## **FLAG REQUEST FORM**

*Instructions:* Please click on the form and type in your information. Once filled in, print and attach a check or money order, made out to "Keeper of the Stationery," and send to the address below. Cash and credit cards are not accepted at this time. If you would like your flag flown over the Capitol, you must send the request at least a month prior; please do not send your request more than six months in advance.

1. Contact information for person requesting the	ne flag:	
Name:Street:		
City:State:		
Phone: (Day / Evening)		
E-mail:		
<b>2.</b> If you would like to receive a certificate with section below:	your flag that honors a particu	ular person or special event, please fill in the
Name of flag recipient (to appear on certificate)	· ·	_
Occasion (if any):		
Date you would like your flag flown over the Ca	apitol (request must be sent at	least one month prior to this date and no
more than six months in advance):		
<b>3.</b> Select the type and size of flag you would like check for the correct amount and mail it to the a "Keeper of the Stationery."		
Type of flags:	Quantity:	Total:
3 x 5 Nylon Flag	x \$17.05 =	\$
3 x 5 Cotton Flag	x \$17.30 =	\$
5 x 8 Nylon Flag	x \$26.05 =	\$
5 x 8 Cotton Flag	x \$28.05 =	\$
		\$ Grand Total Enclosed
<b>4.</b> Ship flag to:		
Name: Street: _		
City: State:		
5. Please return completed form and chec	k/money order made out to	"Keeper of the Stationery" to:
The Office of Senator Mark Udall		
ATTN: Flag Coordinator		
SH-328 Hart Senate Office Building		
Washington, D.C. 20510		
Please allow 6-8 weeks for delivery after your fl Should you have any questions, please call my		
Office Use Only: Check/MO #:	Date	e Sent: