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In consideration of the role of the Archives in preserving and making your recording available, we ask you to agree to the following:

I, Robert Spude, transfer and convey to the University of Alaska Fairbanks' Rasmuson Library my title, interest, and copyright, if any, to the recording.

I also agree to hold the University of Alaska Fairbanks harmless for how it makes the recordings available and how it preserves them. I further acknowledge that I have been informed of the following:

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I have read and accept both the terms of the Oral History Gift and Release Agreement as well as the Interview Restrictions provided.

Robert L Spude
(Narrator's printed name)

Robert L Spude 5/9/2019
(Narrator's signature & date)

2 Alcalde Rd, Santa Fe, NM 87508
(Narrator's mailing address)

Kare N. Brown 5/9/19
(Interviewer's signature & date)

[2 Alcalde Rd.]

Molyn L. Russell 5/23/19
(Collection manager's signature & date)

Names of other institutions where copies of this recording(s) are deposited: