FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPI	ROVAL						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SAGANSKY JEFFREY 2. Date of Event Requiring Statement (Month/Day/Year) 08/29/2003				nent	3. Issuer Name and Ticker or Trading Symbol SCRIPPS E W CO /DE [SSP]							
(Last) 312 WALNUT	(First)	(Middle)	0, 20, 20 00		Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner					5. If Amendment, Date of Original Filed (Month/Day/Year)		
					71	Officer (give title below)	Other (spe	ecify	6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) CINCINNATI	ОН	45202				·	·		X		y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						nt of Securities ally Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Class A Common Shares, \$.01 par value per share						0	D					
Common Voting Shares, \$.01 par value per share						0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable at Expiration Date (Month/Day/Year)		ate	nd 3. Title and Amount of Secu Underlying Derivative Secur		ity (Instr. 4) Conv		ersion ercise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security		or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

M. Denise Kuprionis,

Attorney-in-fact for Jeffrey 09/03/2003

<u>Sagansky</u>

** Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).