



November 5, 2018

Dear Abilene Area Business/Resident/Organization:

In 2019 we will commemorate the 75<sup>th</sup> anniversary of D-Day, the grand re-opening of the renovated Eisenhower Presidential Museum, as well as the 150<sup>th</sup> anniversary of the City of Abilene's incorporation. Visitors to Abilene frequently comment on the beautiful American flags lining Buckeye and 3<sup>rd</sup> Street. The American flags are one of the many wonderful things that make our community stand out.

To continue this tradition, the City of Abilene's Convention & Visitors Bureau is seeking sponsors for the American flags, which are placed on poles from I-70 along Buckeye to the south city limits and from Buckeye west on 3<sup>rd</sup> Street. The flags are flown from the Eisenhower Marathon weekend through Veterans Day. Because they are displayed for seven months, the flags and poles are more prone to wear and tear. The City of Abilene's Public Works Department replaces them as needed.

Our goal this year is to purchase 200 flags for the 2019 season. The cost of each flag remains the same at \$25, which includes the pole.

Volunteers from the American Legion and VFW attach the flags to the flagpoles. The Public Works Department, Eagle Communications, Abilene Rental, and Linder Electric install the flags on the light poles.

We rely on the community to provide funding for this project and hope you will consider purchasing one or more flags this year. Please complete the enclosed form and return it to the Abilene CVB by January 8, 2019.

Thank you in advance for your support!

Julie Roller  
Director, Abilene CVB



**Abilene Convention & Visitors Bureau  
2019 American Flag Purchase Form**

\_\_\_\_\_ Number of flags and poles I/we wish to purchase @ \$25.00 each

Name or Business: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Payment methods:

1. Enclosed is my check in the amount of \$\_\_\_\_\_

Please make checks payable to: Abilene CVB

OR

2. We now accept credit cards

Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ MasterCard

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Email Address (required for a receipt): \_\_\_\_\_

Signature: \_\_\_\_\_

**Please return this form by January 8, 2019**