

**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.

Arthur Schaeffer

Signature of narrator

P.O. Box 2133

KODIAK, AK. 99615

Address of narrator

Robin Schaeffer

Signature of interviewer

P.O. Box 2133 City

Address of interviewer

December 12, 1994

Date of agreement