

Story Action Sheet

Day: _____ Date: _____ Time: _____

JOURNALIST: _____ Staff/Freelance

Publication/Station: _____

Phone: _____ Ext. _____ // Fax: _____

Website: _____ E-mail: _____

Other contact info: _____

TOPIC: _____

Approach to story: _____

Also contacting: _____

DEADLINE: _____ Section/Program: _____ Run date: _____

Contact & research notes

Date:	Time:	Person:	Contact, action or follow-through: (*indicates see attached)

(pg. ____ of ____ pgs.) Signed _____