UNITED STATES SENATOR PAT TOOMEY

FLAG REQUEST FORM

REQUESTOR INFORMATION

_________________________________________________________________________________

Name

_________________________________________________________________________________

Street Address   City   State/Zip

_________________________________________________________________________________

E-Mail Address   Phone Number

MAILING INFORMATION (If different than above)

_________________________________________________________________________________

Name

_________________________________________________________________________________

Street Address   City   State/Zip

FLAG INFORMATION

Please indicate if you would like your flag flown over the Capitol:  Yes ___  No___

Date flag is to be flown (if any):  _ _ / _ _ / _ _ _ _

Please indicate any information you would like to appear on the accompanying certificate:

_________________________________________________________________________________

Name

Occasion

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Size</th>
<th>Fabric</th>
<th>Price (If Flying)</th>
<th>Price (If Not Flying)</th>
<th>Total Cost</th>
</tr>
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<td>3x5</td>
<td>Nylon</td>
<td>$28.80</td>
<td>$19.80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3x5</td>
<td>Cotton</td>
<td>$29.80</td>
<td>$20.80</td>
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<td>5x8</td>
<td>Cotton</td>
<td>$41.80</td>
<td>$32.80</td>
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</tr>
</tbody>
</table>

Please call our office at (202) 224-4254 for any questions you may have regarding flags. Send this form, along with a check or money order payable to The Keeper of the Stationery.

Office of Senator Pat Toomey
ATTN: Flag Coordinator
248 Russell Senate Office Building
Washington, DC 20510

OFFICE USE ONLY:
Date Received _____  Date Processed _____  Date Mailed _____  Staff Initials _____