

# Media Request Form



Date: \_\_\_\_\_

Name: \_\_\_\_\_

Reporting Agency: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Form of Contact:  Phone  Email

Subject of the news piece:

Preferred Person of Contact (if known): \_\_\_\_\_

*We will recommend another contact if the above is unavailable.*

**Any specific details or materials sought? (e.g. statistics, previous action, etc.)**

*If you would like to access to our Public Records, please fill out our Public Records Request Form at [ashland.or.us/recordsrequest](http://ashland.or.us/recordsrequest) or contact our City Recorder at (541) 488-5307 or [melissa.huhtala@ashland.or.us](mailto:melissa.huhtala@ashland.or.us).*

Would you like to record (audio or video)? No  Yes, audio only  Yes, video

If yes, any special requests? (e.g. preferred time or location)

Deadline for the news piece: \_\_\_\_\_

*We will try our best to meet this deadline. The sooner we know about the story the better chances of scheduling with staff.*

When complete, email this form to [administration@ashland.or.us](mailto:administration@ashland.or.us) or fax it to (541) 488-5311.

Thank you!

