



NOTICE: OST will provide Elderly, Veterans and Past Council members with one complimentary flag. All other requests must have a \$150.00 money order attached before the flag will be processed. Thank you.

TRIBAL FLAG REQUEST

To: OST Secretary's Office Date: _____

Fr: _____ Phone: _____

Address: _____

Re: Request for OST Tribal Flag _____ Indoor _____ Outdoor

I am requesting for the: _____ Death _____ Honoring

Of: _____ (NAME) _____ (LAKOTA NAME)

District: _____ Date of Birth: _____

Location of Death: _____ Date of Death: _____

ADDITIONAL INFORMATION

Give a brief description of what you would like on the flag: (Example – number of years of service, place of employment, etc.)

**** OUTDOOR FLAGS ARE STANDARD ****

Date you need this by: _____

*Please specify if you would like the flag mailed or if you will pick it up: _____ Mail
_____ Pick up

MILITARY PERSONNEL WILL NEED A LETTER OF APPROVAL FROM THE OST VETERAN SERVICES OFFICE (605) 867-5577.

Letter received: YES _____ NO _____ APPROVAL: _____

OST Tribal Flag APPROVED: YES _____ NO _____

STACY L. TWO LANCE – OST SECRETARY

For any questions please contact the OST Secretary's Office at 867-8436. Thank You.