

**Interviewee Oral History Agreement**  
[Transfer of Rights to the Public Domain]

1. In consideration of the recording, transcription, cataloging, and preservation of my oral history memoir by the \_\_\_\_\_ [name of court or agency], its employees and agents, I, \_\_\_\_\_ [name of interviewee] do hereby relinquish and transfer to the \_\_\_\_\_ [name of court or agency], and thus to the public domain, the ownership of the recordings and transcripts of interviews of me as described below, except as otherwise provided herein. I also convey to the \_\_\_\_\_ [name of court or agency], and thus to the public domain, all rights, title, and interest I might have in such recordings, transcripts and their content, including copyrights, and waive any copyright I might have to such recordings, transcripts and content, except as otherwise provided below.
2. I reserve the right to use the recordings and transcripts and their content as a resource for any book, pamphlet, article or other writing of which I am an author or co-author.
3. I warrant that I have not assigned, encumbered or impaired my rights and interest in the recordings, transcripts and their content referred to above. This warranty shall not apply to information in the interview that may be contained in a prior published work of mine.
4. It is agreed that access to the aforementioned recordings and transcripts shall be available to researchers under the direction and control of the \_\_\_\_\_ [name of court or agency]. I authorize the \_\_\_\_\_ [name of court or agency], subject to the following restrictions, to duplicate, edit, publish, or permit the use of my oral history memoir in any manner that the \_\_\_\_\_ [name of court or agency] considers appropriate, and I waive my claim to any royalties from that use.

Description of material: Recordings and transcripts from oral history interview sessions with \_\_\_\_\_ [name of interviewee] conducted by \_\_\_\_\_ [name of interviewer] on \_\_\_\_\_ [date(s)].

[see next page]

Exceptions to Oral History Agreement (Please initial all that apply, if any)

- A. \_\_\_\_\_ None of the recordings or transcripts shall be made available to anyone other than myself, the interviewer, and the \_\_\_\_\_ [name of court or agency] without my express written permission until \_\_\_\_\_ [identify date or event], whichever first occurs.
- B. \_\_\_\_\_ The following page(s) of the transcript \_\_\_\_\_ [list page numbers], and the recordings relating thereto, shall be closed to all users until \_\_\_\_\_ [identify date or event], except with my express written permission.
- C. \_\_\_\_\_ It is agreed that the \_\_\_\_\_ [name of court or agency] shall not authorize publication of the transcripts or any part thereof during my lifetime without my express written permission, but that the \_\_\_\_\_ [name of court or agency] may authorize scholars, researchers, and others to make reasonable quotations therefrom without my written permission.
- D. \_\_\_\_\_ It is agreed that the \_\_\_\_\_ [name of court or agency] shall not authorize publication by others of the transcripts or any part thereof including brief quotations, during my lifetime without my express written permission.
- E. \_\_\_\_\_ I retain all of my right, title, and interest in the recordings and transcripts and their content, including literary rights and copyrights, until \_\_\_\_\_ [identify date or event], at which time these rights shall vest in the \_\_\_\_\_ [name of court or agency].
- F. \_\_\_\_\_ In the event of my incapacity, I designate \_\_\_\_\_ [name] of \_\_\_\_\_ [address] to make decisions related to the oral history. Upon the incapacity of this designee, I authorize the \_\_\_\_\_ [name of court or agency] to make such decisions on my behalf.
- G. \_\_\_\_\_ I impose the following conditions: [describe]

[see next page]

\_\_\_\_\_  
Signature of Interviewee

\_\_\_\_\_  
Date

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_  
[month], \_\_\_\_\_ [year], by \_\_\_\_\_ [name of interviewee].

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_

Accepted this \_\_\_\_\_ day of \_\_\_\_\_ [month], \_\_\_\_\_ [year], by  
\_\_\_\_\_ [authorized representative of court or agency].