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

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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 Bruce Parham, 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.

\_\_\_\_\_  
(Narrator's printed name)

\_\_\_\_\_  
(Narrator's signature & date)

Robert Bruce Parham 12-14-2022

\_\_\_\_\_  
(Narrator's mailing address)

\_\_\_\_\_  
(Interviewer's signature & date)

Robert Bruce Parham  
4310 Seeley Circle  
Anchorage, AK 99502-1957

Rebyn L. Russell  
(Collection manager's signature & date)  
2-13-2023