

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.

Thomas Frost

Signature of narrator

309. E. Eskine apt # 440

Kodiak Alaska 99615

Address of narrator

Garance W. Selig

Signature of interviewer

P.O. Box 2721, Kodiak AK 99615

Address of interviewer

December 5, 1994

Date of agreement