

**Office of Senator Elizabeth Dole
U.S. Flag Order Form**

ORDER INFORMATION

Name of person making request _____

Daytime telephone number (_____) _____

If applicable: Please name the person or organization and the occasion for which the flag is to be flown.

Date flag is to be flown over the Capitol
(must be a future date): _____

FLAG TYPE	PRICE	QUANTITY	SUBTOTAL
3 x 5 Nylon	\$9.00	\$	
3 x 5 Cotton	\$9.25	\$	
5 x 8 Nylon	\$18.00	\$	
5 x 8 Cotton	\$20.00	\$	
4 x 6 Nylon	\$13.50	\$	
Flying & Certification Cost (per flag)	\$4.05	\$	
Shipping & Handling Cost (per flag)	\$4.00	\$	
TOTAL AMOUNT OF ORDER			\$

SHIPPING INFORMATION

Name of flag recipient _____

Address _____

City, State, ZIP _____

Please mail this form along with a check or money order for the appropriate amount made payable to **The Keeper of the Stationery**. *Processing your request will take six to eight weeks.*

Senator Elizabeth Dole
Attn: Flag Coordinator
555 Dirksen Building
U.S. Senate
Washington, DC 20510