OFFICE OF SENATOR ROGER WICKER

FLAG REQUEST FORM

In making your requests, please submit this order form at least four weeks prior to the date when you would like to have the flag flown, and allow four to six weeks for delivery from your fly date.

Contact Information:			
NAME			
DAYTIME PHONE #	EVENING #		_
EMAIL ADDRESS			
Recipient:			
NAME			
STREET			
CITY	STATEZ	IP	
*The flag will be mailed to the a	address listed above.		
Please circle whether you would	d like a Pre-Flown Flag or a flag f	lown on a Specific Date.	
*If you selected Specific Date,	please indicate the date here:		
Certificate will read: "THIS F	LAG WAS FLOWN FOR		(name)
ON THE OCCASION OF		(event)."	
Special Instructions:			
*Please print all above inform	ation exactly as you wish it to ap	pear on the authenticity cer	tificate.
Please indicate which size and t of the Stationery.	ype of flag you would like. Check	or money order ONLY made	payable to: Keeper
	QUANTITY	TOTAL	
3x5 Nylon	x \$14.00	\$	
3x5 Cotton	x \$15.00	\$	
4x6 Nylon	x \$18.00	\$	
5x8 Nylon 5x8 Cotton	x \$27.00	\$	
Flying & Certificate Cost	x \$28.00 x \$9.00	\$ \$	
Shipping & Handling cost (pe	r flag) $x 9.80	\$\$	

Payment Information:

Please print a copy of this form and include it with your check made out to: "Keeper of the Stationery" Please mail the copy of your request and payment to:

Attn: Flag Coordinator Senator Roger F. Wicker 425 Russell Senate Office Building Washington, D.C. 20510

Revised 03/25/2024