

Tobacco-related media tracking form

Type of media:

- ☐ Paid media: Advertisement, etc.
- ☐ Earned: News story, editorial, letter, etc.
- ☐ Other: Explain _____

Date of story: _____

Name of Media outlet

Type of media outlet:

- ☐ Newspaper
- ☐ Television
- ☐ Radio
- ☐ Newsletter
- ☐ Other: _____

Story headline/Summary: _____

Description (if print, please attach a copy of the story):

Reporter: _____

Impressions (circulation of paper, listenership, viewership) _____

What organizations were mentioned in the story? Who was quoted?

- ☐ Tobacco-Free Michigan
- ☐ American Cancer Society
- ☐ American Lung Association
- ☐ American Heart Association
- ☐ National Group: Name _____
- ☐ Local Coalition
- ☐ Other: _____

Other comments:

