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Edwin E. Rasmuson Library
Alaska and Polar Regions Collections & Archives
321 Student Union Building, Fairbanks, Alaska 99775-0001

(907) 474-6773
FAX (907) 474-6365
fyapr@uaf.edu
www.library.uaf.edu

Oral History Gift and Release Agreement

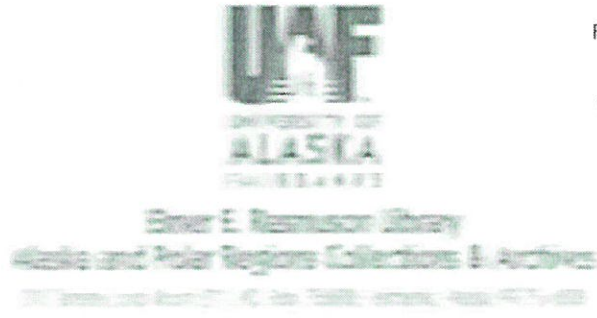
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I have read and accept both the terms of the Oral History Gift and Release agreement as well as the Interview Restrictions provided.

James E Anderson
(Narrator's printed name)

[Signature]
(Narrator's signature & date)

POB 60042 Fairbanks, AK 99706
(Narrator's mailing address)

[Signature] 10/18/2011
(Interviewer's signature & date)
[Allen S. Anderson, Jr.]

[Signature] 7/11/18
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Names of other institutions where copies of this recording (s) are deposited:
