



# Armenian National Committee

## Political Action Committee

419-A West Colorado Street, Glendale, California 91204 • (818) 500-1919

Ms. Amy Suzanne Reynolds  
Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

Re: Armenian National Committee Political Action Committee  
FEC Identification Number C00146969

Dear Ms. Reynolds:

Enclosed you will find amended reports for the Armenian National Committee Political Action Committee ("ANC-PAC") for the first and second halves of 1993. The amendments comply with the first point in each of your two letters dated July 27, 1994 requesting further information from the ANC-PAC.

In addition, as I explained to you in our telephone conversation approximately one week ago, in response to the second point raised in each of your letters, the ANC-PAC has no staff and no offices at this time. It depends exclusively on donated time from volunteers for the administrative tasks which are performed -- such as preparing invitations for the two or three events we hosted, stuffing envelopes, etc. In addition, we do use a mail box at a related organization, however, you stated that such de minimus matters do not have to be reported to the Commission.

I also wish to inform you that the Treasurer for the ANC-PAC is no longer Kevork Santikian. I am presently serving as Treasurer of the organization, although my term is set to expire soon. Should you need any follow-up information regarding the matters addressed in this letter or the amended reports, please contact me at my office work number, which is (213) 228-0350 or send a letter to the ANC-PAC's address.

Thank you.

Very truly yours,

  
Viken K. Pakradouni

9 4 0 5 7 7 0 1 5

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

Aug 10 1994

1. NAME OF COMMITTEE (in full) <b>ARMENIAN NATIONAL COMMITTEE OF POLITICAL ACTION COMMITTEE</b>	2. FEC IDENTIFICATION NUMBER <b>C00148969</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>419-A WEST COLORADO STREET</b>	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE <b>GLENDALE, CA 91204</b>	

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

Amendment to Lines 20 and 31 per FEC request dated July 27, 1994.

SUMMARY	COLUMN A This Period	COLUMN D Calendar Year-to-Date
5. Covering Period <b>7/1/93</b> through <b>12/31/93</b>		
6. (a) Cash on Hand January 1, 19 <b>93</b>		\$ 147.98
(b) Cash on Hand at Beginning of Reporting Period	\$ 487.99	
(c) Total Receipts (from Line 10)	\$ 7992.50	\$ 12572.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column D)	\$ 8410.79	\$ 12790.48
7. Total Disbursements (from Line 30)	\$ 7961.76	\$ 12271.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 448.73	\$ 448.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3429
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: **Viken K. Pakradouni**

Signature of Treasurer: **Viken Pakradouni**

Date: **8/10/94**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

940307016

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 10/83)

NAME OF COMMITTEE:

MEMORIAL NATIONALS (NATIONALS) POLITICAL ACTION  
(COMMITTEE)

REPORT COVERING PERIOD

FROM 7/1/79

TO: 12/31/79

**I. Receipts**

11. Contributions (other than loans) from:

a. Individuals/Persons Other Than Political Committees:

i. Itemized (use Schedule A) .....

ii. Unitemized .....

iii. Total ..... (add i and ii) >

b. Political Party Committees .....

c. Other Political Committees (such as PACs) .....

d. Total Contributions ..... (add a, b, and c) >

12. Transfers From Affiliated/Other Party Committees .....

13. All Loans Received .....

14. Loan Repayments Received .....

15. Offsets To Operating Expenditures (Refunds, Retains, etc.) .....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....

17. Other Federal Receipts (Dividends, Interest, etc.) .....

18. Transfers from Nonfederal Account for Joint Activity .....

19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >

20. Total Federal Receipts ..... (subtract line 18 from line 19) >

**II. Disbursements**

21. Operating Expenditures:

a. Shared Federal/Non-Federal Activity (from Schedule H-I)

i. Federal Share .....

ii. Non-Federal Share .....

b. Other Federal Operating Expenditures .....

c. Total Operating Expenditures ..... (add a i, a ii, and b) >

22. Transfers to Affiliated/Other Party Committees .....

23. Contributions to Federal Candidates/Committees and Other Political Committees .....

24. Independent Expenditures (use Schedule E) .....

25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) .....

