## FILED

SEP 25 2014

## STATEMENT OF ORGANIZATION

FOR POPULATION COMMITTEES AND PARTY COMMITTE	ES
(See Reverse Side For Instructions)	
This is a (check one) Party Committee Political Action Committee	
This is an (check one) Initial Statement Amended Statement	
This is all (check one) Initial Statement / Allended Statement	
COMMITTEE (PLEASE TYPE OR PRINT)	
Name American Comeback Committee Kansas PAC	
Mailing Address (Street, City, State, Zip Code)  1747 Penn. Ave. NW, Suite 250  (202) 372-9115	
Washing ton, DC 2000 6  Halling Address (Street, City, State, Zip Code)  Business Telephone (202) 372-9115  Washing ton, DC 2000 6	
CHAIRPERSON	
Name Philip J. Cox  Home Telephone  () Ma	
Mailing Address (Street, City, State, Zip Code) 1797 Penn. Ave. NW, Suite 250  Business Telephone (202) 372-9115	
Washington, DC 20006 TREASURER	
Name Michael G. Adams Home Telephone	
Mailing Address (Street, City, State, Zip Code) 1747 Penn. Ave. NW, Suite 250 Business Telephone (262) 372-9115	
Washington, DC 20006	
AFFILIATED OR CONNECTED ORGANIZATIONS	
Name American Comeback Committee	
Mailing Address (Street, City, State, Zip Code) 1747 Penn. Ave., NW Swite 250 Washington, DC 20006	
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the con	tributors.
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."  (Signature of/Chairperson)	
Governmental Ethics Commission	Rev.2000