

Fearmongering, the “beloved” money and being free from both – Interview with Dr. Annie Bukacek

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Listen to which institutions and persons benefited from "hush money" from the Cares Act 2020, which obviously helps to keep the corona pandemic going.**

Dr. Annie Bukacek is a physician with her own practice in Kalispell, Montana, USA. She is a member of both the Flathead County Board of Health and the Legislative Committee of the Montana Medical Association.
As early as July 2020, Dr. Bukacek gave an interview to Kla.TV entitled &quot;How the number of “Corona deaths” are being skewed&quot;[www.kla.tv/16897] [German version: www.kla.tv/16977]. At that time, the sympathetic doctor spoke about the inaccuracies in the handling of death certificates and how patients were declared Covid-19 patients and deceased were declared corona deaths.
Dr. Bukacek, like many other critical doctors, is being massively defamed by the media. Nevertheless, she undauntedly exposes injustice, half-truths and lies of politics and the media and is also publicly committed to education, truth and justice.
In the following interview with Kla.TV, from October of this year, Dr. Bukacek expertly explains the fundamental importance of medical testing procedures using the example of the &quot;nuclear heart test&quot; and its practical application in everyday medical practice.
Listen to which institutions and persons benefited from &quot;hush money&quot; from the Cares Act 2020, which obviously helps to keep the corona pandemic going.
Let yourself be infected by Dr. Bukacek's courage to be independent and how, according to her experience, a united commitment to truth can bear fruit. Here a noteworthy statement from her: &quot;Freedom comes from hard work and sacrifice.”

Dan: Dr. Bukacek, it’s great to be back in Kalispell. Thank you for agreeing to the second interview.

Bukacek: Welcome back. I really enjoy talking to you. I appreciate it.

Dan: By this time, would you say that don’t we have enough evidence, and I mean, solid medical evidence coming from doctors, researchers, research institutions, hospitals and universities, where we can finally say: Our reaction to this Covid has been overblown, and it is time to get back to normal?
Bukacek: The evidence shows that the lockdown has been dangerous and hazardous to public health, especially to the elderly. So, what’s really the big issue in my mind is the lack of evidence to support the lockdown; there really is a lack of evidence. And I think that it is first and foremost, and I’d like to focus on what I think is first and foremost, is that there is no evidence that there is even a novel separate virus. There is no evidence for that. Dr. Andrew Kaufman, he has talked about that since the end of March, beginning of April, that there has not been a virus isolated, a separate virus, and the CDC admits it. So, if we haven’t even isolated the virus, we don’t know the genetic code, that means, we don’t know how to identify it as a separate virus. So, what are we even testing for? And what are we making a vaccine to? So, there is lack of evidence that it exists. The other thing that is a piece of evidence that is lacking is the transmissibility of it. I think it has very low transmissibility. There have been multiple large events in Montana, especially here in the Flathead, with no people getting sick from it. And I think the best example nationally is that Sturgis bike rally. There were 450,000 people there. And there was no spike. And these are typically older people. People my age and older are the bikers that go there. These are not young, healthy kids. And there was no spike. So, the transmissibility is really low. The other thing that is a lack of evidence that this is a different virus is if you would look at viruses throughout history, there has never been a virus identified to my knowledge that doesn’t preferentially adversely affect children. And this, whatever it is, does not affect children. So, these are very strong lines of evidence or lack of evidence that there is even a novel separate virus. That’s a really big deal, lack of evidence for that.
Dan: Right. In some of your writings, you discussed the issue that, when tests are given, a positive test is always considered “a case”.
Dr. Bukacek: Correct.
Dan: Explain that.
Dr. Bukacek: I had that confirmed with the health department here quite a few months back. I pinned them down and got an email because I wanted to have it in writing. That when they talk about “a case”, they are talking about a positive test. Most of the people with positive test are either asymptomatic or have minimal symptoms. But they call them “cases”. And then they also, when they talk about an active case, you know, in peoples’ minds, that makes them think that the person is sick, and that is not true. An active case just means the person tested positive and they are being quarantined or the health department has asked them to quarantine. So, again, it’s mostly asymptomatic or mildly symptomatic people, the active cases. It just means they tested positive. Nothing more than that. And then in the history of, again, infectious disease, up until this corona virus, this so-called novel corona virus, up until that time, we never called cases, we never called it a positive test, it would be a case, it would be a case of tuberculosis where the person is sick. Or a bad case of rheumatoid arthritis where the person was crippled up. It wouldn’t be, we wouldn’t say they tested positive and that makes them a case. We have symptoms that we look at, and then we do testing to confirm what the symptoms appear to be that the person has. We have never gone after finding asymptomatic people to diagnose them with rheumatoid arthritis or tuberculosis. So, there has never been a time in history up until this time that we have called a positive test a case. Never been a time where we searched for cases by doing all this testing. Never before. That’s new.
Dan: Right. You would expect that symptoms would have to precede the test itself, right?
Dr. Bukacek.: Yes, that would be usually customary up until this year that‘s correct, so that the chase after finding it, finding a case by doing a bunch of testing, that‘s unprecedented in history, at least in this country.

Dan: Right! Some people might say, that Montana has been a little losery in their lockdowns, in their recommendations and people are wearing masks a little less than … let‘s say, New York, Seattle, Los Angeles and the newspapers are reporting that this is now a hotspot, there has been a spike in cases. Is this because there is such a lax attitude about Covid here in Montana?
Dr. Bukacek: Well we‘ve had a pretty lax attitude since March, so we’ve had more lax attitude all along and it speaks specifically about the Flathead more than I can across the state, but there are a lot of other areas in the state. And yes, and now all of the sudden they’re calling Montana a hotspot. And so in the Flathead is one of the hottest spots in Montana supposedly. But what’s happened you know April 30th is when our Governor increased the number of tests were done. That started in April 30th and all of a sudden the tests started to rise as well, what a surprise right!?
Yeah, you’re testing more, you gonna have more positive tests. And then in the last couple of weeks or maybe a month, they’ve increased the number of tests so that we’re doing 5,000 or more tests per day in Montana and in the Flathead we’re doing about 500 per day. You know, any seasoned medical practitioner knows if you test that many people you gonna come up with positives for any medical test. So, it is just in my opinion they talk about an exponential rise in cases. Well we know what that means: It’s an exponential rise in positive tests, what’s really the exponential rise or what correlates is the number of tests that are being done. You know a sixfold increase in the number of tests from middle of June to the middle of October, you gonna have more positive tests. Yeah I think it’s important to understand that when Montana went from checking you know 1,200 a day to now checking over 5,000 a day and the Flathead health department going from 120 to 500 a day but they're not testing more because there are more people sick, they’re testing more because of contact tracing. The health department is working feverishly to contact trace people, so that’s the reason for the increased number of tests which is leading to the increased number of positives just by the nature of medical tests. So, I think that’s important, that there is emphasis.

Dan: Right and when you say positives we’re not talking about actual positives, we’re talking about false positives which happen in any sort of test.

Dr. Bukacek: That’s correct!

Dan: Can you name another kind of test were we always expect there will be false positives?

Dr. Bukacek: Right, cause in the case of the PCR-Test for Covid we can’t say false positives or false negatives cause we haven’t even identified the virus. So those kinds of numbers, those kinds of terms don’t qualify for the PCR-Tests, but it is pertinent what you are asking about other tests. You know there is a nuclear cardiac test that we use fairly commonly and it has a 20 percent false positive rate which means, if you did 5,000 of these nuclear cardiac tests a day, you’d get a thousand tests that suggested the person had a heart problem, when in fact they didn’t. And there is some tests like the test for lupus, the anti-nuclear-antibody-test for lupus, it has such a high false positive rate, that we don’t even use that test unless we already have a high clinical suspicion that the person has that. If we were to check an ANA, the anti-nuclear-antibody, test on 5,000 people a day we probably get 3,000 or more false positive tests that would say ‘positive ANA’ but that person does not have lupus. So medical tests have a broad range of false positives and some of them very high. So, it would mean nothing, you know if we got a 1,000 positive-nuclear they would be false positives. 3,000 for lupus, it doesn’t mean 3,000 people that day had lupus, it just means that test is positive. So, seasoned medical people know that. And I don’t expect lay people to understand that, but medical doctors know this.

Dan: So, the doctors are not going to go out and give lupus tests without any symptoms being shown first?

Dr. Bukacek: That’s correct!

Dan: Then why do they do it for Corona, why aren’t more doctors like you speaking out about this?