26. Loan Repayments Made .....

27. Loans Made .....

28. Refunds of Contributions To:

a. Individuals/Persons Other Than Political Committees .....

b. Political Party Committees .....

c. Other Political Committees (such as PACs) .....

d. Total Contribution Refunds ..... (add a, b and c) >

29. Other Disbursements .....

30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >

31. Total Federal Disbursements ..... (subtract line 21 d from line 30) >

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from line 11d) .....

33. Total Contribution Refunds (from line 28d) .....

34. Net Contributions (other than loans) (subtract line 33 from 32) .....

35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b) >

36. Offsets to Operating Expenditures (from line 15) .....

37. Total Operating Expenditures ..... (subtract line 36 from 35) >

	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) from:		
a. Individuals/Persons Other Than Political Committees:		
i. Itemized (use Schedule A) .....	66.50	101.00
ii. Unitemized .....	1272.50	2472.50
iii. Total ..... (add i and ii) >	1339.00	2573.50
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contributions ..... (add a, b, and c) >	1339.00	2573.50
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Retains, etc.) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....		
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1339.00	2573.50
20. Total Federal Receipts ..... (subtract line 18 from line 19) >	1339.00	2573.50
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H-I)		
i. Federal Share .....		
ii. Non-Federal Share .....		
b. Other Federal Operating Expenditures .....	1911.76	2321.75
c. Total Operating Expenditures ..... (add a i, a ii, and b) >	1911.76	2321.75
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	62.50	94.50
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees .....		
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contribution Refunds ..... (add a, b and c) >		
29. Other Disbursements .....		
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1974.26	2416.25
31. Total Federal Disbursements ..... (subtract line 21 d from line 30) >	1974.26	2416.25
32. Total Contributions (other than loans) (from line 11d) .....	1339.00	2573.50
33. Total Contribution Refunds (from line 28d) .....	0	0
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	1339.00	2573.50
35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b) >	1911.76	2321.75
36. Offsets to Operating Expenditures (from line 15) .....	0	0
37. Total Operating Expenditures ..... (subtract line 36 from 35) >	1911.76	2321.75

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SCHEDULE A

ITEMIZED RECEIPTS

1-75 to 12-75

Use separate schedules for each category of the detailed Summary Page

PAGE 1 OF 4  
 FOR LINE NUMBER 111

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NAME OF COMMITTEE (in Full)

ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerard Balian 655 Seagull Lane, #A206 Newport Beach, CA 92663		7/12/93 10/5/93	200.00 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert Abkarian 443 Oak Street, #B Glendale, CA 91204	Shawn Steele & Associates	7/13/93 10/5/93	200.00 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karmen Charakhanian 183 Monte Vista, #E Costa Mesa, CA 92627		7/12/93	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harutiune Tchakerian 14408 Oranoid Street VAN NUYS, CA 91401	Burbank city water & power	1/25/93	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VASKEN NASARIAN 311 AVENIDA SANTA ELENA LA HABRA, CA 90631		7/26/93	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Armen Galazorian 16575 E. Echo Hill way Hacienda Heights, CA 91245	Self-employed	7/24/93	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Advisor	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Minasian 6960 Via El Estribo Anaheim, CA 92807		7/27/93	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE OF 214  
FORM LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)  
ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
WALTER KERIAN 5650 WINDSIDE AVE <del>WESTLAKE</del> WESTLAKE VILLAGE, CA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	RETIRED Occupation: RETIRED Aggregate Year-to-Date > \$ 200	7/25/93	200 -
B. Full Name, Mailing Address and ZIP Code GARBI KARAMARDIAN 15071 TOURAIN WAY IRVINE, CA 92714 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200	7/27/93	200 -
C. Full Name, Mailing Address and ZIP Code Viken Melkonian 23 New Castle Lane Laguna Miguel, CA 92677 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200	7/12/93	200 -
D. Full Name, Mailing Address and ZIP Code VARTKES ALAHAYDOIAN 905 KILMARY LANE GLENDALE, CA 91207 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200	7/21/93	200 -
E. Full Name, Mailing Address and ZIP Code VICTORIA MASHIKIAN 12182 RED HILL AVENUE SANTA ANA, CA 92705 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200	7/18/93	200 -
F. Full Name, Mailing Address and ZIP Code ELIZABETH KASPIRIAN 2250 NORTH WINONA L.A., CA, 90027 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 300	7/25/93	200 -
G. Full Name, Mailing Address and ZIP Code HAYOJ TCHAKERIAN 941 JACON WAY PACIFIC PALISADES, CA 90272 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200	7/17/93	200 -

TOTAL of Receipts This Page (optional) 1400  
TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Details, Schedules Page

PAGE 3 OF 4  
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)  
**ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HERAIK GARBOUSHIAN 30684 CALLE DE SUEÑOS RANCHO PALOS VERDES, CA 90274 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 200 -	7/20/93	200 -
B. Full Name, Mailing Address and ZIP Code VICTOR AVEDIAN 3281 WABING CT. STE K OLEANSIDE, CA. 92056 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: <b>PHYSICIAN</b> Aggregate Year-to-Date > \$ 200 -	7/17/93	200 -
C. Full Name, Mailing Address and ZIP Code EGLANTINE HOUSEPIAN 3435 WOODHILL CIR. DIAMOND BAR, CA. 91765 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$ 200 -		200 -
D. Full Name, Mailing Address and ZIP Code NORA HOUSEPIAN 2339 34th Street, unit 59 Santa Monica, CA 90402 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: <b>Law offices of Raffi Dorfman</b> Occupation: <b>Attorney</b> Aggregate Year-to-Date > \$ 300 -	7/21/93	100 -
E. Full Name, Mailing Address and ZIP Code WALTER KARABIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: <b>KARNS &amp; KARABIAN</b> Occupation: <b>Attorney</b> Aggregate Year-to-Date > \$ 500 -	10/7/93	250 -
F. Full Name, Mailing Address and ZIP Code ARA PAPAZIAN 1860 Brooke Lane Fullerton, CA 92633 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: <b>Insurance broker</b> Aggregate Year-to-Date > \$ 200 -	10/14/93	200 -
G. Full Name, Mailing Address and ZIP Code Kenneth Hakimian 4702 Tahan Drive Huntington Beach, CA 92646 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$ 200 -	7/25/93 10/10/93	100 - 100 -

TOTAL of Receipts This Page (optional) **1350 -**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
<b>GEORGE MEKJIAN</b>		10/12/93	200 --
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200 --	
<b>VIKEN BAKRABOUNI</b> 10918 278 Glass Hill Rd. Whittier, CA. 90601		11/29/93 11/24/93	100 -- 1000 --
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-to-Date > \$ 1200 --	
<b>EDWARD MISSEKIAN</b> 1925 15th Avenue S.F., CA 94116	<del>Self-employed</del> <b>Self-employed</b>	12/28/93	1000 --
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Jeweler</b>	Aggregate Year-to-Date > \$ 1000 --	
<b>VE</b>			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

**TOTAL** of Receipts This Page (optional) **2300 --**

**TOTAL** This Period (last page this line number only) **6650 --**

17  
2  
3  
4  
5  
6  
7

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOIL LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ALCO Printing	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/9/93	725.27
KADL PRINTING	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/93	2600.00
USA POST MARKER	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/14/93	360.69
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
L. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... 1885.96

TOTAL This Period (last page this line number only) ..... 1885.96



SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 11 OF 11  
FD-404 LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

ARMENIAN NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement E. Hain Gallegly US HOUSE OF REPS (CA-24)	Date (month, day, year)	Amount of Each Disbursement This Period
Gallegly for Cong.	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/93	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Chris Fisher for US House of Reps (CA-47)	Date (month, day, year)	Amount of Each Disbursement This Period
Cox for Cong.	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/93	1200.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Richard Rohrbaucher - US House of Reps (CA-45)	Date (month, day, year)	Amount of Each Disbursement This Period
Rohrbaucher for Cong.	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/93	1250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Dorrian - US House of Reps (CA-46)	Date (month, day, year)	Amount of Each Disbursement This Period
Dorrian for Cong.	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/93	400.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement D. An Senate Wafford (PA-D)	Date (month, day, year)	Amount of Each Disbursement This Period
Wafford for Senate	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/93	700.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Cox for US House of Reps (CA-27)	Date (month, day, year)	Amount of Each Disbursement This Period
Moorehead for Congress	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/93	1000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Lyons Woolsey - US House of Reps (CA-6)	Date (month, day, year)	Amount of Each Disbursement This Period
Woolsey for Congress	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/22/93	1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	6050.00
TOTAL This Period (last page this line number only)	6050.00

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*J.S.D.*

PREPARER

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