

STATEMENT OF ORGANIZATION

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input checked="" type="checkbox"/> Initial Statement	<input type="checkbox"/> Amended Statement

**FILED**  
 SEP 18 2012  
 KRIS W. KOBACH  
 SECRETARY OF STATE

COMMITTEE (PLEASE TYPE OR PRINT)

Name KFPC PAC (Kansas Family Policy Council PAC)

Mailing Address (Street, City, State, Zip Code) 2250 N. Rock Road #118-250, Wichita, KS 67226	Business Telephone ( 316 ) 993-3900
--	--

CHAIRPERSON

Name Michael Pochek	Home Telephone ( <del>316 573</del> ) 239- <del>7864</del> 2427
------------------------	--

Mailing Address (Street, City, State, Zip Code) 10809 West Atlanta Circle, Wichita, KS 67215	Business Telephone ( 316 ) 665-1347
---	--

TREASURER

Name Archie Macias	Home Telephone ( 316 ) 631-1276
-----------------------	------------------------------------

Mailing Address (Street, City, State, Zip Code) 7615 E Champions Ct., Wichita, KS 67226	Business Telephone ( 316 ) 651-7933
--	--

AFFILIATED OR CONNECTED ORGANIZATIONS

Name Kansas Family Policy Council

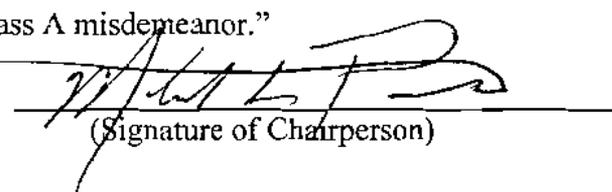
Mailing Address (Street, City, State, Zip Code)  
2250 N. Rock Road #118-250, Wichita, KS 67226

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

SIGNATURE:

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

14 SEP 12  
(Date)



(Signature of Chairperson)