

ORAL HISTORY
2018-11-09

**Tustumena Oral History Project
Interview Information Form**

Recording/Interview Date: <i>AUG 25, 2017</i>	Consent Form Signed <input checked="" type="checkbox"/> YES NO
Recordist/Interviewer: <i>MICHAEL SAKAYAG</i>	Recording Location: <i>WINDER, ID. IN BETTY ARIAGA'S HOME</i>
Speaker/Interviewee: <i>BETTY ARIAGA</i>	
Interviewee's Address: <i>26615 MONKS PL WINDER, ID 93676</i>	Telephone No: <i>208-337-3164</i>
	Email Address: <i>MARCELO@FRONTIERE.NET</i>
	Birthdate: Month <i>4</i> / Day <i>4</i> / Year <i>37</i>
Names of others present during interview and any additional notes: <i>ANNE FULLER</i>	
Office Use Only:	
Recording No.:	
Length of Recording: <i>00:28:37</i> minutes	
Number of Tracks:	