Dr. Bukacek: Well fortunately, more doctors are speaking out and they all get you know persecuted to some degree or another if they speak out against the current popular, what I would call a false narrative.
So, a lot of doctors are speaking out. And there was a letter sent to President Trump back in May from a group of doctors and over 500 doctors signed on. It was letting him know the crisis of the lockdown, how much public health damage, individual damage has been done by the lockdown. That was in May. And then the American Association of Physicians and Surgeons, they came up with an excellent paper on masks. It was called ‘Masked Facts’. It was in the summer sometime. And the subtitle was, … let me think about this, … it was ‘Evidence not Fear’ was the subtitle. It was excellent and it was all very well referenced. And that was from a group of doctors. And then there was an international group of doctors that have recently come out, that’s been having hearings in Berlin. And a part of what they have been doing is trying to educate the public, and a part of what they’ve been doing is trying to protect doctors that have been prosecuted and persecuted and some have lost their jobs for speaking the truth. So, more doctors are coming out. I don’t expect it ever to be a majority because most doctors work for hospitals or large doctor groups and they’re going to toe the line or whatever their bosses tell them to do. There aren’t as many independent physicians any more. We talked about that last time.
Dan: Right, right.
Dr. Bukacek: So, it’s not likely to be a majority, but it’s coming out more and more.
Dan: Right. Speaking of our last interview, one of the things that hit me, that we discussed, was the fact that hospitals were being paid to diagnose Covid so that’s one incentive to keep this thing going
Dr. Bukacek: Correct, correct.
So one of the questions that I wanted to come to you with you today, was … with lack of evidence that this virus may even exist, the CDC admitting that the tests are flawed and more and more doctors are speaking the truth. Why is the false narrative still pressing on, and I think about the financial angle of all of this (-right). And then I noticed that recently that you wrote an open letter to your local board of health. And in it you said: If I had known about the financial incentives for diagnosing Covid-19 at that time, I would have included that in my talk. And I assume that you would also have included that in our first interview. So, what else is there in terms of incentives that we didn’t cover the first time?
Dr. Bukacek: So, we talked about the extra money that is paid for patients that are admitted, the Medi-Care dollars that are given to the hospitals and the doctors for admitting someone with Covid-19. And if they get well later, so it’s like 13,000 for the diagnosis if they’re admitted, 39,000 if they’re put on a ventilator. There is also with Cares Act 2020, whatever the payment is for that hospitalization, they get 20% more than that if they can attach Covid to it. So that’s a part of it. And you think of it, 40% of the people in Montana have been tested for Covid at this point. Over 400 million. And if they’re making a 100 dollars per test, there’s millions of dollars to be made, just to do the testing.
That’s another level. But there’s also a lot of money being made by local hospitals and doctors and clergy and nursing-home administrators and teachers, you know, the public-school system. And that’s one thing I think most people don’t realize and the biggest portion of these payments – and we’re talking billions of dollars nationwide – comes from Cares Act 2020. So, we knew early on, that people were being incentivized to not work, you know they were getting individual people, right everyday people were getting 600 dollars, 1200 dollars, 2500, we knew about that. But the bulk of the Cares Act 2020 money is not going to everyday people. A sizeable portion is actually going to banks and on a local level. There’s a lot going to hospitals, doctors, clergy, churches, nursing administration.
Dan: Clergy?
Clergy, correct, yes. Just like the PPP, the ‘Paycheck Protection Plan’, 7.9 billion dollars were given to churches, to clergy and churches. 7.9 billion went out. And that’s just for PPP. So there’s other payments that they got. So it’s probably upwards of 12- 13-14 billion dollars given to clergy. So when people see that their churches are still closed down, some of them are still closed down. Or you see some that opened up and others closing down again. There’s a very good chance they’re getting paid to do that, they’re getting money, they’re getting the government dollars. So, that’s clergy. And people need to go to their pastors and go to their accountants if their churches are still closed down after all this time. And they need to ask: how much money are you making to do this to us, to abandon your parishioners, in my opinion.
Dan: And how long do you expect us to continue dive in?
Dr. Bukacek: Yes, Yes, exactly. Yea, so that’s what people need to do, on that level. And then hospitals and doctors! 175 billion dollars was given through Cares Act 2020. So that is in addition to the other little perks for doctors you know, 175 billion dollars given to hospitals and doctors. You know, so the doctors on the front line, the self-sacrificing heroic doctors that are in empty, hardworking, in empty hospitals. The hospitals where empty for three months but they were collecting money from the government. 175 billion dollars.
Dan: And we can assume that this money is maybe not dealt out as much as freely to any doctors that follows the Covid protocols.
Dr. Bukacek: Yea, and it goes to the administration largely. A lot of it goes to the administrators. It is not trickling down. I doubt that. I doubt that it is trickling down. There were some articles about that, where you could see that it was the administrators that were getting it, the boards and that kind of thing. So, that’s the hospitals! 175 billion to hospitals and doctors. And then it is nursing homes, that´s one thing that we talked about briefly last time, is that the torment of the older people that are in nursing homes, that are going without seeing their family members for months after months. And I thought at one point that they were well intentioned and misguided. But then I find out that 4.9 billion dollars was given to nursing homes. So, when they are isolating grandpa and grandma from their kids and grandkids and great grandkids they are actually, they are actually getting financial incentive to do that. They are being paid to do that. And then the public schools, is probably upwards, maybe close to 20 billion went to public schools from the Cares Act. And then there’s also money that went to the governors, like our governor in Montana got 1.25 billion dollars and he has dealt out 400 million of it and 90 million went to public schools. So there is a lot of money out there to be made to shut down the schools, shut down, you know, keep the parishioners away from each other, keep the nursing home residence from their people. There is lot, there is financial incentive for that. And most people don’t know that. But all you have to do is to type in ‘Cares Act 2020 reimbursement to Churches’ and it pops up. ‘Cares Act 2020 reimbursement to nursing homes’ and it pops right up. There was a nursing home in Al Paso that got 20 million dollars. So, there are nursing homes that are making lot of money to torment and torture these elderly people.
Dan: It’s the governor’s prerogative to decide how this money is spent?
Dr. Bukacek: That’s correct. It’s at his discretion. There is a lot of money, there is millions of dollars going to city council meetings. It perplexes me, until I found out - I started following the money - it perplexes me why are city council and our major and health department, the fair boards that we went to their meetings, why they were not interested in the good news, that we really don’t have a problem in Montana. That we really don’t have a problem in the Flathead. They were not interested. I would present my data, it was based on CDC data. And they would kind of glace over and just smile and nod, it was perplexing to me. And then once I found out the financial incentives for, then it all made sense because there were about, the papers, there were about fifty of us who went to a city council meeting a while back. And they shut down the meeting because we were not masked, they felt that they were in danger. But ever since that meeting, they haven’t been letting the public in. They have been sitting there 9 or 10 of them in a room with their masks on, six feet apart and the public isn’t allowed in. And it is because they are getting paid to do that kind of thing. The school board, they are making money of keeping the public out and continuing the fear mongering. There is a lot of money being made. The Cares Act was 2.2 trillion. It was trillions of dollars, and it’s been given out, and having the effect of basically promoting the fearmongering. It is a lot of money.
Dan: Would you say that I was mischaracterizing it, if all that money, all this big money is just wholesale bribery to keep the fear mongering going, keep the whole thing moving?
Dr. Bukacek.: I think that is a legitimate explanation. And hush money. I have heard people use that term. It is hush money, you know for the doctors. I think that’s it! Fairly legitimate way to characterize it.
Dan: OK. Well with all this bribery going on, with the fear mongering continuing, we could say it is a huge uphill battle here.
Dr. Bukacek: It is.
Dan: I think our viewers will be familiar with a lot of the medical angle of Covid and now they know about the money angle, so they are going to be looking for some good news and some stories of hope. And I was looking in the local paper and noticed this story was in all of the local papers. I checked three of them and you had something to do with this. It says: ‘Flathead health board: board backs away from tighter restrictions.’ I mean this sounds like just the opposite of what’s going on in so many places.
Dr. Bukacek: Correct. Including the rest of Montana, Missoulian is just 120 miles away. They have cut down, at the same time as this was going on they actually, their health officer was able to shut down businesses further. That is what they were trying, what the health department was trying to do here, what they brought before the board, was that they wanted… There was a one agenda item where they wanted to cut restaurants, bars and churches down to 25 people regardless of the space, regardless of the ability to keep, you know 6 feet apart. They were going to, they were proposing that, and that particular item didn’t even come, I am on the health board and that particular item was removed from the agenda. So, we never even had to deal with it. So that was a victory that I didn’t know about until the day of the meeting, but that was moved from the agenda. I am not sure why that happened, but it meant, there must have been lot of strong public opposition to both of these measures.
Dan: Right
Dr. Bukacek.: So, I think that is probably why the public spoke and they got rid of that. The second one was very long and had a lot of ‘whereas’ and was talking about how scary everything is, the sky is falling, all the ‘whereas’s’, were all about the high risk we are in Flathead and then down at the bottom they were talking about limiting the sizes of groups and how, you know how groups of 50 or more or we are going to come to the health department with a plan, you know, and that kind of thing. And that’s the one that was still open to a discussion, it was still on the agenda and there were 8 voting members then there is a health officer, which would be a tiebreaker if the board would be 4 to 4 and the health officer would have to come out in favor of the restrictions which was more than likely because that was her thing. And we ended voting 5 to 3 to table it. There were too many problems with it. The problems with it came out before the meeting when the public got involved and sent them a lot of letters, the problems came up during the meeting. The public would talk about it, the County Attorney talked about it, and other people talked about it. You know I shared the data about, you know that the reason why we have these spikes is because we were testing 5,000 people a day, you know, and I clarified some of those kind of things. And then at the end it was clear that the board did not have the public support that we haven’t enforced the governor directive so far in Flathead and it is not likely that we were going to continue to do that. So, that became clear and so that is why the board members voted to table it.
Dan: Wait, so it is not likely that you are going to continue to not enforce, or enforce?
Dr. Bukacek.: It is not likely that they enforce it. To make it clear! Our sheriff and police department haven’t been enforcing the governor’s directive anyway …
Dan: Right.
Dr. Bukacek.: … so, it is unlikely that they are going to start all of the sudden when the data does not even support that we are in any trouble. So that’s what I meant to say, so but I think it became clear and the county attorney made it very clear that we would have to proof by science and data and imminent threat he said. And our response would have to be proportional to that threat. Then he said that he would be up to the attorney, their officer’s discretion, whether they would prosecute or not. So, it is not just going to happen here. So, it is a huge victory. Because what they were trying to promote was more restrictions in the valley. And we stopped that. So, it is huge!
Dan: When you talk about the public had a chance to speak in front of the board. Was there anybody from the restaurant and the bar industry because I read the article and one of the proposal was to limit restaurants to only 25% seating and anybody who’s run a restaurant, you don’t even have to run a restaurant to know that most restaurants need to be full on Fridays, and weekends in order to pay for the off days. (absolutely) And if they can’t be full then they are just going to go out of business. So did the board know that they were recommending restrictions or they were on the cost of issuing restrictions that would put people out of business.
Dr. Bukacek: Yea, they knew that, so that there are …They are saying that the threat is so high here that the better part of the valor is to shut everything down. And there is no data; there is truly no real data to support it. One of the big disappointments during the meeting was that a lobbyist from some restaurant association came out in favor of the restriction. So, my guess is, I mean, I, think there is a good change that she’s on the take, o.k. Because our local restaurants here do not support that kind of nonsense. But the Chamber of Commerce came out on the right side.
Dan: He did?
Dr. Bukacek: The spokesperson, yeah, they came out on the right side. And the important thing here was the public involvement. One of the... You know I post lot of things about liberty in Flathead and there is a guy how takes the photos and he posts the photos, and I share the photos of our different…. You know what I would call the resistance in Flathead. People who are outside the Flathead, either Montana or somewhere elsewhere in the nation, they go on Facebook and say “Oh, you guys are so lucky to live in the Flathead.” As somehow there’s a liberty tree that we just go shake once in a while, liberty showers upon us. When in reality, that is not the case. We have been fighting for our freedom from the beginning. You know if I could talk a little bit about that. About some of the high points of that resistance.
Dan: What else is happening locally?
Dr. Bukacek: Just back in, it was March 17, it was a large event here, 700 people, that’s right, we were in the throes of the hype, right. And there were 700 people at this event and there were people who came and tried to shut it down. And the person how ran the event said ‘no, we are not going to do it’. And the place that held the event said ‘no we are not going to shut it down’. And that was March 17th. And then April 17th there was a group, they called themselves Cruise Kalispell. And on 17th of April they just started driving up and down on the street because people needed to go out and about. And then next week April 24th there were over 4,000 people in downtown Kalispell. You can’t keep social distance with 4,000 people or so, nobody kept social distance and there was no spike, there was no increase in cases. So that again, it goes back to there is, seems like close to zero transmissability, of “it”. So that was April, and then you know, May, June around there, there was a protest. About 1,000 people came to protest the police. Most of them were busted from out of the area. But they were busting, and they were protesting our police, they were calling our police and our sheriff all kind of nasty names. Protesting with signs. And we have excellent police here, we have excellent leadership in the police, and in the sheriff department. And so, there were about 1,000 of those protesters who came. And in other areas of the country, where they were looting stores. It was right around the same period of time. And in the valley here, there were somewhere 350 to 500 armed men and women went there and stood on the opposite side of the street of the protestors, and there was no violence. There was nothing. They were there to keep the peace so, they had their long armed guns and they were displaying it, showing them: you are not going to loot our stores, you are not going to hurt any of us. But that is another example of a large group of people. You know, it was 13 to 1500 people and there was no big spike. So again, there’s people very close together and, so that was it. It was like May, June. Right around there. 