Flag Request Form Office of Congressman Dave Obey

Your Name: Street Address:			
City/State/Zip:			
If flag is to be flown over th	e Capitol – In honor	r of:	
Name/Organization:			
Inscription for flag ce	rtificate (special occas	sion or recognition of accompl	ishment):
Flag Options and Prices - C	heck box to select a	flag option:	
Flown over the Capitol		Not flown over the Capitol	
3 x 5 Nylon - \$16.90]	3 x 5 Nylon - \$12.85	
3 x 5 Cotton - \$18.20]	3 x 5 Cotton - \$14.15	
☐ 4 x 6 Nylon - \$22.45]	4 x 6 Nylon - \$18.40	
5 x 8 Nylon - \$26.95]	5 x 8 Nylon - \$22.90	
5 x 8 Cotton - \$30.90		5 x 8 Cotton - \$26.85	
	lag processing fee cho	il shipping. For flags flown o arged by the Architect of the C ertificate.	
Special Instructions:			
If any, specific date you want	flag to be flown:		
If flag is needed by a specific	date, list date:		
List name and address where	flag is to be mailed if	f different address than listed a	bove:
Recipient's Name: Street Address:			
City/State/Zip:			

Send completed form with a check or money order for flag purchase amount, made payable to: *House Stationary Account W10781*, to the following address:

Congressman David Obey 401 5th Street, Suite 406A Wausau, WI 54403