DAVID JONES: -- representations of other peoples and I have learned to keep my mouth shut and not tell anybody how I feel, you know, about my spirituality or my carnality. It's a battle of my own. Besides, it's only me and it's a battle of me. But --

JOHN: David. Let me tell you one thing. Number one, we don't think anybody is stupid in there. That's -- we don't think that at all. And, number two, we want to see you, David Jones, we want to see all the people in there come out safely without anybody being harmed. And that's, that's the bottom line. We just don't want to see anybody hurt. We want to see everybody come out safely.

DAVID JONES: That -- I believe that. I believe that. I know how it goes. But --

JOHN: I'm glad you do because that's really what we want and that's the absolute truth. Is Steve or David around?

DAVID JONES: I see no one near the phone right now but if you would like, I can go try and find them.

JOHN: Yeah, that would be good. It was good talking with you and feel free to call anytime
you want to.

DAVID JONES: Okay. What's -- who is this?

JOHN: This is John.

DAVID JONES: John.

JOHN: Yes, sir.

DAVID JONES: Well, nice talking to you.

JOHN: It was nice talking to you David.

DAVID JONES: Let me go see if I can find Steve then.

JOHN: Okay. Thank you. Goodbye, sir.

DAVID JONES: Somebody went to go see if they could find him, sir.

JOHN: Okay, thank you very much.

DAVID JONES: Okay.

JOHN: Take care of that wound.

DAVID JONES: Yeah, I'm glad I didn't get it like some other people did. You know.

JOHN: Well who else -- let's see. David got hurt.

DAVID JONES: Yeah.

JOHN: And who else was injured?

DAVID JONES: I thought Judy's hand.

JOHN: Judy's hand looks bad.

DAVID JONES: It's bad. Yeah. And Scott got it.
JOHN: Scott. How is Scott doing? Is he okay?

DAVID JONES: I don't really know. He's bandaged up. I don't personally know.

JOHN: How many people were killed?

DAVID JONES: Uh --

JOHN: It was Perry.

DAVID JONES: Pardon.

JOHN: Perry.

DAVID JONES: Perry.

JOHN: Mr. Gent.

DAVID JONES: Mr. Gent?

JOHN: Yeah. I think he got killed.

DAVID JONES: Oh, I don't know. I have not seen anyone. I've stayed right here.

JOHN: Yeah, yeah. Well, we're interested in getting everybody out safely, yourself of course included. And the sooner the better, you know, so that everybody can get medical attention. You don't want to get that wound infected.

DAVID JONES: I cannot -- you know, they're charging people with attempted homicide and homicide and this and that and the other and I know that's not going to change.

JOHN: I don't know that there's been any
charged against you at all. I don't know that there's
been any charges against you, sir, at this point at
all.

DAVID JONES: Unless the truth comes out
about what happened here, sure, they may have a legal
right in their book to come out here. But what I
thought they didn't have a legal right to do whether
it was an accident or not, by appearances, just by
seeing it, all these people seeing these guys coming
up here was cold-blooded murder.

JOHN: Well, that's the story that --

DAVID JONES: They are the ones committing
homicide. We didn't start anything.

JOHN: I know, you were on your own
property. And, that's the story that you need to get
out, you need to get out to the world, exactly the
facts that you saw from your window. So, that's what
you need to come out and tell the world.

DAVID JONES: Can't -- excuse me, somebody
is saying something.

JOHN: Yes, sir.

DAVID JONES TO UNKNOWN PARTY: You can't --

DAVID JONES TO JOHN: They are still looking
for him. He wasn't --

JOHN: He wasn't around. Well, that's the
story --

DAVID JONES: He's going to look somewhere else. Just a second.

JOHN: Yeah.

DAVID JONES: Just a second.

JOHN: David, that's -- David?

DAVID JONES: Yeah.

JOHN: That's the story that you need to come out and tell the world.

DAVID JONES: Yeah.

JOHN: You really do. You know what I mean? You're a man of the world, you said that. And I think that you really need to come out because you, you speak like a guy who's been around for a while.

DAVID JONES: Yeah.

JOHN: And you need to come out and tell the people just what happened. You need to come out and say what the events of Sunday were. Certainly you're an eyewitness to them. You saw them. You were standing right at the window.

DAVID JONES: Yeah.

JOHN: And we don't want this to happen again. So --

DAVID JONES: I've been through something once before and going through it again, all the things
I've seen since I was a child, and there is a truth that a lot of people don't see unless they get into it. On one side, it looks all totally wrong but if you ever happen to get on that other side, you gonna find out a lot of people on that other side don't belong there, they've been abused, and many different things that's happened because of the outlook of the one side.

JOHN: Okay. Well, either -- you know -- you're waiting, I take it then, for David to lead everybody out. Is that, is that how you feel?

