

Historic Charleston Foundation Oral History Project

Interview Agreement and Consent Form

The Oral History Project is a program of Historic Charleston Foundation. All recordings and transcripts resulting from interviews conducted for HCF's Oral History Project become part of the Margaretta Childs Archives at Historic Charleston Foundation, where they will be made available for use by HCF staff and other researchers in a manner consistent with the missions of both Historic Charleston Foundation and the Margaretta Childs Archives. All recordings and transcripts become the property of Historic Charleston Foundation and will be regulated according to any restrictions placed on their use by the interviewee and/or interviewer. Typical uses may include scholarly and other publications, audio/visual presentations (including the production of CDs or DVDs), exhibits, websites, and other marketing and communications purposes. Your consent to participate in this research as provided in this agreement is entirely voluntary.

We, the undersigned, have read the above. The interviewer affirms that she/he has explained the nature and purpose of this oral history research. The interviewee affirms that she/he has consented to the interview. The interviewer and interviewee (and videographer and photographer, when applicable) hereby give grant and assign to Historic Charleston Foundation all rights, title and interest, including copyright, of whatever kind from this information and interview.

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Signature 3-19-14	Signature March 19, 2014
Pate Pemberton	JOSEPH H. MCGEF
Full Name of Interviewer (print clearly)	Full Name of Interviewee (print clearly)
Address	Address CNARLESTON SC 2940)
City, State Zip	City, State Zip 843 - 722.3049
Phone Number (include area code)	Phone Number (include area code
Restrictions for use, if applicable:	

Thank you for your cooperation and generosity! Your interview will help to preserve and share the history of Charleston for current and future generations!

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Oral History Interview Documentation Sheet

Please complete an Interview Documentation Sheet for each interview conducted. Return completed form to the Margetta Childs Archives, along with the interview recording and release form.

Project Title: Oval History Project 2014
interview Date: 3-19-14 Location: 40 East Bary
Pull Name of Interviewee: Poter McGee College Doctor Date of Birth: Birthplace: Charleston, SC. Address: 7 Anson St. Charleston, SC 29401
Phone Number: 722-30/9
Email:
Full Name of Interviewer: Katherine Pentse Am Contact Information (if not HCF): HCF
Approximate Length of Interview: W. Somultes Recording Speed/Level: Minutes Recording Speed/Level: Number of Original Recordings: 2 cameras Format (tapes, CDs, etc.): Ni def. digital
Videographer's Name (if applicable): Photographer's Name (if applicable): Transcriber's Name (if applicable):
For Archives Use Only: Date Received Received By Signed Interview Agreement and Consent Form Original Recording