



Flag Request Form

U.S. Congressman Jerry Costello
12th District of Illinois

Today's date: _____ Date flag to be flown: _____

Date of ceremony: _____ Date flag required by: _____

Information for constituent making request

Information for recipient of flag

Name: _____

Name: _____

Address: _____

Rank (if military): _____

Branch of Service: _____

City, state, zip: _____

Address: _____

Phone: _____

Cell Phone: _____

City, state, zip: _____

Email: _____

Occasion for flag presentation (include years served if military):

Select Size (Prices include shipping):

3x5 Cotton - \$18.20 _____ 5x8 Cotton - \$30.90 _____

3x5 Nylon - \$16.90 _____ 4x6 Nylon - \$22.45 _____ 5x8 Nylon - \$26.95 _____

WE DO NOT ACCEPT CASH

Please send a check or money order made out to: **Congressman Costello's Office Supply Fund.**

Due to high volume at the House Flag Office, please allow **8 weeks** for delivery after the flag is flown.

Fax completed form to: (202) 225-0285

To make sure that your flag order is processed in a timely manner, please fax the order to my Washington, D.C office at the number shown **AND** mail the completed form, with payment, to my Belleville Office.

Mail completed form,
with check or money order to:

U.S. Congressman Jerry Costello
144 Lincoln Place Ct, Ste 4
Belleville, IL 62221

Questions may be directed to Katie Stonewater at (202) 225-5661.

For D.C. Office Use

_____ Sent to Architect (8 weeks) _____ Payment received _____ Sent to Constituent