Image# 12963770013						PAGE 1 / 13
FEC FORM 3X	AND	DISBUR	RECEIPT SEMENT	S	ſ	office Use Only
1. NAME OF		PRINT V	Example: If typ	ing, type	12FE4M5	
COMMITTEE (in full)			over the lines.	Ľ	12164113	
Armenian Nationa	al Committee					
ADDRESS (number and str		Sunset Canyon Drive				
▼ Check if differen						
than previously reported. (ACC)	Burbar	k				91501-1101
2. FEC IDENTIFICATIO		CIT	Ύ	S		ZIP CODE
C C00146969				NEW (N) OR	× AMEN (A)	NDED
 4. TYPE OF REPOF (Choose One) (a) Quarterly Reports April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 Year-End Re July 31 Mid- Report (Non Year Only) (Termination (TER) 	eport (Q1) (c) port (Q2) port (Q3) port (YE) Year election (d)	eport le On: Mar	General (30	(12C)	Aug 20 Sep 20 Oct 20 General (12 Special (125 Runoff (30R	(M9) Dec 20 (M12) (M9) Jan 31 (YE) G) Runoff (12R) S)
5. Covering Period	10 1		through	belief it is true	26	2012 omplete.
Type or Print Name of Tr	Pamela Corradi	a Corradi	[Electronical	ly Filed] Da	ate 12	/ D D / Y Y Y Y Y 19 2012
NOTE: Submission of false Office	, erroneous, or in	complete information	n may subject the pe	rson signing thi		penalties of 2 U.S.C. §437g.
Use Only						FEC FORM 3X Rev. 12/2004

12/19/2012 20 : 02

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page	2
	_

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

Armenian National Committee PAC

R	eport Covering the Period: From: 10	M / D D / Y Y Y Y 18 2012 To	11 / D D / Y Y Y Y Y 26 2012
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		2070.11
	(b) Cash on Hand at Beginning of Reporting Period	2252.07	
	(c) Total Receipts (from Line 19)	0	2000
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	2252.07	4070.11
7.	Total Disbursements (from Line 31)	116	1934.04
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2136.07	2136.07
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1986.11	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4993.77	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

X

	ETAILED SUMMARY PAGE	7
FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		
Armenian National Committee PAC		
Report Covering the Period: From:		To: 11 / 26 / Y Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0	2000
(i) Itemized (use Schedule A)	7 7 7	
(ii) Unitemized	0	0
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	0	2000
		0
(b) Political Party Committees	0	
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	0	2000
12. Transfers From Affiliated/Other		
Party Committees	0	0
	0	0
13. All Loans Received	, , ,	
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0	0
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0	0
17. Other Federal Receipts		
(Dividends, Interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))	0	0
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	0	2000
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	0	2000
(Subiraci Line 10(0) 11011 LINE 13)	U 0	2000

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DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
 Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 		
(i) Federal Share	0	
(ii) Non-Federal Share	0	
(b) Other Federal Operating		
Expenditures	116	1934.04
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	116	1934.0
Transfers to Affiliated/Other Party		
Committees	0	
Contributions to Federal Candidates/Committees and Other Political Committees	0	
Independent Expenditures	0	
(use Schedule E) Coordinated Party Expenditures		
(2 U.S.C. §441a(d)) (use Schedule F)	0	
Loan Repayments Made	0	
Loans Made Refunds of Contributions To:	0	
(a) Individuals/Persons Other Than Political Committees	0	
(b) Political Party Committees(c) Other Political Committees	0	
(such as PACs)	0	
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))►	0	
Other Disbursements	0	
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0	
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0	
(b) Federal Election Activity Paid Entirely With Federal Funds	0	
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))►	0	(
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	116	1934.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	116	1934.04

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	0	2000
 Total Contribution Refunds (from Line 28(d)) 	0	0
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	0	2000
 S. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	116	1934.04
 Offsets to Operating Expenditures (from Line 15, page 3) 	0	0
 Net Operating Expenditures (subtract Line 37 from Line 36) 	116	1934.04

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

to report bank charges not previously reported and expenses overlooked

Form/Schedule: Transaction ID:

