Form **8871**
(July 2000)
Department of the Treasury
Internal Revenue Service

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Part I **General Information**

1 Name of organization
EVELYN J. LYNN STATE REPRESENTATIVE

Employer identification number
59-3301922

2 Mailing address (P.O. Box or number, street, and room or suite number)
140 S. ATLANTIC AVE STE 202

City or town, state, and ZIP code
ORMOND BEACH, FL. 32176-6621

3 E-mail address of organization
NONE

4a Name of custodian of records
DAVID EPSTEIN

4b Custodian's address
121 EXECUTIVE CIRCLE
DAYTONA BEACH, FL. 32114-1180

5a Name of contact person
EVELYN J. LYNN

5b Contact person's address
140 S. ATLANTIC AVE. STE 202
ORMOND BEACH, FL 32176-6621

6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
N/A

City or town, state, and ZIP code
N/A

Part II **Purpose**

7 Describe the purpose of the organization
ORGANIZATION FORMED TO INFLUENCE THE ELECTIONS OF EVELYN J. LYNN BY ACCEPTING CONTRIBUTIONS AND MAKING EXPENDITURES.

Part III **List of All Related Entities** (see instructions)

8a Name of related entity	8b Relationship	8c Address
N/A		

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For Paperwork Reduction Act Notice, see page 4.

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Part IV **List of All Officers, Directors, and Highly Compensated Employees** (see instructions)

9a Name	9b Title	9c Address
N/A		

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

David Stuart Eglin
Signature of authorized official

1/28/2000
Date