

MEDIA QUERY FORM

I MEF PUBLIC AFFAIRS

Date/ Time:

Deadline (please provide date and time):

Reporter Name:

Organization:

Work Phone #:

Cell Phone:

Email:

Subject:

Background:

Questions:

FOR OFFICIAL USE ONLY:

Communication Log (Received by, Sent to, Last action taken, etc.):

For Office Use Only
Query Number: _____
Received By: _____
Responded By: _____
Date/Time: _____