DAVID JONES: I'm a man of the world. I have a strong carnality. A lot of things that I like to do personally, you know, and I don't mean anything off the wall. I mean normal things --

JOHN: Nothing wrong with that.

DAVID JONES: -- like you.

JOHN: There's nothing wrong with that.

DAVID JONES: Or Joe Blow, or Suzy-Q.

JOHN: Hey, there's nothing wrong with that.

DAVID JONES: But, if that Book's true and if somebody reveals and takes that Book out of the hand of God in the last days, as it's already been written in the prophesies and no one can reveal that Book except the Lamb, then that means everyone else
before has been a liar. I mean, the things that you probably already heard, you know. It really doesn't matter day to day because we go to work, we sleep, we make love, we do this and we do that. We go to Walmart, we go to Kmart, we go to church. And all those work (indiscernible) the book don't really mean nothing. But you can't know this or experience this or anything, you know, you cannot know anything out of that Book. We're all blind and deaf, It's all right there. It says only the Lamb can open it. All I know is a man come along and he started opening the Book and I'm going, yeah, yeah. And I been doing that for years, man. Yeah, sure, yeah. And I been seeing enough at a time to, hey, there's something here that I ain't never seen before. Ain't nobody ever showed me before.

JOHN: How long have you been in there? About?

DAVID JONES: I don't even live here.

JOHN: No, you just -- you have another residence somewhere else, right?

DAVID JONES: That's right. Well, another. I have a residence somewhere else. I come here and I visit, you know.

JOHN: Right.
DAVID JONES: You know.

JOHN: And you were there on Sunday.

DAVID JONES: I was here on Sunday. I sure was.

JOHN: Well, don't you think that you could go back to the same position, working and then going, you know, going back to your work schedule, or something like that, rather than just staying there?

DAVID JONES: I don't know.

JOHN: Sounds like that's something you'd like to do.

DAVID JONES: I don't know. There's a lot of things I would like to do. There's some things that I don't understand clearly. But I have been shown. I understand enough to know that if I don't hold on to something higher than this body and this flesh, I ain't got a chance, man, and that's the basic gospel.

JOHN: Well, you can always hold onto the word regardless of wherever you are. That's not going to change.

DAVID JONES: Well, there's a lot of perceptions in this world and only the Lamb can reveal the Book. You know. Here's Steve. He just walked up.
JOHN: Okay. Thank you. Thanks.

DAVID JONES: See'ya, John.

JOHN: Take care.

STEVE: Hello.

JOHN: Hi, Steve.

STEVE: Yeah.

JOHN: How's things going?

STEVE: I was trying to get a lot of these people -- they're having a type of worship hour right now and I was just waiting about 10 minutes to start --

JOHN: To start --

STEVE: I haven't even started filming yet.

JOHN: Oh, you're going to start the video, okay.

STEVE: Right.

JOHN: Right. How is Judy's finger?

STEVE: She said it's doing a lot better today.

JOHN: Good, good.

STEVE: She's been soaking it with epsom salt apparently, and with using hydrogen peroxide and a few different things. Apparently it's come down in size quite a bit from last night even.

JOHN: Great, great. That's good news.
Hopefully we're not infected then. That's the good thing.

STEVE: Yeah.

JOHN: So you're going to take the video?

STEVE: Yeah. Yeah.

JOHN: Okay, then we'll arrange to pick it up. How is David doing?

STEVE: He's still -- I peeked in the room again about, I'd say, about 20 minutes ago, maybe 30 minutes ago. And he's still laying -- he's not feeling well. I don't know what's up. The wound keeps on draining. It continues to do that. It's just -- it's dark. He's got a little light on. He's just kind of more or less resting, he told me. And he's going to continue to try to do so and -- but yeah, he's not even able -- he's not been up and around since -- I think it's been 2 days, maybe a day and a half, at least.

JOHN: Did he actually walk the other day? I mean --

STEVE: I think they told me, he got right up even. He wanted to stand to see if he could do that even.

JOHN: He was standing on his feet then for a while.
STEVE: Remember when I took that video where he was leaning up against the wall.

JOHN: Yeah, yeah. I remember that. Sure.

STEVE: He had made it in there and propped himself like that and -- it didn't look anywhere near as bad in that picture as it actually was. I was going to try to zero in a little better than that.

JOHN: It didn't look too bad in the picture at all. I mean, it looked like --

STEVE: No. Originally, it appeared like it had hit -- it had gone through the front side there, hit his pelvis bone and then went up. He was actually afraid it was broken but as it appears now, it doesn't seem that way. But it is, it's an open wide wound in the back, of course, and you can see the flesh, you know, as it was pushed through by the bullet.

JOHN: Was he bleeding from the rear wound? The exit wound?

STEVE: Yes.

JOHN: That's where the blood was coming from?

STEVE: Yes.

JOHN: Did he lose a lot more blood or was it just oozing out?

