

* * RECIPIENT INFORMATION * *

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Recipient Name:					
Recipient Address:					
Recipient City, State & Zip	C				
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Name:			Home Phone:		
Address:			Cell Phone:		
City, State & Zip:					
Work Phone:			Email Address:		
Please Mail Flag (s) to:	☐ Recipient	■ Reques	ter		
	,	_	(s) to be flown. Please allow flag 6-10 weeks after it was flo		
Preferred Date:			Alternate Date:		
If you would like to include	someone's name	e or special ev	ent on the flag certificate, pleas	se indicate below:	
Name (s):					
			the form below:		
QUANTITY	FLAG SIZE	TYPE	TOTAL COST PER FLAG	TOTALS	
	3x5	Nylon	\$19.00		
	3x5	Cotton	\$20.00		
	4x6	Nylon	\$24.00		
	5x8	Nylon	\$29.00		
	5x8	Cotton	\$32.00		

*Prices include Shipping and Handling

Mail Check or Money Order made out to "Keeper of the Stationery" and send to:

GRAND TOTAL:

U.S. Senator Kay R. Hagan ATTN: Flags 521 Dirksen Senate Office Building Washington, DC 20510