

**Millennium
Marijuana March**



MEDIA CONTACT INFORMATION

Name of publication/station
Type of media
(<input type="checkbox"/>)Newspaper; (<input type="checkbox"/>)Radio; (<input type="checkbox"/>) T.V.; (<input type="checkbox"/>) Magazine; (<input type="checkbox"/>)Web
General phone
General Fax
Website
Contact Person
Job title (<input type="checkbox"/>) Journalist; (<input type="checkbox"/>)Reporter; (<input type="checkbox"/>) Editor; (<input type="checkbox"/>) Producer; (<input type="checkbox"/>) Other
Phone
Email
Fax
Address
Cell/pager
Circulation/Broadcast audience
Deadlines/lead time required (10th of preceding month, one week, etc.)
Locally produced programs/feature columns
First contact made (date)
Press release mailed (date) Packet mailed (date)
Follow-up:
Other: