, test, test, test. Do you hear --
UNIDENTIFIED MALE SPEAKER: Yes.
UNIDENTIFIED MALE SPEAKER: What other buttons did you push? Did you push one of these buttons?
UNIDENTIFIED MALE SPEAKER: Sure.
[gap]
SCOTT: Hello. [gap] they're going to get her.
HENRY: She's what?
SCOTT: She's downstairs feeding her kids so
she'll be right up.

HENRY: Okay. Do you know if he's eaten anything?

SCOTT: Pardon?

HENRY: Has he eaten?

SCOTT: No, he hasn't. He's, he's just passed out, sleeping.

HENRY: What?

SCOTT: He's passed out, sleeping.

HENRY: Sleeping?

SCOTT: Yeah.

HENRY: Okay. What about Steve, where's he?

SCOTT: Huh?

HENRY: What about Steve?

SCOTT: He's sleeping too.

HENRY: Is, where is he sleeping?

SCOTT: Oh, he's about -- next to David.

HENRY: But where are they?

SCOTT: They're down the hall.

HENRY: Are they in a room or are they in the --

SCOTT: He's in the hallway.

HENRY: But, but is he -- what is he sleeping on?

SCOTT: He's sleeping on a mat.
HENRY: On a mattress?

SCOTT: Yeah, hold on. She's here.

RACHEL: Hello.

HENRY: Hello, Rachel.

RACHEL: Yes.

HENRY: How are you?

RACHEL: Okay, I'm just a little out of breath here.

HENRY: Okay.

RACHEL: Came up from downstairs.

HENRY: Okay. Has he eaten anything?

RACHEL: No.

HENRY: We're, we're -- you know, we're in a difficult situation because if he hasn't eaten in I don't know how long, he's probably dehydrating. One of the problems that we --

RACHEL: He's been drinking.

HENRY: Pardon me?

RACHEL: He's been drinking.

HENRY: Okay. One of the problems that we have is somebody his age, you know, he will stay in a high level for a prolong period of time, but once he starts going down, he's going to go down real fast. We need for somebody to become a leader in his absence. We need for somebody to start taking some
responsibility because there is -- everybody is just dependent totally on him, and that's fine, and that's good so long as he's well, but he may start deteriorating very soon. Has anybody taken his blood pressure lately?

    RACHEL: I don't -- not in the past few hours I don't believe.

    HENRY: I'm sorry?

    RACHEL: Not in the past few hours, I don't think so.

    HENRY: You probably need to do that. How long has he been asleep?

    RACHEL: Well, when was it that Jim called not too long ago, he was awake then.

    HENRY: Okay, that was about six o'clock.

    RACHEL: What time is it now? Seven-thirty. Well, he was awake a little after that, maybe it's been an hour or so.

    HENRY: Okay. How long do you think he'll sleep?

    RACHEL: Well, he's not a person that sleeps a long time anyway, he kind of, you know, rests a little bit and then he'll wake up.

    HENRY: Okay. I'm going to call him back in about -- in about a half hour, okay?
RACHEL: Um-hum.

HENRY: But I need for you to take his blood pressure and, and give me that reading. Can you do that Rachel?

RACHEL: I don't know if -- in a half an hour -- I don't know, that's kind of -- I don't know if he'll be awake in a half an hour, but I guess you can try and call back.

HENRY: Okay, okay, okay, well I'm going to call you back in about a half hour and if, I need for somebody to let you know as soon as he wakes up so that you can take his blood pressure.

RACHEL: Okay?

HENRY: Okay?

RACHEL: All right.

HENRY: Okay, and, let me ask you this Rachel, if, if he starts to deteriorate, who can we count on to become a person that's going to be a leader and a person of responsibility? Can you do that or are we going to have to depend on somebody else?

RACHEL: Well, I'm not sure if I understand, you know, I mean everybody will probably be for themself I guess.

HENRY: Well --
RACHEL: I'm not sure if I can even answer that question.

HENRY: Do you feel, do you feel strong enough to lead everybody? Can you talk to the group?

RACHEL: Yeah, I can talk.

HENRY: Okay. Do you think that they will follow your lead?

RACHEL: I think they'll do whatever, I don't -- I don't really know.

HENRY: Okay.

RACHEL: If, you know, if he happens to go, I don't really know what they'll do.

HENRY: Okay. Well, I want you to start thinking in terms of some of the things you need to say if that should occur.

RACHEL: Um-hum.

HENRY: Because we're going to rely somewhat on you and on others, but we're going to need somebody to come forward and take responsibility for the group. But I want you to watch him and see what his signs are, I want you to, to monitor his, his medical condition.

RACHEL: Um-hum.

HENRY: Okay?

RACHEL: Okay. So, what's the real danger
to him, his blood pressure when it drops to a certain point? What -- do you know what point that is that it's considered really dangerous? I mean I know 40 is really low, you know, because, I do know that, but --

HENRY: I think he, I think what may be happening is he's either real close to or he may going into shock, you know, now, so, how much --

RACHEL: He can go into shock without acting like it? I mean he seemed --

HENRY: Pardon me?

RACHEL: He seemed normal, I don't --

HENRY: Yes, that's true, he does, but he isn't, you know, he's, he's lost a lot of blood, he hasn't had, I mean, he's had some fluids but, but at the same time he's not eating like he normally eats.

RACHEL: Well, he did eat this morning.

HENRY: Well, there you go, this morning. It's almost eight o'clock, you know, we, we need to monitoring him because we're going, you know, we're going to have some problems and we need for somebody, for God's sakes, to take responsibility for him. You can't just depend on him. Somebody needs to take responsibility for his medical condition. We don't want to lose him. People are going to say things about him, they already are and it's a situation of
his, part of it is his, his, is the fact that he's going into shock, part of it is a fact that, you know, he may lose consciousness and he's going to drop rapidly. We need for somebody to say, I am not going to permit this to happen to him, Rachel.

    RACHEL: Um-hum.
    HENRY: Okay?
    RACHEL: Yeah.
    HENRY: Does he not like to be disturbed when he's sleeping?
    RACHEL: Um, well I like to let him rest a little bit, and then --
    HENRY: Sure.
    RACHEL: -- you know.
    HENRY: Okay. Okay, well, I'll call you back in about a half hour.
    RACHEL: Okay.
    HENRY: Monitor his, are you feeding the kids now?
    RACHEL: Yeah, they ate. They just, most of them just finished eating.
    HENRY: Okay, well, that's fine, well--
    RACHEL: You can't get, you can't get by without feeding kids, they'll let you know.
    HENRY: That's right. Okay, now, I want you
to monitor him, him and his activity and his medical condition and I'll call you back in about a half hour.

RACHEL: Okay.

HENRY: Okay? Now feel his head, touch him and see how he feels.

RACHEL: Okay.

HENRY: Okay?

RACHEL: All right.

HENRY: Okay, I'm going to call you back.

RACHEL: Okay, and, just a minute.

SCOTT: Hello?

HENRY: Hello.

SCOTT: I just wanted to let you know that our plans have not changed, we're just waiting. We're not moving around or anything, we're ready to go out whenever he is.

HENRY: Who is this?

SCOTT: Scott.

HENRY: Okay, Scott, now, one of the situations that we have is we fear that his medical condition may be deteriorating.

SCOTT: Right.

HENRY: We don't want to wait to a point that, that we lose him, quite simply, because nobody is doing anything to, to take responsibility --
SCOTT: Oh, right, I see.
HENRY: -- for the entire group including him.
SCOTT: Right, I see.
HENRY: Okay?
SCOTT: To take -- to check on him and make sure he's all right.
HENRY: Yes, because, you know, because of his situation we're, we're, you know, we need to ensure that he feels, you know, that, that we, we don't want him to feel that we do not think that his life is important. What he's done is important, but, but he needs to come out of this alive, and if just by neglecting him, and what is going on in there, you know, we're going to have a problem.
He's -- I'm sure he's got infection, he's dehydrating, he's going into shock, his blood pressure is getting low, okay? He's, he's getting to the point that he's going to start losing his concentration and things of that type.
SCOTT: Huh-huh.
HENRY: If those things, if you see those signs we can't wait. We're going -- somebody's going to have to initiate action.
SCOTT: Right.
HENRY: Somebody's going to have to come forward, Scott. It may have to be you.