STEVE: So far it's fluids.
JOHN: Just fluids.

STEVE: Yeah, more than -- it is blood mixed in but not strong. It doesn't seem to be real bad.

JOHN: Do you think he is getting weaker?

STEVE: It didn't, you know, actually, every day it seemed like he was gaining strength, with the exception of until about yesterday, he started getting the headache and not feeling too well.

JOHN: Do you think he could be getting an infection of some kind, maybe having a relapse, you know.

STEVE: That's possible. That's why I think they're going to keep a close tab on him as they have been and check for those signs.

JOHN: It's a funny thing, you know, when older men get injured like that, they just go down very, very gradually. You can almost see a deterioration, but with a younger man, he seems -- it just -- younger men just seem to go down very rapidly.

So --

STEVE: Well, what amazed everybody, like when Jim was in connection with us as was Henry in the beginning, the amazing part was how -- he was -- he thought how he was going to die that first day. I was right here, I was talking to him. He didn't think he
would make it through the night. Well, the next day he was around, his voice was becoming a little more weak and they warned me those are signs of infection and so forth and they asked that I take his vital signs. The nurses took his blood pressure. And, it jumped from one extreme to the other and all of a sudden it was almost like he was almost being healed overnight.

JOHN: It doesn't sound like it now.

STEVE: No. Well, now, it doesn't seem like -- I mean, in watching, looking at the wound and everything, you know. But it's hard to tell.

JOHN: Did they take his vitals today?

STEVE: I don't know if they did, in fact. Because sometimes he'll -- they'll come by to do that and there's sometimes he doesn't want to be bothered because of either the way he is or just wanting to rest still or something.

JOHN: Well, I'll tell you. Do you have a few minutes here?

STEVE: Yeah.

JOHN: Okay. You know, just -- let's you and I kind of kick around an idea. You know how rapidly we get things done right? And I'm being facetious of course.
STEVE: Uh-huh.

JOHN: If --

STEVE: Yeah, two thousand years, I know.

JOHN: No, no, no. That was very good.

STEVE: Well, no, I think it was Gary or

Henry mentioned that a way back --

JOHN: Two thousand years. Well, it is

almost as long here to get a tape delivered out there.

So what I kind of wanted to go through with you, you

know, for the sake of argument, that David receives

the word shortly and that, you know, that we can bring

things into action once he hears from the -- from God

what he's going to do. How do you think we can

arrange it physically? In other words, when we walk

out of there, you know, what's going -- what will you

see and, you know, we'll basically do it like we did

it before where you come out the front door and then

walk down the driveway --

STEVE: Exactly.

JOHN: -- toward the road.

STEVE: Exactly. Just like that Tuesday.

We were all just going to walk right on out there and

that was going to be that. You know, if you had

somebody to pick us up, vans, whatever. In fact with

him, we were just going to carry him on the stretcher
because of the condition he was in.

JOHN: Okay, let's talk about that. How do you think that will work? Let's just go over what we had in mind before.

STEVE: Well, I think it would still work the way -- that same way because, you know, that hasn't changed. He still thinks that what you guys suggested was okay. See the whole point is he's -- he doesn't disagree with you at all because he even told me it was, I think it was 2 days ago.

JOHN: Good.

STEVE: He says that what they laid out was fine, I agreed to it. He says that has not -- he told me, that has not changed.

JOHN: Has not changed.

STEVE: He said, the only thing, his God said to him was wait and he said he's ready to go.

JOHN: He's ready.

STEVE: That's what he told me, yeah.

JOHN: He's ready to go, huh. Would you do --

STEVE: He said if I'm carried out or if I can walk out, either or, you know, I would do that.

JOHN: Good.

STEVE: And he says that what they suggested
seems more than reasonable, that you know, we would just come out as they said and I'm sure that they'll have the vans or whatever necessary to take us, you know, to wherever we're going and --

JOHN: Okay. Would you be one of the men carrying David, do you think?

STEVE: I have my doubts, I don't know if I would or not.

JOHN: Okay. Why is that?

STEVE: Well, I don't know. I doesn't really matter as long as it's four strong guys probably that have hold of the, of course, the stretcher.

JOHN: Yeah. Probably though, I think that if I remember -- my recollection is right, I think they were going to keep you on the phone inside for coordination.

STEVE: Exactly. I think Gary suggested that or something. I told him that would be fine. I said I have no problem with that.

JOHN: Okay, so, why don't we plan then, just tentatively, when David does hopefully receive some indication to leave that then we can do it the same way.

STEVE: Okay. That would be fine. I don't
mind. You know.

JOHN: That'd be okay?

STEVE: Sure.

JOHN: And I think probably our --

STEVE: Originally, see what -- I remember-- I'm glad that you brought that up because originally
I did suggest that I wouldn't mind help carrying him
out and then it was Gary that said, well, we'd like to
have you on the inside and then David said, well,
yeah, stay here then. So that's how that really did
begin. Okay, so.

JOHN: Okay, unless something happens where,
you know, maybe Judy needs medical attention --

STEVE: Right.

JOHN: -- and then you want to come out,
bring her out or something like that --

STEVE: That's true.

JOHN: That could be a contingency, so --

STEVE: Right.

JOHN: -- you know, who would you -- let's
just run over a minute for that. Let's just go over
the contingency that you decide, because of some
reason, to leave earlier, who would you recommend to
be on the phone on the inside to coordinate the
inside?
STEVE: Oh, man.

JOHN: Is there anybody who's, you know, pretty reliable?

STEVE: I would imagine it could be Wayne Martin, you know, the attorney.

JOHN: Wayne. Wayne, okay. So, in other words, when we do this, Wayne, in other words, Wayne would be on the phone inside --

STEVE: Well, let me think. I don't know -- he's -- I'm not so sure that he would even really want to do it. He would probably want to, as originally, he wanted to just walk out and be done with it.

JOHN: How about Scott or Steve?

STEVE: Well, me -- I'm the only Steve, so, let's see Scott --

JOHN: That's what I mean, Scott, rather.

STEVE: Yeah, Scott. That -- he would be able to handle that.

JOHN: Scott could handle that.

STEVE: Sure he could.

JOHN: Okay, so let's say then when you come out Scott would handle the phone.

STEVE: Uh-huh.

JOHN: How's that?
STEVE: That's fine.

JOHN: All right. Good. That's sounds like a good -- a better idea maybe.

STEVE: Okay.

JOHN: All right. How does that sound to you?

STEVE: That sounds all right. I have no problem with that.

JOHN: All right. And then we could have, let's see, a pool camera, maybe down the road.

STEVE: Sure.

JOHN: So, like if you're looking at it visually, you would come out your front door and you would move to the left on the road --

STEVE: Um-hum.

JOHN: Your left, down the road.

STEVE: Right.

JOHN: Okay, and then be picked up there or if you're with Judy, you would be picked up there and then move -- then they would move you down the road and some type -- then just beyond the perimeter there, you would be picked up, let's say, you and Judy, and Mayanah, and then further down the road, there would be a pool camera from whatever network is picked as a pool, probably CNN --
STEVE: Okay.

JOHN: And then you would be able to speak to the press at that point or something like that and then move further down the road. How does something like that sound to you?

STEVE: That sounds all right.

JOHN: Okay. You feel that that would work?

STEVE: I think so.

JOHN: Can you kind of visualize it without going to the window?

STEVE: Sure, sure, I can visualize it. Sure.

JOHN: Okay. Do you see -- I don't see anything wrong with it. Do you?

STEVE: No, not at all.

JOHN: All right. Have you had any contact with David today as far as how --

STEVE: Yeah, I went in there about three times, peeking, well, actually peeking my head around the door there, opening the door and looking in on him. And, it's kind of dark in there with the exception of a little bitty night light on, but he was kind of on his side, I think purposely, to try to drain the wound and he was -- he's not feeling real sick but he says he's -- he doesn't feel well. He's
not -- he didn't describe it well, but I could tell he just wanted to get some rest because he's fighting apparently -- oh, he has had a little pain -- I don't know if it's a little or a lot but he, you know, he's not a complainer.

    JOHN: Where? Where is the pain?
    STEVE: Apparently in that area where the wound is.
    JOHN: The entrance or exit wound?
    STEVE: That I don't know. He didn't make that clear to me.
    JOHN: Okay.
    STEVE: But I could tell that he had some pain and that's why I didn't want to press it and, you know, stand around conversing with him when he didn't feel too well.
    JOHN: Right. Have you talked to David at all about the plan that you and I spoke of since we first came up with the plan way back when?
    STEVE: The plan about exiting here?
    JOHN: About exiting, yeah, coming out.
    STEVE: Yeah, yeah. In fact, he is -- he reiterated to me that that was more than fine. He said I gave my word. We agreed to that. And he says, that's what we'll do. That what he told me and then I
said to him, well, when, and he says, well Steve -- he went like that -- you know, he says, as I told him, my God said to wait, he says, you know, you can go if you want. He says, I have no problems with that, he says, but I have a conscious conviction that I, I mean, I followed this voice all this way and the information I've shared with you has come from the same source. He says, I can do nothing but wait. So he said that to me and I says, I understand, I told him and I said, well that's what I'll be doing, I guess, the same thing. And you know, everybody got to hear about it, but, he says, as to the exiting of the premises, we'll still go on as we said. He said, I'm just waiting for that word. And, he says, that's what it comes down to, he told me.

    JOHN: Right. When was this?

    STEVE: I think it was 2 days ago.

    JOHN: About two days ago.

