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: