

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
ARMENIAN AMERICAN PAC (ARMENPAC)

ADDRESS (number and street) 24 Avenue at Port Imperial # 209  
Check if different than previously reported. (ACC) West New York NJ 07093

2. **FEC IDENTIFICATION NUMBER** C00352054  
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 Quarterly 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 (12G)  
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 01 01 2011 through 06 30 2011

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 Jason P Capizzi

Signature of Treasurer Electronically Filed by Jason P Capizzi Date 07 15 2011

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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
ARMENIAN AMERICAN PAC (ARMENPAC)

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2011"/>		1807.32
(b) Cash on Hand at Beginning of Reporting Period .....	1807.32	
(c) Total Receipts (from Line 19) .....	0.00	0.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1807.32	1807.32
7. Total Disbursements (from Line 31) .....	1000.00	1000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	807.32	807.32
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	1900.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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**

Write or Type Committee Name

ARMENIAN AMERICAN PAC (ARMENPAC)

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(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 33, page 5) .....	0.00	0.00
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 37, page 5) .....	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.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (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)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	0.00

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1000.00	1000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1000.00	1000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1000.00	1000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	1000.00

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 .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1000.00	1000.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1000.00	1000.00

# 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)

PAGE 6 / 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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 PAC (ARMENPAC)

A.

Full Name (Last, First, Middle Initial)  
Strategic Counsel Group LLC

Transaction ID: SB21B.4267

Date of Disbursement

Mailing Address 24 Avenue at Port Imperial # 209

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	1

City State Zip Code  
West New York NJ 07093

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
filing FEC reports

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

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

1000.00

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

1000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line) PAGE 7 / 9  
 FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)  
 ARMENIAN AMERICAN PAC (ARMENPAC)

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">300.00</div>	<b>Transaction ID: SD9.4130</b>
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">300.00</div>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">200.00</div>	<b>Transaction ID: SD9.4140</b>
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">200.00</div>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">200.00</div>	<b>Transaction ID: SD9.4133</b>
Amount Incurred This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>	Payment This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">200.00</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<div style="border: 1px solid black; width: 100%; text-align: center; padding: 2px;">700.00</div>
<b>2) TOTALS</b> This Period (last page this line number only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 / 9	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
ARMENIAN AMERICAN PAC (ARMENPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID:</b> SD9.4134	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID:</b> SD9.4135	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City State ZIP Code Royal Oak MI 48067	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID:</b> SD9.4136	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	300.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
ARMENIAN AMERICAN PAC (ARMENPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City Royal Oak State MI ZIP Code 48067	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID:</b> SD9.4137	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City Royal Oak State MI ZIP Code 48067	

Outstanding Balance Beginning This Period 600.00	<b>Transaction ID:</b> SD9.4138	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mida Giragosian	Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment
Mailing Address 1316 N. Campbell Suite 6	
City Royal Oak State MI ZIP Code 48067	

Outstanding Balance Beginning This Period 200.00	<b>Transaction ID:</b> SD9.4139	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	900.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	1900.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	1900.00