    STEVE: Yeah.

    JOHN: Okay, so -- as -- I have the photo here and as I can see, there is kind of a fence in front of the residence and there's some cars parked in front of the residence. There's got to be one point where the front door is, right?

    STEVE: Exactly. It's white -- two white
doors.

JOHN: Okay.

STEVE: Toward the right of the building.

JOHN: Okay, so that would be the exit point.

STEVE: Exactly.

JOHN: Okay, so you would come out there then, okay, then pass the fence and get kind of to the middle of the road.

STEVE: Right.

JOHN: Okay, then make a left in the middle in the road --

STEVE: And just walk and follow it right around.

JOHN: And pretty much stay in the middle of the road, between the two grassy sections. Okay, come down to the end of the road.

STEVE: In fact, it depends upon the weather, you know, like when I walked out there to get the stretcher that day with Greg, that was me, it was very muddy. It was wet and muddy so we kind of got off to the side a little bit there. I'm talking about real muddy and hopefully if it's dry or it's been windy and sunny, it should be dried out and should be okay but it depends upon the weather, I guess.
JOHN: What would be better then, to walk in the middle -- on the hard surface --

STEVE: Probably off to the side a little bit.

JOHN: Off to the side of the road.

STEVE: I mean, it would be okay to go right down the middle if it hasn't been raining. Any time it rains at all around here, it turns into clay and mud right off.

JOHN: Okay, so then, probably toward the side would be a little bit --

STEVE: Yeah.

JOHN: -- better footing. Okay. All right, then come down to the end and then just pause there momentarily at the end of the road and then make a left turn. Does that seem -- that seems pretty accurate then.

STEVE: Sure.

JOHN: All right, I think we've got kind of a visualization of when you come out what it's going to look like. So -- one second.

STEVE: Sure.

JOHN: Okay, somebody just mentioned to me, and they're being thoughtful, which I, you know, I apologize for not thinking about it myself, is that
when David is brought out on the stretcher, would they -- where would they put him? Obviously gently. At the intersection? Carry him all the way down to the intersection?

STEVE: That sounds about right, yeah. At the intersection.

JOHN: Okay, so they would -- so four able-bodied guys would bring him down the road to the intersection where they would gently put him down on the stretcher in the road and then we could have the ambulance be --

STEVE: Exactly, that's what they've told us, an ambulance there ready to take him, right.

JOHN: All right. Now, who are we going to have with David besides the four strong able-bodied men?

STEVE: What -- I'm not -- I don't really remember --

JOHN: How about some children?

STEVE: Yeah, he did mention the children, I do remember that being part of it. That -- in fact all the children would then leave right then with him.

JOHN: All right, so we'd have all the children with David, then.

STEVE: Right, and I think we mentioned
about them being picked up in another vehicle or
something --

JOHN: Yes, we can put them in a separate
vehicle, maybe a couple of the children could go with
David in the hospital-type carrier.

STEVE: Right.

JOHN: Okay, and any of the children who
need to be carried, let's have the women carry those
tiny little infants.

STEVE: Okay, I think we came down to two
women that would carry the infants.

JOHN: Two women. Right. And the pregnant
women also, of course, obviously, are going to be
there.

STEVE: Yeah.

JOHN: How soon are the pregnant woman
expecting?

STEVE: I think one is expecting in a month
or two, from what I understand.

JOHN: That's the closest one.

STEVE: Yeah.

JOHN: Okay. So then, she wouldn't have any
problem walking out.

STEVE: No, she wouldn't. No.

JOHN: She doesn't need a stretcher. Okay.
And everybody else is ambulatory. Scott?

STEVE: Scott is, at first he was having a hard time but now he is able to walk. So he should be able to -- the bullet is still in the thigh or the leg.

JOHN: We'll then we'll have -- I'm glad you mentioned that. We'll have to make arrangements that obviously he get medical attention right away.

STEVE: Right.

JOHN: And then maybe he could be put his arms around another couple of able-bodied guys to kind of help him.

STEVE: That would help.

JOHN: That would -- why don't we plan on doing that then?

STEVE: Okay.

JOHN: All right, so we've got that -- let's get that squared away. That's a good way we can have him -- I don't -- the poor guy, I don't want him falling down on the way out or something.

STEVE: Yeah.

JOHN: Can you think of anything else that we've missed?

STEVE: Not really. Let's see. I guess that's about it. Everybody else seems able-bodied
enough to walk out and I guess they'd be okay.

JOHN: You know, I can see this as working very, very well. This will go very well and very smoothly and then the absolute best part is that nobody is going to get hurt in a situation like this.

STEVE: But see this way -- I actually would have thought that this would have been over way back that Tuesday. I really did and it did come as a surprise to me that --

JOHN: Me too. Me too.

STEVE: It really did.

JOHN: You know, I'll tell you, another good thing is that, you know, just visualizing this, I can see that pool camera and I think that this is also going to work very well as far as being the proper way to do things, not only safely, but, you know, it's going to look good in the press, CNN, the pool camera, and I think the whole thing is just going to be smooth without anybody falling or getting hurt anymore, you know, and that's the bottom part of this. No injuries. No hurt. So, I'm trying -- you know, did you ever say, like I'm thinking I'm missing anything and you can't put your finger on what it is.

STEVE: Yeah. We'll be communicating so if I come up with anything, you do, you know, we can
bring that up and look at it.

JOHN: Yeah, all right. And now, you going
to go ahead and make the video?

STEVE: Right.

JOHN: Okay. And how many people do you
think --

STEVE: I don't know. So far, it seems like
there's even a few that were on yesterday. They
wanted -- they said, and just because they forgot to
say a lot of things -- a lot of them wanted to
actually say thanks to some of the guys in your
department --

JOHN: Well that would be nice.

STEVE: Yeah, that actually have tried and
shown some sincerity and they wanted to thank, you
know, anybody for the attempt to try to do the best
thing and they mentioned -- asked me just a moment ago
if they could get back on. I said, sure, I don't
care. I'm going to use 150 minute tape this time.

JOHN: Oh, okay. Great.

STEVE: So whatever they want to do, I said
go ahead. You know, he, David just told me to tell
anybody can say anything they want. It doesn't matter
what it is, pro, con about us, about them, about
anything. He says, you know, feel free. He says, you
JOHN: Excellent.

STEVE: So, I was just going to get ready and start working with all these people.

JOHN: I really liked your idea about making a tape for the negotiators. That's probably a really good idea.

STEVE: Yeah.

JOHN: Something to do. You'd probably enjoy taking a look at the tape, seeing what's attached to these voices.

STEVE: Sure. Exactly. I wouldn't mind seeing what you -- of course, you've got a picture of me but you always wonder what the guy looks like on the other side of the phone. I've never, in my life, I've never been close and I have met someone over the phone or have gotten to know someone then the day you finally meet them, I've never been close. What I have visualized or pictured in my mind is so far away from what it actually is.

JOHN: Yeah, that's usually the way. That's usually the way. By the way, you know, discussing when you come out, what things are going to look like, how do you think everybody else will feel about this plan? Do you think it'll be okay?
STEVE: Well, so far, yeah, just as it was a week ago. You know, they were just going to -- everybody was more or less -- they put on some clothes, I mean the kind of clothes that, you know, after a while when you're in here so long, and everything, they decided to put on some halfway decent clothes and get ready to just come out and what -- you know, whatever happens. And they felt that it had been worked out to that point in time where everything was okay.

JOHN: Good.

STEVE: And from talking to Jim and people since, like I said, everything -- it hasn't really changed to a degree other than the press part, you know, that being cut off and stifled along with the movements around the perimeter is the only thing that has got different ones concerned. Other than that, he made -- he said what he said and they realize that. They really do. They all realize that. And, I think many of them hope -- well, they do, that it will be resolved soon because the truth of the matter is, you know, those that are here even, with the waiting, it gets to them. It really does.

JOHN: Oh, I'm sure. I'm sure of that.

There's no question about that.
STEVE: So really it's a test for them.

David knows it's a test for them too, just, I mean he's really not talking to anybody. He's not really communicating with anybody.

JOHN: He's not, huh?

STEVE: No, not at all.

JOHN: Not at all.

STEVE: Just me, once in a while, I check and see how he is. In fact, he does more talking with you people, like he has in the evenings. I mean, it amazes me. I'll walk away, come back hours later and he's still on the phone.

JOHN: You know, more and more, I think you and I are moving in the right direction. I really feel more positive now than I ever have. How are you feeling?

STEVE: Well, the same. You know, I mean, but I -- right from -- I have not wanted to say a lot about it but I have thought right from the beginning that this could be resolved but of course when that question came up about when and this waiting thing -- it's hard for me to express to persons like yourself, you know, you don't want to be giving excuses. You want to make up some kind of a story or a scenario so, it's difficult, you know, it's --
JOHN: You know, maybe it's a good thing that David's having a quiet day. Sometimes, you know, you can reach a decision, a major decision when you have some quiet time and maybe that's what's happening.

STEVE: That's probably true.

JOHN: Let's hope so. Let's hope so.

STEVE: He did -- he always -- I mean, it may be hard for you people to believe but he honestly says to me, he likes you individuals, he definitely likes this Harwell and this Thorne. I don't know who they are, but he mentioned those by name. But, he has no problems with you people at all.