4th of July we had a 4th of July parade. We were the few places in Montana. It doesn’t just spring out of nowhere. People decided no. Independence day, liberty, we are going to celebrate our freedom. And they had a 4th of July parade it was well attended, it was large. So, that was July, then August we had our fair, there were over 40.000 people that went there. There was a group of doctors that tried to shut it down and then tried to eliminate it. It was the health officer that reported that it was over 40.000 people there, the people did not keep social distancing, most of the people did not wear masks and there was no spike. But that was the people, those 40.000 who didn’t wear masks saying “no, we are not going along with this”. So, there has been this resistance all along. And then the last three months, I don’t want to forget this part. There have been citizens, every week there has been at least one protest. There were about 7 or 8 weeks where they stood down by County Courthouse and they stood out there with their signs and in the end they had a handshake and a hug rally, these people were not keeping distance, they march every week, every week. And there were people who protested at the health department, every time they had a meeting, people who protested at the city council. So we’ve been doing protests every week and people continue to do that. So, liberty comes from work, comes from hard work and sacrifice, and people willing to stand up and maybe take some ridicule.
Dan: So, it takes a little more than staying at home and researching your favourite websites, posting comments on twitter?
Dr. Bukacek: Yes, it takes lot more and that’s why we have this victory that you talked about with the board, is that the public has actively resisting from this nonsense since March. To some extent, and with the board it was a flood of letters, it was people protesting outside, it was the citizens that actually got on the Zoom meetings and spoke their mind. So, it was really the citizens of the world in these different areas, they need to get out and protest, they need to do what they can to stop it now. While at this point the worst thing that has happened to me is people saying mean things about me in the paper. You know that there is a group of people that come after me. So at least I am not losing my life, I am not being put in prison, not being fined so we need to fight against this now, while the stakes are not as high as they will be if we continue to put op to this.
Dan: How about dirty looks at the supermarkets, do you get any of those when you are going without your mask?
Dr. Bukacek: I haven’t, I have heard about people that have but I haven’t, I am a very friendly person, I like people. I’m just friendly and I haven’t had anybody giving me a hard time about it.
Dan: I find it a great conversation starter, if I go into a supermarket where one out of ten persons is without a mask and the rest are wearing, I go straight to that person and say: ‘How are you doing’ and ‘hello’ and sometimes I make a friend out of it.
Dr. Bukacek: I like that or say ‘thank you for not wearing a mask’ or something like that, encourage people. I haven’t had any of that, but I know that it is going on. They had somebody that didn’t wear a mask up in Waifish that got their window smashed, there is a lot of really bad attitudes, I just haven’t personally experienced it.
Dan: Even at some places close as Waifish, so you are saying that most of the Flathead valley is kind of this bastion of freedom, because people are getting of their butts and doing something about is.
Dr. Bukacek: Yeah, people are doing something about it, that’s what has to be done, we already know it is nonsense, we know all of our facts, we are just sitting and rehashing it or just emailing information back and forth, posting it you know. That’s all really good, you got to step out there and you’ve got to protest, you got to take some risk. And you got to take the time to organise, we are like that protest outside of the county courthouse. It started at a size and then people that went to it got names of new people, it can start really small. The first protest against the health department was like seven people, then it went to ten or twelve, something like that. Then it was over forty the other day, so these individuals are finding their contacts, building their contact list and then getting people out. So that what does it, that’s what it takes, no question about it.
Dan: Fantastic, well it is good to hear some good news!
Dr. Bukacek: Oh, its great news, I am so excited.
Dan: And I hope that our listeners will realize that it incumbent on all of us to get out there and get moving, absolutely. So, thank you very much Dr Bukacek.
Dr. Bukacek: Oh, my pleasure.

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**So join an internet-independent network today! Click here:** [**www.kla.tv/vernetzung&lang=en**](https://www.kla.tv/vernetzung%26lang%3Den)

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