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

I also agree to hold the University of Alaska Fairbanks harmless for how it makes the recordings available and how it preserves them. I further acknowledge that I have been informed of the following:

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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.

Jaime Schmidt
(Narrator's printed name)

Jaime Schmidt 2/3/2026
(Narrator's signature & date)

5427 W. Quaking Aspen Dr.
Coeur d'Alene ID 83814
(Narrator's mailing address)

Naren N. Brewster 2/3/2026
(Interviewer's signature & date)

Robyn L. Russell 3-27-26
(Collection manager's signature & date)

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