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### FEC FORM 3X

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines ARMENIAN AMERICAN PAC (ARMENPAC) **421 E AIRPORT FREEWAY** ADDRESS (number and street) Check if different than previously **IRVING** ΤX 75206 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00352054 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Special (30S) Post -Election General (30G) Report for the: **Termination Report** (TER) in the 07 2006 ΤX 11 Election on State of 10 0 1 2006 27 2006 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Dr. Sarkis Kechejian Type or Print Name of Treasurer Electronically Filed by Dr. Sarkis Kechejian 03 12 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name ARMENIAN AMERICAN PAC (ARMENPAC) D D <sup>b</sup> D 27 1.0 0 1 2006 1,1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 92053.18 <sup>°</sup>2006 January 1 (b) Cash on Hand at 52389.40 Begining of Reporting Period ..... 2850.00 53256.57 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 55239.40 145309.75 6(a) and 6(c) for Column B) ..... 15140.99 105211.34 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 40098.41 40098.41 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 1900.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

ARMENIAN AMERICAN PAC (ARMENPAC)

0 1 м N 2006 м м 1 1 2<sup>D</sup>7 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2750.00 51300.00 (i) Itemized (use Schedule A) .......... 100.00 1955.00 (ii) Unitemized ..... (iii) TOTAL (add 2850.00 53255.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 2850.00 53255.00 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 1.57 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 2850.00 53256.57 12, 13, 14, 15, 16, 17, and 18(c)) ..... 20. Total Federal Receipts 2850.00 53256.57 (subtract Line 18(c) from Line 19) .....

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

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### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2850.00	53255.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2850.00	53255.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	12769.35
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1.57
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	12767.78

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 19						
	EMIZED RECEIPTS		or each category of the	(check only one)						
11	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12						
			, ,	13 14 15 16 17						
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	nformation copied from such Reports and Statements may not be sold or used be commercial purposes, other than using the name and address of any political c		on for the purpose of soliciting contributions solicit contributions from such committee.						
$\setminus$	NAME OF COMMITTEE (In Full)									
$\rangle$	• • •	MENIAN AMERICAN PAC (ARMENPAC)								
Α.				Date of Receipt						
	Mailing Address 2108 Greenstone Trail			10 16 2006						
	City	State	Zip Code	Transaction ID: SA11A1.7651						
	Carrollton	TX	75010	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.00						
	Name of Employer	Occupation	n	7						
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General	33 -3		1						
	Other (specify) ▼	0 0	500.00							
В.	Full Name (Last, First, Middle Initial) William Kubofcik			Date of Receipt						
	Mailing Address 16 East Shore Road	ddress 16 East Shore Road								
	City	State	Zip Code	Transaction ID: SA11A1.7650						
	Bloomingdale	NJ	07403	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		1000.00						
	Name of Employer Prospect Realty	Occupation Broker	n							
	Receipt For:		e Year-to-Date ▼	_						
	Primary General	riggrogate	real to Bate V	1						
	Other (specify) ▼		1000.00							
<u> </u>	Full Name (Last, First, Middle Initial) Julie Kulhanjian Strauch			Date of Receipt						
	Mailing Address 125 Guilford			10 10 2006						
	City	State	Zip Code	Transaction ID: SA11A1.7649						
	Piedmont	CA	94611	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		1250.00						
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			e Year-to-Date ▼ 1250.00							
s	UBTOTAL of Receipts This Page (optional)			2750.00						
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TOTAL This Period (last page this line number only) .....