S	CHEDULE B (FEC Form 3X)			F	OR	LIN	E N	UMBER	:			PAGE	7	OF 13	
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	s) (check onl			nly one)								
		Detailed	Summary Page		×	21k 27		22 23 28a 28b		24	L	25 29	26 30b		
Ar or	ny information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may i ne and addi	not be sold or use ress of any politica	ed by al cor	any nmit	/ pe	rson to s	for the	pur ontrit	pose (of solici	ting (contrib	utions	
\setminus	NAME OF COMMITTEE (In Full)														
	Armenian National Committee PAC	2													
Δ	Full Name (Last, First, Middle Initial)			Date c	of Di	shurse	ment								
	Pamela Corradi							M		D		Y	Y Y	Y	
	Mailing Address 120 N Sunset Canyon Drive							11		1	9		2012		
	City S Burbank	State CA	Zip Code 91501-1101					Trans	sact	ion ID	: SB21	B-3-	В1-е		
	Purpose of Disbursement treasurers fees				001			Amour	nt of	Fach	Disbur	seme	nt this	Period	
	Candidate Name			Cat	egoi					Laon	Bioball			100	
	Office Sought: House Disburser	nent For:		Т	ype		-		-	7					
	Senate President	Primary Other (spe	General												
	State: District:	Other (sper	Retire Debt -												
В.	Full Name (Last, First, Middle Initial)							Date c	of Di	shurse	ment				
								M M				Y	Y Y	Y	
Mailing Address															
	City	State	Zip Code												
	Purpose of Disbursement						-	Amour	nt of	Fach	Disbur	seme	nt this	Period	
	Candidate Name			Category/			Amount of Each Disbursement this Period								
	Office Sought: House Disburser	nent For:		Т	ype		_								
	Senate	Primary	Primary	General											
	State: District:	Other (spe	city) 🔻												
<u>с</u> .	Full Name (Last, First, Middle Initial)							Date c	of Di	shurse	ment				
0.								M M	_	D		Y	Y Y	Y	
	Mailing Address									L.		<u> </u>		_	
	City	State	Zip Code												
Purpose of Disbursement Candidate Name Category Type					-										
				Category/ Type		Amount of Each Disbursement this Period									
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General cify) ▼												
_	State: District:														
s	UBTOTAL of Disbursements This Page (optional)										_		10	0.00	
⊢						-		Ħ	÷				10	0.00	
IΤ	OTAL This Period (last page this line number only)					• 🕨		L		7			10		

Use separate schedule(s)	PAGE	8	OF	13	
for each category of the					
Detailed Summary Page	FOR	LINE	13 OF	FORM	ЗX

IAME OF COMMITTEE (In Full) Armenian National Committee P	PAC	Transaction ID : SC/10-L3
LOAN SOURCE Full Name (Last, First, Armenian Cultural Foundation		Election: 2012
Mailing Address 104 N. Belmont St., #300		General Other (specify) ▼
City Glendale	State CA ZIP Co	ode 91206
Original Amount of Loan	Cumulative Payment To	
1200		0 1200
TERMS Date Incurred	Date Due	Interest Rate Secured:
M 09 / D 02 / Y Y Y Y 09 / D02 / 2009	01 / 01 / Y	1900 0.00 % (apr) Yes ∑ No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	e ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optior	nal)	1200.00
FOTALS This Period (last page in this line	·	
Carry outstanding balance only to LINE 2	Schedule D for this line. If	no Schedule D, carry forward to appropriate line of Summary.
carry outstanding balance only to LINE 3,	Schedule D, 101 this life. If	no schedule D, carry lorward to appropriate line of Summary.

Use separate schedule(s)	PAGE	9	OF	13	
for each category of the					
Detailed Summary Page	FOR	LINE	13 OF	FORM	ЗX

	Detailed Summary Page FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)	Transaction ID : SC/10-L5
Armenian National Committee PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: 2012
Ani Tchaghlasian	Primary
	General
Mailing Address 233 Miller Rd	Other (specify)
City Mahwah State _{NJ}	ZIP Code 07430
Original Amount of Loan Cumulative	Payment To Date Balance Outstanding at Close of This Period
493.77	0 493.77
TERMS Date Incurred	Date Due Interest Rate Secured:
M=M / D=D / Y=Y=Y=Y M=M / D	
	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Sour	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
SUBTOTALS This Period This Page (optional)	♦ 493.77
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for	this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)	PAGE	10	OF	13
for each category of the				
Detailed Summary Page	I FOR	LINE	13 OF	FO

		Detailed Summar		FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)		•	Transact	tion ID : SC/10-L1
Armenian National Committee PAC				
LOAN SOURCE Full Name (Last, First, Midd	lle Initial)		Ele	ection: 2012
Berdj Karapetian	·		\mathbf{X}	Primary
				General
Mailing Address 1623 Ben Lomond Drive				Other (specify)
City Glendale S	State CA ZIP Cod	de 91202-1249		
Original Amount of Loan	Cumulative Payment To	Date	Balance	Outstanding at Close of This Period
1500		0		1500
	7 7			
TERMS Date Incurred	Date Due	Interes	st Rate	Secured:
M M / D D / Y Y Y Y M	01 / D D / Y	1900	0.00	
		1300		₩ (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Cooupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
	0000	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
Maning Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed		
4. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer	,	
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
	211 0000	Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Sche	dule D, for this line. If	no Schedule D, car	ry forward	to appropriate line of Summary.
				-

