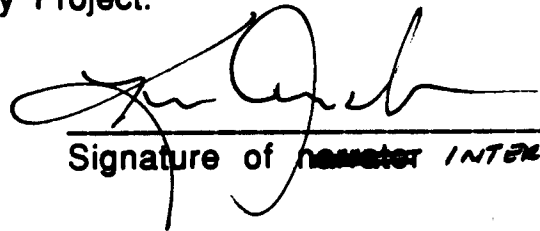


KODIAK ORAL HISTORY PROJECT
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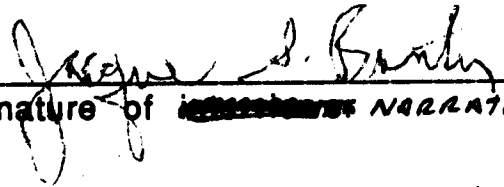
I hereby give and grant to the Kodiak Oral History Project my tape recorded memoir as a donation for such scholarly and educational purposes as the director of the project, Dr. Gary Stevens, shall determine. Copies of this tape recording and/or the written transcript, will be deposited at the University of Alaska Oral History Archives in Fairbanks; and at Kodiak College. It is expressly understood that the full literary rights of this memoir pass to the Kodiak Oral History Project.



Signature of ~~INTERVIEWER~~ INTERVIEWER

Box 8727 KODIAK AK. 99615

Address of ~~INTERVIEWER~~ INTERVIEWER



Signature of ~~INTERVIEWER~~ NARRATOR

Box 1741 KODIAK, AK 99615

Address of ~~INTERVIEWER~~ NARRATOR

APRIL 29 1996
 Date of agreement