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ORAL HISTORY
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→ [Kester Woodward]

Oral History Gift and Release Agreement

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

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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.

Kester Woodard
(Narrator's printed name)

Kester E Woodard 8/2/17
(Narrator's signature & date)

PO Box 70892 Fairbanks, AK 99707
(Narrator's mailing address)

Sharon Hollensbee 8-2-17
(Interviewer's signature & date)

Robyn L. Russell
(Collection manager's signature & date)
8-16-17

[Sharon Hollensbee]

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

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