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
FRIENDS OF BRIAN K. MCHALE

Employer identification number
APPLIED FOR

2 Mailing address (P.O. Box or number, street, and room or suite number)
1604 E. FORT AVENUE

City or town, state, and ZIP code
BALTO. MD 21230

3 E-mail address of organization

91-2089090

4a Name of custodian of records
KAREN L. KOTOFSKI-SMITH

4b Custodian's address
939 LOMBARDEE CIRCLE
GLEN BURNIE MD 21060

5a Name of contact person
Same as above

5b Contact person's address
Same as above

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

City or town, state, and ZIP code

**Part II** Purpose

7 Describe the purpose of the organization

Established and operated as an election campaign account

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

| 8a Name of related entity | 8b Relationship | 8c Address |
|---|---|---|
| | | |

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1221 DEC 03 2000 IRS-OSC
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**Part IV** List of All Officers, Directors, and Highly Compensated Employees (see instructions)

| 9a Name | 9b Title | 9c Address |
|---|---|---|
| BRIAN K MCHALE | CANDIDATE | 1604 E. FORT AVE. BALTO MD 21230 |
| KAREN KOTOFSKI-SMITH | TREASURER | 939 LOMBARDEE CIRCLE GLEN BURNIE MD 21060 |
| SHAWN P MCHALE | CAMPAIGN MANAGER | 1455 TOWSON ST. BALTO MD 21230 |
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Sign Here

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.

▶ Signature of authorized official ▶ 8/1/00 Date

This form was returned to me due to insufficient address.

Thank you for your understanding