Image# 29992434173

FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
ADDRESS (number and s	reet)	· · · · · · · · · · · · · · · · · · ·
X (Check if address is changed)	Burbank	 CA91502
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI (Check if address is changed)	ADDRESS (Please provide only one e-mail address) matthew@durkeeandassociates.com	
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
(Check if address is changed)		
2. DATE M M 0 7	/ D D / Y Y Y Y 14 2009	
3. FEC IDENTIFICA	C C00146969	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of my knowledge and belief it is true, correct and	d complete
Type or Print Name of ⁻	reasurer Kinde Durkee	
Signature of Treasurer	Electronically Filed by Kinde Durkee	Date 07 / 14 / Y Y Y Y
NOTE: Submission of fal	e, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	

Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FEC	Form 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE (Check One)	
Candidate	Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comr	nittee:	
(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party
Political Ac	tion Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundra	aising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two	or more political

(h) In this committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	FEC ID number	C
2.	FEC ID number	C
3.	FEC ID number	C
4.	 FEC ID number	C

6.

7.

8.

Treasurer

Form 1 (Revised 02/2009)

Write or Type Committee Name

ARMENIAN NATIONAL	COMMITTEE PAC		
Name of Any Connected Org	anization, Affiliated Committee, Joint Fund	aising Representative, or Lea	adership PAC Sponsor
None			
Mailing Address	None		
			00000] _ [_ , _ , _]
	CITY	STATE 🛦	ZIP CODE
Relationship: X Connected Organization	Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor
possession of Committee		optional), and position o	f the person in
Full Name	Jurkee 		
Mailing Address	1212 S. Victory Blvd.		
	Burbank	CA	91502 _
Title or Position ♥	CITY A	STATE	
Treasurer		Telephone number 818	2600669
	and address (phone number optional) designated agent (e.g., assistant treasu		mittee; and the
Full Name of Treasurer Kinde	Durkee		
Mailing Address	1212 S. Victory Blvd.		
	Burbank	CA	91502 _
Title or Position ♥	CITY A	STATE	

0669

818

Telephone number

260

FEC Form 1 (Revi	sed 02/2009)		Page 4
Full Name of Designated Agent	Armen Martin		
Mailing Address	1212 S. Victory Blvd.		
	Burbank	CA	91502 –
Title or Position ▼	CITY A	STATE A	ZIP CODE
Princip	pal	elephone number	8915038
Banks or Other Deposi safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. rst California Bank	he committee deposits funds, he	olds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc.	he committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. rst California Bank	he committee deposits funds, he	blds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. irst California Bank 1880 Century Park East 1880 Los Angeles		
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. rst California Bank 1880 Century Park East Los Angeles CITY A		90067 _ L , , , , , , , , , , , , , , , , , ,
safety deposit boxes or n Name of Bank, Depositor Fi Mailing Address	naintains funds. ry, etc. rst California Bank 1880 Century Park East Los Angeles CITY A		90067 _ L , , , , , , , , , , , , , , , , , ,
safety deposit boxes or n Name of Bank, Depositor Fi Mailing Address	naintains funds. ry, etc. rst California Bank 1880 Century Park East Los Angeles CITY A		90067 _ L , , , , , , , , , , , , , , , , , ,
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safety deposit boxes or n Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. rst California Bank 1880 Century Park East Los Angeles CITY A		