

**Butzel Long**  
A PROFESSIONAL CORPORATION  
ATTORNEYS AND COUNSELORS

RECEIVED  
FEC MAIL ROOM  
2002 APR 25 P 12:19

JAMES G. DERIAN  
DIRECT DIAL (248) 258-4473  
INTERNET derian@butzel.com

BLOOMFIELD HILLS OFFICE  
100 BLOOMFIELD HILLS PARKWAY, SUITE 200  
BLOOMFIELD HILLS, MI 48304  
(248) 258-1111 Fax (248) 258-1459

April 10, 2002

**CERTIFIED MAIL -**  
**RETURN RECEIPT REQUESTED**

Federal Election Commission  
Report Analysis Division  
999 E. Street, N.W.  
Washington, D.C. 20463

ATTN: Andrea Wilkins

Re: Armenian American Public Affairs Committee (ID CO0355628)  
April 15 Quarterly Report

Dear Andrea:

Enclosed please find the Armenian American Public Affairs Committee's April 15 Quarterly Report. Please do not hesitate to contact me if you have any questions.

Very truly yours,



James G. Derian  
Treasurer

JGD/cmb

Enclosure

**FEC FORM 3X**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL ROOM  
700Z APR 25 12:19

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12 PB4M5

ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE

ADDRESS (number and street)

P. O. BOX 7421

Check if different than previously reported. (ACC)

BLOOMFIELD HILLS

MI

48302-7421

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00355828

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(A) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)
- Election on \_\_\_\_\_ In the State of \_\_\_\_\_

(d) 30-Day POST-Election Report for the:

- General (30G)
  - Runoff (30R)
  - Special (30S)
- Election on \_\_\_\_\_ In the State of \_\_\_\_\_

5. Covering Period

1 01 2002

through

3 31 2002

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 JAMES G. DERIAN

Signature of Treasurer

*James Derian*

Date

4 5 2002

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 Use Only							
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FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

Report Covering the Period: From: **1 1 2002** To: **3 31 2002**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2002</b>	<b>2,437.80</b>	<b>2,437.80</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>2,437.80</b>	<b>2,437.80</b>
(c) Total Receipts (from Line 19)	<b>3,103.85</b>	<b>3,103.85</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<b>5,541.65</b>	<b>5,541.65</b>
7. Total Disbursements (from Line 30)	<b>1,454.53</b>	<b>1,454.53</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>4,087.12</b>	<b>4,087.12</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<b>00</b>	<b>00</b>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<b>00</b>	<b>00</b>

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 (Revised 1/01)

Page 3

Write or Type Committee Name

**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

Report Covering the Period: From: **1 1 2002** To: **3 31 2002**

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		
(i) Itemized (use Schedule A) .....	3,100.00	3,100.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	3,100.00	3,100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	3,100.00	3,100.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	3.85	3.85
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	3,103.85	3,103.85
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	3,103.85	3,103.85

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0 0	0 0	0 0
(ii) Non-Federal Share	0 0	0 0	0 0
(b) Other Federal Operating Expenditures	1 0 3 . 5 0	1 0 3 . 5 0	1 0 3 . 5 0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1 0 3 . 5 0	1 0 3 . 5 0	1 0 3 . 5 0
22. Transfers to Affiliated/Other Party Committees	0 0	0 0	0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees	1 3 5 1 . 0 3	1, 3 5 1 . 0 3	1, 3 5 1 . 0 3
24. Independent Expenditures (use Schedule E)	0 0	0 0	0 0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0 0	0 0	0 0
26. Loan Repayments Made	0 0	0 0	0 0
27. Loans Made	0 0	0 0	0 0
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0 0	0 0	0 0
(b) Political Party Committees	0 0	0 0	0 0
(c) Other Political Committees (such as PACs)	0 0	0 0	0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0 0	0 0	0 0
29. Other Disbursements	0 0	0 0	0 0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	1, 4 5 4 . 5 3	1, 4 5 4 . 5 3	1, 4 5 4 . 5 3
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	1, 4 5 4 . 5 3	1, 4 5 4 . 5 3	1, 4 5 4 . 5 3
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from Line 11(d), page 3)	3, 1 0 0 . 0 0	3, 1 0 0 . 0 0	3, 1 0 0 . 0 0
33. Total Contribution Refunds (from Line 28(d))	0 0	0 0	0 0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3, 1 0 0 . 0 0	3, 1 0 0 . 0 0	3, 1 0 0 . 0 0
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1 0 3 . 5 0	1 0 3 . 5 0	1 0 3 . 5 0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0 0	0 0	0 0
37. Net Operating Expenditures (subtract Line 36 from Line 35)	1 0 3 . 5 0	1 0 3 . 5 0	1 0 3 . 5 0

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 4  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributors or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

**A. TERTZAG, KAYE**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**23675 LORI DRIVE**

City **BROWNSTOWN TOWNSHIP,** State **MI** Zip Code **48134**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Wayne County** Occupation: **Circuit Judge**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **1 0 0 0 0**

Date of Receipt: **1 4 2 0 0 2**

Amount of Each Receipt this Period: **1 0 0 0 0**

**B. YESSAIAN, CHARLES R.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**19230 FRY ROAD**

City **NORTHVILLE,** State **MI** Zip Code **48167**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Self-employed** Occupation: **Lender**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **5 0 0 0 0**

