

Flag Request Form



Massachusetts 3rd Congressional District

Date of Request:	_			
Constituent/Organization Name:				
Phone:	Email:			
Would you like your flag to be flown over th	e Capitol? (\$4.05 fee)	□Yes	□No	
If YES, on what day would you like y	your flag to be flown?			
Person/Group/Organization to be honored:				
Special Occasion (if any):				
Where should your flag be sent?				
Name:				
Mailing Address:				
City:	State:_		Zip:	

PLEASE SPECIFY THE TYPE AND SIZE OF YOUR FLAC*

Туре	Size	Material	Flag Cost	Mailing Fee	Price <i>without</i> Flying Fee	Price with Flying Fee
	3 x 5	Nylon	\$9.00	\$4.90	\$13.90	\$17.95
	3 x 5	Cotton	\$9.25	\$5.70	\$14.95	\$19.00
	4 x 6	Nylon	\$13.50	\$5.70	\$19.20	\$23.25
	5 x 8	Nylon	\$18.00	\$5.70	\$23.70	\$27.75
	5 x 8	Cotton	\$20.00	\$5.70	\$25.70	\$29.75

^{*}If ordering more than one flag, please call the Worcester District Office for exact pricing; 508-831-7356.

Please send form and payment to:

U.S. Representative James P. McGovern 34 Mechanic Street Worcester, MA 01608

Make checks payable to: Office Supply Accounts-MA 0350

Office Use Only: Date Delivered: _____ Date Mailed: ____