JOHN: Well, good, let's keep up this good line of communication we have and --

STEVE: And of course, he's got this deep conviction, his deep belief that books like Habakkuk and Nahum will be fulfilled and he doesn't want to see individuals like yourself involved where you've had opportunity to hear information, to evaluate it, to give it a verdict, but to disregard. I mean -- you know, he always brings up the story of Noah and that generation, everybody disregarded. They all had to learn how to swim. And it seems like this generation, this nation is ripe for judgement also. We've all got
our theories and opinions. We're all so -- everyone of us, you and me both, we're all proud of what, I don't know because we're subject to death. But we are, we're proud. Very innately selfish and these are the warnings that come in the final days. Ultimately the 6,000 years has -- it does come to an end. But, you know, this is what he'll bring out to me in relation to you guys, that he has this deep concern about individuals.

JOHN: Yeah, that's true.

STEVE: Even though you're part of a system and, like I am, the Bible calls it a beast because all of us are people but yet we're animals. We eat like they do, we sleep, we drink, we have sex, we die like an animal. The difference between man and an animal, even though God calls all these nations like ours beasts, the difference is we can catch a higher vision of something better. And you know, move it around our minds and weigh it out.

JOHN: Well, you're going to make sure those nurses check on David to make sure he's okay.

STEVE: Yeah. Every -- periodically, I'll do that every few hours. I'll take a look.

JOHN: That would be a good idea. And also, you know, don't let some of the things going on around
out there, so called activities out there, you know, give you the wrong idea.

STEVE: Well, see, on the whole, they don't bother me. It's when these people come to me very excitedly, hey there's 17 guys in the dark running around there. There's is this -- they roll -- they just ran over and buried a motor cycle. You know, these are taunting, provoking things and being that you told me the FBI is in charge, well it shocks me because I've always pictured these men very intelligent, wearing suits, coming across well to the public. Some of the better class --

JOHN: Well look --

STEVE: -- of America, American society, with a good background and chosen well and so forth. So when you hear things like that --

JOHN: We like to think that it's still true. Believe me.

STEVE: Well, that's what I mean. And when I know that they're involved in these tanks and running over, you know, vehicles and things like that, I mean, you can't help but be concerned.

JOHN: I know what you're saying. But by the same token, you know, they don't know you like we know you. You know what I mean.
STEVE: Right.

JOHN: So, they don't have the same relationship with them and that's really what counts. So let's hang in there. Why don't you give me a call when you have the video made.

STEVE: Okay, that might be a little while.

JOHN: Yeah, sure. I can appreciate that.

STEVE: Okay.

JOHN: Good. Talk to you later, Steve.

STEVE: Okay. I'll talk to you later then.

Okay. Bye.

JOHN: Take care.

* * * * *

NICOLE: Hello.

JOHN: Hi, this is John. Who's this?

NICOLE: This is Nicole.

JOHN: Hi, Nicole. How are you?

NICOLE: Okay.

JOHN: Okay, good. Is Steve or David around?

NICOLE: Can you hold the line for a minute?

JOHN: Surely.

NICOLE: We're going to get Steve right now.

JOHN: Thank you.

(pause)
STEVE: Hello.

JOHN: Steve.

STEVE: Yeah.

JOHN: How you doing?

STEVE: I'm trying to get some interviews but it's going so slow today.

JOHN: How many did you get done?

STEVE: Just hardly none.

JOHN: Hardly none.

STEVE: No one -- everybody keeps running around saying they'll be back in a minute and I'm sitting there waiting. I get talking to someone and I says, well now, where are they all at? And, oh, it's -- I'm annoyed.

JOHN: You got to get them squared away. How is David feeling?

STEVE: Just a minute. Let me -- right now I am a little ways away.

STEVE to someone in background: Has anybody peeked in on David? He is.

STEVE TO JOHN: Yeah, they looked in on him. I guess he's sound asleep right now.

JOHN: So he --

STEVE: Let me ask here because there's someone here that's been with him a little more.
JOHN: Yeah, ask --

STEVE to someone in background: How has he been? Is he sick or --

STEVE TO JOHN: She says he's real weak and sore, I guess.

JOHN: Who is that there?

STEVE: David.

JOHN: I know, but who is the -- was it Julianne?

STEVE: Yeah, she looked in on him and she said that he's real weak and sore.

JOHN: Oh, geez.

STEVE: Yeah.

JOHN: Is she near the phone?

STEVE: Pardon?

JOHN: Is she near the phone? Julianne near the phone?

STEVE: Julianne near the phone?

JOHN: Yeah.

STEVE: Not -- she just walked -- in fact she was just here. She just walked around the corner.

JOHN: Okay. All right. What kind of nurse was she?

STEVE: Let me ask someone here if they know.

STEVE TO JOHN: They're going to ask her. I don't know but --

JOHN: I was wondering whether she was a trauma nurse or --

STEVE: Yeah, I wonder. I don't -- from what I notice and observed, I don't think they have much experience with accidents and that type of thing. Emergency type things.

JOHN: Emergency room or traumatic injuries.

STEVE: Right. Right.

JOHN: Like we said before, there's a big difference in nursing and doctors, you know.

STEVE: Exactly. Exactly.

JOHN: Have you had a chance to talk to David at all today?

STEVE: Not at all.

JOHN: Not a word, huh?

STEVE: Remember when I talked to you last, I had looked in the door a couple of times and I just said a few things to him and he was on his side with his back to me looking at -- facing the wall, eyes
were closed and he just mumbled a couple of things to me and he said he wasn't feeling well and so I says, if you need me just holler or call or let someone know and I'll come over there.

    JOHN:  Yeah.  Like I said before, sometimes older men just go down hill a little -- very slowly, but --

    STEVE:  Younger.

    JOHN:  Younger men just go real quickly.  I mean they just seem to lose their strength.  One day they'll have their strength and the next day --

    STEVE:  You know, it's really strange because he'll make an effort to kind of like sit up or so.  He hasn't done anything like that today.  He hasn't talked to anybody, he's been real quiet.  So I told them to continue to keep an eye on him and let me know what's going on.

    JOHN:  Well, like I said before, I sure hope it isn't blood poisoning or anything like that.

    STEVE:  Yeah, right.

    JOHN:  I just don't want to see a bad sign there, you know, but this loss of energy like that could be a bad sign.  Well, we'll hope for the best.

    STEVE:  Okay.

    JOHN:  So, I didn't want to leave without
saying goodnight and --

STEVE: Oh, you're taking off then.

JOHN: Well, not right away. We generally are here until about 6 o'clock. But the night shift will be here and you can set up a delivery of the tape with those gentlemen.

STEVE: Okay. It's going so slow right now. A lot of these people, you know, they're saying well, what should I say, what should I do. I says, well, that's up to you. You know, whatever you want. And someone was saying, some of these guys, well, I don't like really sitting in front of a camera; I don't know what to say, other than we're waiting to get out of here. You know, that's what a lot of them have said. I mean, I can say I want to get out but I'm waiting for that word and then we're out of here.

JOHN: Right. Did you get a chance to view the tape that was sent in today with the children?

STEVE: Yeah. I played it for a number of the different ones that would have children there and I called them and I says, do you want to come see? There's a tape that's been sent. So they came and viewed it and. See, it was -- I mean, you guys mean well but you don't understand that on the whole they rarely get sugar. I mean, what they get is fruit or
dried fruit or like pineapple pieces. Once in a while they are given cookies and things but on the whole, you know, they're not fed a lot of -- it's a treat that they get once in a while.

    JOHN: Yeah. I thought, I thought of that when I was viewing it this morning.

    STEVE: But they realize, you know, I mean, we all come from out of the world and we've looked closely into dietary programs and plans and --

    JOHN: Right. All ice cream is largely milk, so --

    STEVE: The women, of course, as of yesterday, like I mentioned, they were not happy about the -- it seemed like there was a lack of discipline and they were acting like wild uncontrollable kids and --

    JOHN: Um-hum.

    STEVE: It's not that they don't have fun here. We've got big sand boxes. They're outside a lot of times playing and so forth but it's usually supervised and there is always something constructive about everything. Something to be learned.

    JOHN: Yeah. Well, you know, you can certainly call the night shift when the tape is ready and then do a little now, do a little later. However,
you want to do that. But I wanted to say one thing
and that is, I really appreciate how much personal
progress I think we've made today.

STEVE: Okay. Same here.

JOHN: And I would like to do the same
tomorrow.

STEVE: All right.

JOHN: And I really feel good about our
relationship today. I hope you do.

STEVE: Yeah, I do. I really do.

JOHN: Good. Good.

STEVE: You know, I've got the anxiousness
also of something, of things being resolved. I have
the time element, of course. You know, I'm the type
that likes to get -- if you look at my past,
something's happening. Even with friends. If ever
I've had a falling out with a friend, I always, within
minutes go right back and like to get things resolved.

JOHN: Yeah, rather than one of these not-
talking-for-10-year-type relationships.

STEVE: Exactly. I'm the opposite of that.
So you know, with something like this, I mean, I'd
like to see it taken care of so, I mean. A lot of us
are anxious. So, you know, we're waiting and that
aspect is hard.
JOHN: Very hard.

STEVE: You know, no one really has a great joy in that but, by the way, so --

JOHN: Well, I'll be honest with you, it's not that easy on this side either.

STEVE: Oh, I'm sure. I'm sure.

JOHN: Well, I look forward to talking with you tomorrow.

STEVE: Okay.

JOHN: Have a good evening and you can just give them a buzz when you have the tape ready and we'll --

STEVE: Okay. Well, thanks much, John.

JOHN: Take care.

STEVE: I'll talk to you tomorrow.

JOHN: Good night.

STEVE: Bye-bye.

(End Tape 106)