Date of Receipt: **1 1 7 2 0 0 2**

Amount of Each Receipt this Period: **5 0 0 0 0**

**C. ASSARIAN, GARY**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**3050 BLOOMFIELD CROSSING**

City **BLOOMFIELD HILLS,** State **MI** Zip Code **48304**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Professional Lab Management** Occupation: **President**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **5 0 0 0 0**

Date of Receipt: **1 1 7 2 0 0 2**

Amount of Each Receipt this Period: **5 0 0 0 0**

SUBTOTAL of Receipts This Page (optional) **1 5 0 0 0**

TOTAL This Period (last page this line number only) **1 5 0 0 0**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 2 OF 4	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**JAMIAN, GREGORY**

Mailing Address  
**1565 LAKEWOOD ROAD**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Sun Medical Group** Occupation: **Executive**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5 0 0.0 0**

Date of Receipt  
**1 1 7 2 0 0 2**

Amount of Each Receipt this Period  
**5 0 0.0 0**

**B.** Full Name (Last, First, Middle Initial)  
**AZADIAN, EDMOND Y.**

Mailing Address  
**17200 MELROSE**

City **SOUTHFIELD,** State **MI** Zip Code **48370**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Masco Corp.** Occupation: **Manager**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 0.0 0**

Date of Receipt  
**1 1 7 2 0 0 2**

Amount of Each Receipt this Period  
**2 5 0.0 0**

**C.** Full Name (Last, First, Middle Initial)  
**PAPAZIAN, DENNIS**

Mailing Address  
**1935 BLUFF COURT**

City **TROY,** State **MI** Zip Code **48098**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **University of Michigan** Occupation: **Professor**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 0.0 0**

Date of Receipt  
**1 1 8 2 0 0 2**

Amount of Each Receipt this Period  
**2 5 0.0 0**

SUBTOTAL of Receipts This Page (optional) ..... ▶

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 3 OF 4	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17			

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NAME OF COMMITTEE (in Full)  
**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DERIAN, JAMES G.**

Mailing Address  
**41 LAKEVIEW DRIVE**

City **OAKLAND TOWNSHIP,** State **MI** Zip Code **48370**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Butzel Long** Occupation **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5 0 0,0 0**

Date of Receipt  
**2 15 2002**

Amount of Each Receipt this Period  
**5 0 0 0 0**

**B.** Full Name (Last, First, Middle Initial)  
**HAGOPIAN, EDGAR**

Mailing Address  
**850 S. OLD WOODWARD**

City **BIRMINGHAM,** State **MI** Zip Code **48009**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hagopian, Inc.** Occupation **Business Man**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5 0 0,0 0**

Date of Receipt  
**2 15 2002**

Amount of Each Receipt this Period  
**5 0 0 0 0**

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	<b>3 1 0 0 0 0</b>



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 4 OF 4  
(check only one)

<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 18	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENCE ONE MONEY MARKET ACCOUNT**

Date of Receipt  
03 31 2002

Mailing Address  
**2600 W. BIG BEAVER ROAD**

City State Zip Code  
**TROY MI 49084**

FEC ID number of contributing federal political committee.  
**C**

Name of Employer Occupation

Amount of Each Receipt this Period  
**3 8 5**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3 8 5**

**B.** Full Name (Last, First, Middle Initial)

Date of Receipt

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  
**C**

Name of Employer Occupation

Amount of Each Receipt this Period

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**C.** Full Name (Last, First, Middle Initial)

Date of Receipt

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  
**C**

Name of Employer Occupation

Amount of Each Receipt this Period

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

**TOTAL** This Period (set page this line number only) ..... ▶ **3 8 5**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29

PAGE 1 OF 2

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NAME OF COMMITTEE (In Full)  
**ARMENIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

**A. UPTOWN DELI & CATERING**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**28948 Orchard Lake Rd.**

City **Farmington Hills,** State **MI** Zip Code **48334**

Purpose of Disbursement  
**CATERING EXPENSE FOR RECEPTION**

Candidate Name  
**JOE KNOLLENBERG**

Office Sought:  House  Senate  President  
State: District: **11th**

Disbursement For:  Primary  General  
Other (specify) ▼

Date of Disbursement  
**1 25 2002**

Amount of Each Disbursement this Period  
**4,240.00**  
(in kind)

Category/Type  
**0 1 1**

**B. EDGAR HAGOPIAN**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**850 S. OLD WOODWARD**

City **BIRMINGHAM,** State **MI** Zip Code **48009**

Purpose of Disbursement  
**INVITATIONS & MAILING EXPENSE FOR RECEPTION**

Candidate Name  
**JOE KNOLLENBERG**

Office Sought:  House  Senate  President  
State: District: **11th**

Disbursement For:  Primary  General  
Other (specify) ▼

Date of Disbursement  
**1 25 2002**

Amount of Each Disbursement this Period  
**427.03**  
(in kind)

Category/Type  
**0 1 1**

**C. FRIENDS OF SENATOR CARL LEVIN**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**P.O. BOX 92089**

City **WARREN,** State **MI** Zip Code **48092**

Purpose of Disbursement

Candidate Name  
**CARL LEVIN**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
Other (specify) ▼

Date of Disbursement  
**3 23 2002**

Amount of Each Disbursement this Period  
**500.00**

Category/Type  
**0 1 1**

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	<b>1,351.03</b>



Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 4-10-02
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>dmj</i> PREPARER	4-25-02 DATE PREPARED