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$ \rangle$	NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPA	C)													
$\angle$	E. II Nicoco (Local Elical Middle Letter)														
A.	Full Name (Last, First, Middle Initial) Thomas Allen							Trans Date		on ID isburs	_	-	573		
	Mailing Address PO Box 17766							1 <sup>M</sup> 0	М	<sup>/</sup> 2	26	/ Y	ž	οŏ	3 Y
	City Portland		Zip Code 04112					Amou	int o	f Each	n Dis	burse	ment	t this I	Period
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В.	Joe Baca								of Di	isburs	eme	-			
	Mailing Address 555 Capitol Mall Suite 1	425						1 <sup>M</sup> 0	М	<sup>/</sup> 2	26	/ <b>Y</b>	ž	οŏ	3 <sup>*</sup>
	City Sacramento		Zip Code 95614					Amou	int o	f Each	n Dis	burse		-	Period
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C.	William Delahunt							Trans Date	of Di	isburs	eme				
	Mailing Address 332 Victory Road							1 <sup>M</sup> 0	М	<sup>/</sup> 2	26	/ L	ž	οŏ	3 Y
	City Quincy	State Z	Zip Code 02171					Amou	int o	f Each	n Dis	burse	ment	t this I	Period
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE (check only		PAGE 9/19
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27		24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full)				
ARMENIAN AMERICAN PAC (ARMENPA	C)			
Full Name (Last, First, Middle Initial)  A. Thaddeus McCotter			Transaction ID: SB2 Date of Disbursemen	
Mailing Address PO Box 530788			10 0 9	<sup>Y</sup> 2006 <sup>Y</sup>
City Livonia	State Zip Code MI 48153		Amount of Each Disk	oursement this Period
Purpose of Disbursement House Candidate Contribution				500.00
Candidate Name		Category/ Type		
Office Sought: X House Disburse Senate President	ement For: 2006 Primary X General Other (specify)			
State: MI District: 11				
Full Name (Last, First, Middle Initial)  B. Steven Rothman			Transaction ID: SB2 Date of Disbursemen	nt
Mailing Address PO Box 714			10 26	<sup>y</sup> 2006
City Hackensack	State Zip Code NJ 07602		Amount of Each Disk	oursement this Period
Purpose of Disbursement House Candidate Contribution				1000.00
Candidate Name		Category/ Type		
Office Sought:  X House Senate President State: NJ Disburse	ement For: 2006 Primary X General Other (specify)			
Full Name (Last, First, Middle Initial)  C. Olympia Snowe			Transaction ID: SB2 Date of Disbursemen	
Mailing Address PO Box 2006			10  26	2006
City Portland	State Zip Code ME 04104		Amount of Each Disk	oursement this Period
Purpose of Disbursement Senate Candidate Contribution				1000.00
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$\left.\right\rangle$	NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARME	·		oner communications from such communice
۹.	Full Name (Last, First, Middle Initial) Jason Parris Capizzi, Esq.  Mailing Address 219 Virginia Avenue	3		Transaction ID: SB29.7652 Date of Disbursement  M M M D D D Y Y Y O O 6
	City New Milford	State Zip Code NJ 07646		Amount of Each Disbursement this Period
	Purpose of Disbursement Administrative / Consulting Candidate Name	NJ 07646	Category/	2083.33
	Office Sought: House Dis Senate President	sbursement For: 2006 Primary General X Other (specify)	Type	
3.	Full Name (Last, First, Middle Initial) Jason Parris Capizzi, Esq.			Transaction ID: SB29.7611 Date of Disbursement
	Mailing Address 219 Virginia Avenue	}		10 7 24 7 2006
	City New Milford	State Zip Code NJ 07646		Amount of Each Disbursement this Period
	Purpose of Disbursement office expenses  Candidate Name		Category/ Type	148.17
	Senate President	sbursement For: 2006 Primary General X Other (specify)	Турс	
<b>D.</b>	Full Name (Last, First, Middle Initial) Jason Parris Capizzi, Esq.			Transaction ID: SB29.7601 Date of Disbursement
	Mailing Address 219 Virginia Avenue	•		1 0 M / D 3 0 / Y 2 0 0 6 Y
	City New Milford	State Zip Code NJ 07646		Amount of Each Disbursement this Period
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	Senate President	bursement For: 2006 Primary General X Other (specify)		
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/	ARMENIAN AMERICAN PAC (ARMEN	IPAC)									
	Full Name (Last, First, Middle Initial)				Т	ransa	ction ID:	SB29.7	7599		
۸.	Jason Parris Capizzi, Esq.					ate of	Disburs	ement	Y Y	Y	Υ
	Mailing Address 219 Virginia Avenue				] L	1 1		) 1	2	0 Ó 6	
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a		24 25 28c X 29	26 30b
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NAME OF COMMITTEE (In Full)  ARMENIAN AMERICAN PAC (ARMENPA)	<u> </u>	minitee to so	icit contribu	lions from St	och committee	<del>.</del>
Full Name (Last, First, Middle Initial)  NATALIE GABRELIAN  Mailing Address 82-86 61ST DRIVE				ion ID: SB2		6 <sup>Y</sup>
City MIDDLE VILLAGE	State Zip Code NY 11379		Amount o	of Each Disb	ursement this	Period
Purpose of Disbursement Administration/Consulting Candidate Name		Category/			150	0.00
Senate	ement For: 2006 Primary General Other (specify)	Туре				
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Mailing Address 82-86 61ST DRIVE			11	1 6 D	ŽOŎ	6
City MIDDLE VILLAGE	State Zip Code NY 11379		Amount	of Each Disb	ursement this	Period
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City Newport Coast	State Zip Code CA 92657		Amount	of Each Disb	ursement this	
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ARMENIAN AMERICAN PAC (ARMENPA	AC)										
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LABEL & LISTS INC.				Date M	of D	)isburse		y y	ν.	Y	
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City BELLEVUE	State Zip Code WA 98004			Amo	ount o	of Each	Disburse	emen	t this P	eriod	_
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City BELLEVUE	State Zip Code WA 98004			Amo	ount o	of Each	Disburse	emen	t this P	eriod	_
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SUBTOTAL of Disbursements This Page (optional	)							2	635.2	:0	_
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SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		(check only		:K:	L F	AGE 14	/ 19	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	23 28b	24 280	25 X 29	-	26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam									
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	and address of any political co		ee io s	JIIOIL GOITE	DULIUNS	nom Such	COMMINICE		
ARMENIAN AMERICAN PAC (ARMENPA	C)								
Full Name (Last, First, Middle Initial)						<b>D</b> : SB29.	7660		
A. Shovi Webb Designs				M	of Disbur		Y Y Y	/ ` Y	
Mailing Address 738 Main Street #389				1 0		17	žoč	6	
City Waltham	State Zip Code MA 02451			Amou	int of Ead	ch Disburs	ement thi	s Period	i
Purpose of Disbursement	02.101						26	3.00	
Administrative / Consulting									
Candidate Name		Catego Typo	-						
Office Sought: House Disburse Senate	ement For: 2006  Primary General								
	Other (specify)								
State: District: other									
Full Name (Last, First, Middle Initial)  Shovi Webb Designs						<b>D</b> : SB29.	7609		
					of Disbu	D /	YYY	/ ~ Y	
Mailing Address 738 Main Street #389				11		20	žoč	0 6	
City Waltham	State Zip Code MA 02451			Amou	int of Ead	ch Disburs	ement thi	s Period	i
Purpose of Disbursement	Γ			T L.			21	4.00	
Administration/Consulting Candidate Name	L	Categ	on/						
Candidate Name		Тур	-						
	ment For: 2006								
Senate President X	Primary General Other (specify) ▼								
State: District: other	Canon (opening)								
Full Name (Last, First, Middle Initial)  ROXANNE TASHJIAN					action I	D: SB29.	7656		
Mailian Address 404 D					M / C		Ý ŽOÒ	) 6 Y	
Mailing Address 181 Reservoir Avenue									
City River Edge	State Zip Code NJ 07661			Amou	int of Ead	ch Disburs	ement thi	s Period	1
Purpose of Disbursement Administrative / Consulting		U		<u> </u>			150	0.00	
Candidate Name		Catego Typo							
	ment For: 2006			1					
Senate President X	Primary General Other (specify) ▼								
State: District: other	Carlot (opcony)								
SUBTOTAL of Disbursements This Page (optional)			<b>•</b>				627	7.00	
					-			-	Ī
<b>TOTAL</b> This Period (last page this line number only)									

C	CHEDINE B /EEC Form 2	<b>v</b>		
Use seperate schedule(s) (chooks				NUMBER: PAGE 15/19
IT	EMIZED DISBURSEMENT		21b	
		Detailed Summary Page	27	28a 28b 28c X 29 30b
An	y Information copied from such Reports a	and Statements may not be sold or use	ed by any person t	for the purpose of solicating contributions
or t	or commercial purposes, other than usin	g the name and address of any politic	al committee to so	olicit contributions from such committee
Λ	NAME OF COMMITTEE (In Full)			
17	ARMENIAN AMERICAN PAC (AR	MENPAC)		
$\mathbb{L}$				
A.	Full Name (Last, First, Middle Initial)			Transaction ID: SB29.7653
Λ.	The Armenian Mirror Spectator			Date of Disbursement
	Mailing Address 755 MOUNT AU	BURN STREET		10 0 9 7 2 0 0 6
	City	State Zip Code		Amount of Each Disbursement this Period
	WATERTOWN	MA 02472		
	Purpose of Disbursement			70.00
	Public Relations			
	Candidate Name		Category/	
		B: 1	Туре	
	Office Sought: House Senate	Disbursement For: 2006  Primary General		
	President	X Other (specify) ▼		
	State: District:	other		
	Full Name (Last, First, Middle Initial)			Transaction ID: CD00 7057
B.	THE CONFERENCE GROUP			Transaction ID: SB29.7657 Date of Disbursement
	Mailing Address 254 CHAPMAN			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	TOPKIS BUILDI			
	City NEWARK	State Zip Code DE 19702		Amount of Each Disbursement this Period
	Purpose of Disbursement	13702		86.52
	Office Expenses			
	Candidate Name		Category/	
			Type	
	Office Sought: House	Disbursement For: 2006	•	
	Senate	Primary General		
	President	X Other (specify) ▼		
	State: District:	other		

