

1872

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Register #: 2020-014

ORAL HISTORY

2018-14-21



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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.

Kenneth L. Adkisson
(Narrator's printed name)

Kenneth L. Adkisson Feb 7/20
(Narrator's signature & date)

P.O. Box 1723 Nome, AK
(Narrator's mailing address) 99762

Jillian 2/7/20
(Interviewer's signature & date)

Melby L. Russell
(Collection manager's signature & date)
2-18-20

Bessie McLaughrey Feb 7/20

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