Use separate schedule(s)	PAGE	11	OF	13
for each category of the				
Detailed Summary Page	FOR	LINE	13 OF	FO

		Detailed Summary Page	
NAME OF COMMITTEE (In Full)		Trans	saction ID : SC/10-L2
Armenian National Committee PAC			
LOAN SOURCE Full Name (Last, First, Middle	Initial)		Election: 2012
Mary Karapetian	initial)		Primary
			General
Mailing Address 1623 Ben Lomond Drive			Other (specify)
City Glendale Stat	te CA ZIP Cod	e 91202-1249	
Original Amount of Loan Cu	mulative Payment To I	Date Bala	nce Outstanding at Close of This Period
1500		0	1500
TERMS			
Date Incurred	Date Due	Interest Rate	
	01	0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to Lo	an Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	-	Amount	
City State Z	IP Code	Guaranteed	
		Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
014		Amount	
City State Z	IP Code	Guaranteed Outstanding:	/3
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Occupation	
	-	Amount	
City State Z	IP Code	Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	_		
City State Z	IP Code	Amount Guaranteed	
		Outstanding:	
SUBTOTALS This Period This Page (optional)			1500.00
TOTALS This Period (last page in this line only)		·····	
Carry outstanding balance only to LINE 3, Schedul	le D, for this line. If n	o Schedule D. carry forw	vard to appropriate line of Summarv.

Use separate schedule(s)	PAGE	12	OF	13
for each category of the				
Detailed Summary Page	FOR	LINE	13 OF	FO

		Detailed Summary Page	
NAME OF COMMITTEE (In Full)		Tran	saction ID : SC/10-L4
Armenian National Committee PAG	C		
LOAN SOURCE Full Name (Last, First, Mi Image Cube Design & Print	ddle Initial)		Election: 2012 Primary General
Mailing Address 3609 1/2 W, Magnolia Blvd.			Other (specify)
City Burbank	State CA ZIP Coo	le 91505	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
300		0	300
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
04 / D1 / Y Y Y Y 2011	M M / D D / Y	1900 0.00	9/ (apr) Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	1 1 1 1 1 1 1 1 17. 1 1 1 1 1 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	1
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	1 1 1 1 1 1 1 1 1 17 1 1 1 1 1 1 1 1
SUBTOTALS This Period This Page (optional)		• [300.00
TOTALS This Period (last page in this line onl	y)	····· [4993.77
Carry outstanding balance only to LINE 3, Sci	hedule D, for this line. If I	no Schedule D, carry forv	vard to appropriate line of Summary.

Image# 12963770025					
DEBTS AND OBLIGATIONS		(Lloo concrete	PAGE 13 OF 13		
		(Use separate schedule(s)	FOR LINE NUMBER:		
		for each numbered line)	(check only one) X 9		
NAME OF COMMITTEE (In Full)				10	
Armenian National Committee PAC					
	0				
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		embezzell	ebt (Purpose): ed funds	
Kindee Durkee					
Mailing Address 1212 S Victory Boulevard					
City State	Zip Code				
Burbank	CA	91502-2551			
Outstanding Balance Beginning This Period			Transacti	on ID : SD9-DEBT34	
1986.11					
	-				
Amount Incurred This Period	Paymer	nt This Period	Outstandir	ng Balance at Close of This Period	
0			0	1986.11	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Naturo of D	ebt (Purpose):	
D. Full Marile (Last, First, Middle Initial) of Debtor				ebi (Fulpose).	
Mailing Address					
City State	Zip Code				
	-				
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Paymor	nt This Period	Outstandir	ng Balance at Close of This Period	
Amount incurred This Period	Fayinei		Outstandi	ig Dalarice at Close of This Feriod	
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):	
Mailing Address					
City	State 2	Zip Code			
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Pavmer	nt This Period	Outstandir	ng Balance at Close of This Period	
				· · · · · · · · · · · · · · · · · · ·	
1) SUBTOTALS This Period This Page (optional)				1986.11	
				1986.11	
2) TOTALS This Period (last page this line number of	oniy)			1900.11	
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only).		. ►	0.00	
				1986.11	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary P	Page (last page only	/) ▶	1300.11	