Congressman Gus M. Bilirakis
FLAG ORDER FORM

Date Ordered: _____

Name: _____

Address: _____

_____

Phone Number: _____

Flag Size: _____ **Number of flags (limit 4):** _____

Material: _____

Price: _____

Certificate made out to: _____

_____

_____

_____

<u>CONGRESSIONAL USE ONLY</u>:

Mailed On: _____ **Picked Up On:** _____

Checks made payable to: ***Gus Bilirakis Stationery Account***

(LEAVE BLANK: CONGRESSIONAL USE ONLY)