

FLAG REQUEST FORM

Information of person requesting flag(s):

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone:(home) _____ (cell) _____

*Make check payable to “*Adrian Smith Office Supply Account*”

*Mail payment to:

The Honorable Adrian Smith
503 Cannon HOB
Washington, D.C. 20515

3x5 Nylon \$9.00 x (#) _____ + \$4.05 (per flag) _____ = _____

3x5 Cotton \$9.25 x(#) _____ + \$4.05 (per flag) _____ = _____

4x6 Nylon \$13.50 x(#) _____ + \$4.05 (per flag) _____ = _____

5x8 Nylon \$18.00 x(#) _____ + \$4.05 (per flag) _____ = _____

5x8 Cotton \$20.00 x(#) _____ + \$4.05 (per flag) _____ = _____

*If you do not choose to have the flag flown over the Capitol, please deduct the flying fee from the total cost.

Please provide the wording that you would like to appear on the certificate:

Example: This flag was flown for Captain John Smith in recognition of his retirement from the U.S. Navy after twenty years of dedicated service.