SUBTOTAL of Disbursements This Page (optional)	•	156.52
TOTAL This Period (last page this line number only)	•	9140.99

#### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE 16 / 19 FOR LINE NUMBER: (check only one)

Χ	9
	10

Excluding Loans		numbered line)	10	
NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC)				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D re-pay of yment	Nature of Debt (Purpose): re-pay of ARMENPAC overpa- yment	
Mailing Address 1316 Campbell Suite 6				
City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period 200.00		Tra	nsaction ID: SD9.6021	
Amount Incurred This Period	Payment This Period	-	ng Balance at Close of This Period	
0.00	0.00		200.00	
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor Mida Giragosian	or Creditor		ebt (Purpose): m 7/26/02 \$3500 ent	
Mailing Address 1316 N. Campbell Suite 6				
City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.5944	
300.00  Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		300.00	
C. Full Name (Last, First, Middle Initial) of Debtor Mida Giragosian	or Creditor	Nature of D Repay of erpaymen	lebt (Purpose): 7/26/02 \$3500 ov- nt.	
Mailing Address 1316 N. Campbell Suite 6				
City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period 200.00		Tra	nsaction ID: SD9.6072	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		200.00	
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	700.00	
2) TOTALS This Period (last page this line number of	only)	_ <b>&gt;</b>		
3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	<b>&gt;</b>		
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	<b>-</b>		

#### PAGE 17 / 19 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) X 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): re-pay of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 ZIP Code City State 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.6542 100.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 100.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): re-pay of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 ZIP Code State City Royal Oak 48067 MΙ Outstanding Balance Beginning This Period Transaction ID: SD9.6543 100.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 100.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): re-pay of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 State ZIP Code City Royal Oak MΙ 48067 Outstanding Balance Beginning This Period Transaction ID: SD9.6544 100.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 100.00 300.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

### **SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS** E

(Use separate schedule(s)

PAGE 18 / 19 FOR LINE NUMBER:

cluding Loans		for each numbered line)	(check only one)	X   9   10
NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC)				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian			Nature of Debt (Purpose): re-pay of 7/26/04 \$3500 overpayment	
Mailing Address 1316 N. Campbell				
Suite 6 City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period	+0007	т,	ransaction ID: SD9.65	82
100.00			ansaction is. 050.00	02
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of	This Period
0.00	0.00			100.00
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor Mida Giragosian	or Creditor		Debt (Purpose): 7/26/02 \$3,500 ment	
Mailing Address 1316 N. Campbell Suite 6				
City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period		Tı	ansaction ID: SD9.75	54
600.00				
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of	This Period
0.00	0.00			600.00
C. Full Name (Last, First, Middle Initial) of Debtor Mida Giragosian	or Creditor	Nature of repay of overpay	Debt (Purpose): 7/26/02 \$3,500 ment	
Mailing Address 1316 N. Campbell Suite 6				
City State Royal Oak MI	ZIP Code 48067			
Outstanding Balance Beginning This Period	40007	Tı	ransaction ID: SD9.75	96
0.00				
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of	This Period
200.00	0.00	)		200.00
1) SUBTOTALS This Period This Page (optional)			900	0.00
2) TOTALS This Period (last page this line number o	nly)	. •	1900	0.00
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	. •		
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	) <b>&gt;</b>		

Image# 2793023	9039
Form/Schedule: SD9 Transaction ID: SD9.6021	re-pay of 7/26/02 \$3500 overpayment.
Form/Schedule: <b>SD9</b> Transaction ID: <b>SD9.5944</b>	ARMENPAC paid Mida \$3500 on 7/26/2002. However, the services were not rendered and thus Mida is repaying ARMENPAC. This 12/31/03 payment of debt represents the first installment.