SCOTT: I understand.

HENRY: Okay. We're going to call you back in about a half hour. In the meantime, you be thinking about this.

SCOTT: Yeah.

HENRY: And you be monitory his medical condition.

SCOTT: Okay.

HENRY: I'll call you back.

SCOTT: Okay, thank's a lot.

HENRY: Okay.

SCOTT: Bye-bye.

HENRY: Bye.

* * * * *

[phone ringing]

SCOTT: Hello.

HENRY: Scott?

SCOTT: Yeah.

HENRY: This is Henry.

SCOTT: Hi, Henry.

HENRY: How are you doing?

SCOTT: A little bit worse. Do you want to talk to Rachel?
HENRY: How are you feeling?
SCOTT: Huh?
HENRY: How are you feeling?
SCOTT: Kind of weak. I'm tired mainly 'cause I haven't gotten any sleep.
HENRY: Okay.
SCOTT: Other than that I'm fine. I'm waiting.
HENRY: Are you injured?
SCOTT: Yeah.
HENRY: Foot?
SCOTT: Leg.
HENRY: Leg?
SCOTT: Yeah, leg and hand.
HENRY: Are you in a lot of pain?
SCOTT: No, we got pain pills.
HENRY: Oh, okay. What, what does the wound look like?
SCOTT: It went, it went -- it hit my --
HENRY: Huh?
SCOTT: It hit my wrist and came out my hand and it went in my leg. But I'm all right.
HENRY: Okay. How's, how -- what is the mood of everybody in there?
SCOTT: Oh, calm. We're not excited.
HENRY: Well, everybody was, was, like, real upbeat before because everybody was, was anticipating coming out.

SCOTT: Yeah.

HENRY: Go ahead.

SCOTT: Huh?

HENRY: What is their mood now? Is everybody, you know --

SCOTT: Yeah, well, we're just mainly resting now. There's a lot -- most of them are sleeping.

HENRY: Is that right?

SCOTT: Yeah. Their just getting some rest.

HENRY: What kind of pain pills are you taking?

SCOTT: I don't know what they are, they're just little blue pills.

HENRY: Okay.

SCOTT: I guess Motrin or something like that.

HENRY: Okay.

SCOTT: Or aspirin.

HENRY: Is, is everybody just anticipating coming out? Is everybody disappointed?

SCOTT: Yeah, we're just waiting.
HENRY: Okay.

SCOTT: We're, you know, like I told you --

HENRY: And, what is, what is David doing now?

SCOTT: Hold on, I'll let you talk to Rachel 'cause I'm, --

HENRY: Okay.

SCOTT: I'm in the room laying down by myself, I'm not with them.

HENRY: Oh, okay.

SCOTT: And we're just, you know, like I said, I told, I told you earlier, we're not -- we haven't changed our plan, we're just waiting, you know, we're waiting to come out whenever he's ready and, you know. Okay?

HENRY: Okay, --

SCOTT: So I'll let you know.

HENRY: -- well, wait a second. If, if something happens, are you prepared to lead everybody out?

SCOTT: I guess, I don't know.

HENRY: Well, I want you to start thinking in terms of that.

SCOTT: Oh, okay.

HENRY: Okay?
SCOTT: Yeah.

HENRY: Do you know what you need to do when that happens?

SCOTT: Yeah, get on my feet for one thing.

HENRY: Okay, now, you realize that we're going to need to have everybody start coming out very soon one way or the other. Okay? When I say one way or the other, hopefully with David leading, but if not, we really feel that you need to start thinking in terms of taking, you know, some of this responsibility because we don't want, you know, something to happen to David just because nobody is willing to take on that responsibility.

