

**Historic Charleston Foundation
Oral History Project**

Oral History Interview Documentation Sheet

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

Project Title: Interview with Yvonne Tucker

Interview Date: 3-3-16 Location: 258 Ashley Ave

Full Name of Interviewee: Katherine Pemberton Yvonne Tucker

Date of Birth: _____ Birthplace: Charleston

Address: 258 Ashley Ave

Phone Number: 906-8094

Email: Yvonne.tucker@va.gov

Full Name of Interviewer: Katherine Pemberton

Contact Information (if not HCF): _____

Approximate Length of Interview: _____ Minutes Recording Speed/Level: _____

Number of Original Recordings: _____ Format: _____

Videographer's Name (if applicable): Richard Almes

Photographer's Name (if applicable): _____

Transcriber's Name (if applicable): _____

For Archives Use Only:

Signed Interview Agreement and Consent Form

Original Recording

Date Received

Received By
