

**KODIAK ORAL HISTORY PROJECT**  
**P. O. Box 201**  
**Kodiak, Alaska 99615**  
**(907) 486-4205**

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.

Nancy E. Anderson  
 Signature of narrator

P.O. Box 1454

Kodiak, AK 99615  
 Address of narrator

Mike Pastor  
 Signature of interviewer

414 Mission Rd. Kodiak  
 Address of interviewer

11/29/94  
 Date of agreement