SCOTT: Right. I understand.

HENRY: Okay, now we're charge -- I'm charging you with that responsibility, Scott.

SCOTT: Well, like Steve was saying, you know, I have to, I have to do what I know, you know, like, what the Lord is directing me to do and through David and I'm just waiting right now and beyond that, you know, I can't speculate.

HENRY: Okay, well, I don't want you speculating, but I want you to be thinking in terms that, you know, we don't want everybody that's in there to be disappointed, we want this to be an upbeat
situation. There's a lot of people that listen to the message, however, it's starting to go down the tubes because nothing has happened.

SCOTT: You know, God still sits on the throne and I fear God, you know, like, you can do anything you want to me, you know, I mean, you know, I'm not saying it as a threat or anything but, you know what I'm saying, like the Hebrews that were thrown in the fire furnace when they were told, well, you bow down to that, you know what I mean? So, I, I'm just waiting right now, so, I'll let you talk to Rachel, but I, I understand what you're saying.

HENRY: Okay. I want you to be thinking in terms of, of that responsibility and how you, you hopefully can take over for David.

SCOTT: Yeah, I understand.

HENRY: Okay.

SCOTT: Okay, thanks, thanks for being patient, Henry.

HENRY: Okay.

SCOTT: I'll let you talk to Rachel now.

HENRY: Okay.

RACHEL: Hello.

HENRY: Hey, Rachel, how are you?

RACHEL: Oh, I'm fine.
HENRY: Did you take his blood pressure?
RACHEL: He doesn't want it taken right now.
HENRY: Is he awake?
RACHEL: Yeah.
HENRY: I need to talk to him, Rachel.
RACHEL: Just a minute. (In the background)
He wants to talk to you.
He's weeping right now, he's not going to talk at this moment.
HENRY: I'm sorry?
RACHEL: He's weeping right now, he's not going to talk at this moment.
HENRY: I don't need so much for him to talk, I just need for him to listen. I have some words for him that he needs to listen to. I want to help him, I need to help him, but I can't help him if --
RACHEL: I didn't hear -- I'm sorry, I didn't hear the last part.
HENRY: I want to help him, I need to help him, but I can't help him if, if I'm not permitted to talk to him. Please afford me that opportunity.
RACHEL: (In the background) He wants you to listen -- (indiscernible). (Talking in the background)
[gap]

RACHEL: Henry.

HENRY: Yes.

RACHEL: He didn't respond to that though, right now.

HENRY: Is he, is he awake?

RACHEL: Yeah.

HENRY: Is he crying?

RACHEL: Well, that's what he -- apparently, I guess so.

HENRY: Why is he crying?

RACHEL: Well, I didn't ask him that.

HENRY: Do you have an idea of what it might be?

RACHEL: No, I don't know.

HENRY: Okay. Can you, is he just sad or has something occurred? Is he in pain?

RACHEL: I had the phone away from my ear for a moment, I didn't hear what you said. Would you read Psalms 18?

HENRY: Pardon me?

RACHEL: Would you read Psalms 18?

HENRY: I need to talk to him.

RACHEL: Well, that's what he said.

HENRY: I, you know, I am not in a position
to help him if I can't talk to him, and I sincerely, truly want to help him, but I need to talk to him.

RACHEL: Do you want to read Psalms 18?
HENRY: I want to be given the opportunity to help him. Please permit me to be able to help him. I need to talk to him.

(Talking in the background - indiscernible)

[gap]
HENRY: David, can you hear me?
RACHEL: He's not at the phone right now.
HENRY: Can I please talk to him, Rachel?
RACHEL: He doesn't want to talk right now.
HENRY: He doesn't need to talk. I need to talk to him. There are a lot of people that were interested in his message. We need to follow through. He needs, he needs to be able to lead his people all the way through. Can hear me from where he's at?
RACHEL: No, not on the phone he can't.
HENRY: Can, can you --

(end of tape)