## FLAG REQUEST FORM

\*\*\*Make Checks Payable to: LYNN JENKINS OFFICE SUPPLY ACCOUNT\*\*\*

Mail Form and Check to:	Congresswoman Lynn Jenkins 1027 Longworth House Office Building Washington, DC 20515	
Please Print:		Today's Date:
Name of Person Requesting	g Flag:	
Address:		
City:	Zip:	
Daytime Phone Number: _	Email:	
Flag Types	Flown Over Capitol/Qty.	NOT Flown Over Capitol/Qty
3x5 Nylon Flag(s)	@ \$13.05 each	@ \$9.00 each
3x5 Cotton Flag(s)	@ \$13.30 each	@ \$9.25 each
4x6 Nylon Flag(s)	@ \$17.55 each	@ \$13.50 each
5x8 Nylon Flag(s)	@ \$22.05 each	@ \$18.00 each
5x8 Cotton Flag(s) 8x12 Cotton Flag(s)	@ \$24.05 each @ \$109.05 each	<pre>@ \$20.00 each</pre> <pre>@ \$105.00 each</pre>
8x12 Collon Flag(s)	@ \$109.03 eacn	@ \$103.00 eacn
	Total \$	Total \$
Please contact Dylan	Shipping Costs MacInerney at 202-225-6601	to confirm shipping costs.
Certificate Information (	only complete if flag is to be flo	own over Capitol):
Name of person or group to	be flown for:	
Occasion (e.g. birthday, we	edding anniversary):	
Date to be Flown (please al	llow up to 3 weeks for a specifi	c date):
	Office Use Only	
Date of Request:	Flag Sent to Cap	pitol:
Method of Payment:	Check Received	l: Paid: { }
Flag on Backorder:	Awaiting Check	с
	Date Mailed:	