Image# 12962974246 PAGE 1 / 11

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									(	Office Us	e Only	
1.	NAME OF COMMITTEE (in full)		E OR PRI	NT ▼		ole: If typii ne lines.	ng, type	12FE	4M5			
A	rmenian Nationa	al Comm	ittee PA	ΛC								
AD	DRESS (number and st		20 N Sunse	t Canyon Drive								
r	Check if differer	nt L										
L	than previously reported. (ACC)	L	Burbank					CA		91501	-1101	
2.	FEC IDENTIFICATI	ON NUMB	ER ▼	CITY	_			STATE A		2	ZIP COI	DE 🛦
	C C00146969			3. IS RE	THIS PORT		NEW N) <b>OR</b>		AME (A)	NDED		
4.	TYPE OF REPOR	RT (	(b) Monthly Report	1002	0 (M2)		May 20 (M5)		Aug 20	(M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports	S:	Due On	Mar 2	20 (M3)	-	Jun 20 (M6)		Sep 20			Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Re	anort (O1)		Apr 20	0 (M4)	Ш,	Jul 20 (M7)		Oct 20	(M10)	ᆜ	Jan 31 (YE)
	July 15 Quarterly Re		PF	-Day E-Election		imary (12F		-	neral (12	,	Ш	Runoff (12R)
	October 15		Re	port for the:	Co	onvention (	12C)	Spe	ecial (12	S)		
	Quarterly Re January 31 Year-End Re			Election	on	M M /	D   D /	Y	Y		in the State of	
	July 31 Mid- Report (Non Year Only) (	-election	PC	-Day PST-Election port for the:	X G	eneral (300	ā)	Rur	noff (30F	₹)		Special (30S)
	Termination (TER)	Report	ne	Election	on	M M /	06	2012			in the State of	CA
5.	Covering Period	10	18	2012	Y	through	M M	26	D /	201		
l ce	ertify that I have exam	ined this R	eport and	to the best of m	ny knowle	edge and I	belief it is tr	ue, corre	ct and o	complete	ə.	
	e or Print Name of Tr		amela Corr		-							
Sig	nature of Treasurer	Pamela Co	orradi		[E	lectronically	y Filed] [	Date	M M M	06	D /	2012
NO.	TE: Submission of false	e, erroneous	, or incomp	lete information	may subje	ect the per	son signing t	his Repor	t to the	penaltie	s of 2 L	J.S.C. §437g.
_	Office Use										<b>FOR</b> ev. 12/20	M 3X
	Only				ı		I				/ _ (	

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

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name Armenian National Committee PAC 10 18 2012 26 2012 Report Covering the Period: 11 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2070.11 January 1, 2012 (b) Cash on Hand at 2602.07 Beginning of Reporting Period..... 2000 0 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2602.07 4070.11 6(a) and 6(c) for Column B)..... 1468.04 0 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 2602.07 2602.07 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 1986.11 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 4993.77 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. 06/2004)

Write or Type Committee Name

		N 1 4 1		$\neg$
ΔrmΔi	าเวท	National	Committee	$D\Delta U$
	IIaII	INALIUHAI		$I \land C$

R	eport Covering the Period: From: 10		o: 11 26 / Y Y Y Y Y Y		
	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		2000		
	(i) Itemized (use Schedule A)	0	2000		
	(ii) Unitemized(iii) TOTAL (add	0	0		
	Lines 11(a)(i) and (ii)▶	0	2000		
	(b) Political Party Committees	0	0		
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry				
12	Totals to Line 33, page 5)  Transfers From Affiliated/Other	0	2000		
12.	Party Committees	0	0		
13.	All Loans Received	0	0		
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0		
16.	(Carry Totals to Line 37, page 5)	0	0		
	to Federal Candidates and Other Political Committees	0	0		
	Other Federal Receipts (Dividends, Interest, etc.)	0	0		
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0	0		
	(b) Levin Funds (from Schedule H5)	0	0		
	(c) Total Transfers (add 18(a) and 18(b))	0	0		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0	2000		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0	2000		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B	
Operating Expenditures:	Iotal IIIIs Period	Calendar Year-to-Date	
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0	0	
,			
(ii) Non-Federal Share	0	0	
(b) Other Federal Operating		4400.04	
Expenditures(c) Total Operating Expenditures	0	1468.04	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0	1468.04	
Transfers to Affiliated/Other Party	7		
Committees	0	0	
Contributions to Federal Candidates/Committees			
and Other Political Committees	0	0	
Independent Expenditures			
(use Schedule E) Coordinated Party Expenditures	0	0	
(2 U.S.C. §441a(d)) (use Schedule F)	0	0	
(use Schedule F)		0	
Loan Repayments Made	0	0	
Loan Hopaymonto Mado			
Loans Made	0	0	
Refunds of Contributions To: (a) Individuals/Persons Other			
Than Political Committees	0	0	
(b) Political Party Committees	0	0	
(c) Other Political Committees	0	0	
(such as PACs)	0		
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0	0	
Other Disbursements	0	0	
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6) (i) Federal Share	0	0	
(i) i ederal onare			
(ii) "Levin" Share	0	0	
(b) Federal Election Activity Paid Entirely			
With Federal Funds	0	0	
(c) Total Federal Election Activity (add			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0	
Total Dishursamenta (cdd Lines Od/s) CC			
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0	4400.04	
20, 24, 20, 20, 21, 20(u), 29 and 30(c))	0	1468.04	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	0	1468.04	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-	COLUMN A	COLUMN B
penditures	Total This Period	Calendar Year-to-Date
3. Total Contributions (other than loans)		
(from Line 11(d), page 3)	0	2000
4. Total Contribution Refunds		
(from Line 28(d))	0	0
5. Net Contributions (other than loans)		
(subtract Line 34 from Line 33)	0	2000
6. Total Federal Operating Expenditures		
(add Line 21(a)(i) and Line 21(b))▶	0	1468.04
7. Offsets to Operating Expenditures		
(from Line 15, page 3)	0	0
8. Net Operating Expenditures		1,1,1,1,1
(subtract Line 37 from Line 36)	0	1468.04

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

PAGE 6 OF 11

FOR LINE 13 OF FORM 3X

	Detailed Suffilliary Page
IAME OF COMMITTEE (In Full) Armenian National Committee PAC	Transaction ID : SC/10-L3
A THOMAS I TAGONAL COMMITTACO I MO	
LOAN SOURCE Full Name (Last, First, Middle Initial) Armenian Cultural Foundation	Election: 2012  Primary  General
Mailing Address 104 N. Belmont St., #300	Other (specify)
City Glendale State CA ZIP Coc	de 91206
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
1200	0 1200
TERMS Date Incurred Date Due	Interest Rate Secured:
	1900 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If I	no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 7 OF 11

		Detailed Si	ummary Page	FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full) Armenian National Committee PA	/C		Transa	ction ID : SC/10-L5
LOAN SOURCE Full Name (Last, First, Mani Tchaghlasian	Middle Initial)			Election: 2012  Primary  General
Mailing Address 233 Miller Rd				Other (specify) ▼
City Mahwah	State NJ ZIP Cod	de 07430		
Original Amount of Loan	Cumulative Payment To	Date	Baland	e Outstanding at Close of This Period
493.77			0	493.77
TERMS  Date Incurred	Date Due		Interest Rate	Secured:
05 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M 01 / D 01 / Y	1900	0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source			
Full Name (Last, First, Middle Initial)		Name of Em	ployer	
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Em	ployer	
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Em	ployer	
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Em	ployer	
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optiona	ıl)			493.77
OTALS This Period (last page in this line o	nly)		•	
Carry outstanding balance only to LINE 3, S	schedule D, for this line. If	no Schedule	D, carry forwa	rd to appropriate line of Summary.

### SCHEDULE C (FEC Form 3X)

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

PAGE 8 OF 11

FOR LINE 13 OF FORM 3X

	Detailed Summary Page
AME OF COMMITTEE (In Full)	Transaction ID : SC/10-L1
Armenian National Committee PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: 2012
Berdj Karapetian	Primary
	General
Mailing Address 1623 Ben Lomond Drive	Other (specify) ▼
City Glendale State CA	ZIP Code 91202-1249
Original Amount of Loan Cumulative Pa	yment To Date  Balance Outstanding at Close of This Period
1500	0 1500
TERMS  Date Incurred	Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D	
11 01 2010 01 01	1900 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amazint
City State ZIP Code	Amount Guaranteed
Grate Zir Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Amount Guaranteed
	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
5.00	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	A
City State ZIP Code	Amount Guaranteed
Only State Zii Sode	Outstanding:
SUBTOTALS This Period This Page (optional)	1500.00
-3- (-1/	
OTALS This Period (last page in this line only)	<b>&gt;</b>
Carry outstanding balance only to LINE 3, Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 9 OF 11

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) Armenian National Committee PAC  LOAN SOURCE Full Name (Last, First, Middle Initial) Mary Karapetian  Mailing Address 1623 Ben Lomond Drive  City Glendale State CA ZIP Cod Original Amount of Loan Cumulative Payment To I	Transaction ID : SC/10-L2  Election: 2012  Primary General Other (specify) ▼  Date Balance Outstanding at Close of This Period
LOAN SOURCE Full Name (Last, First, Middle Initial)  Mary Karapetian  Mailing Address 1623 Ben Lomond Drive  City Glendale State CA ZIP Cod  Original Amount of Loan Cumulative Payment To I	Primary General Other (specify)  Date  Balance Outstanding at Close of This Period  0  1500
Mailing Address 1623 Ben Lomond Drive  City Glendale State CA ZIP Cod Original Amount of Loan Cumulative Payment To I	Primary General Other (specify)  Date  Balance Outstanding at Close of This Period  0  1500
City Glendale State CA ZIP Cod Original Amount of Loan Cumulative Payment To I	Date Balance Outstanding at Close of This Period
Original Amount of Loan Cumulative Payment To I	Date Balance Outstanding at Close of This Period  0 1500
1500	0 1500
TERMS  Date Incurred  Date Due	Interest Rate Secured:
	1900 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Carry outstanding balance only to LINE 3, Schedule D, for this line. If n	<b>&gt;</b>

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

PAGE 10 OF 11

FOR LINE 13 OF FORM 3X

		Detailed Suffilliary	y rage
AME OF COMMITTEE (In Full)			Transaction ID : SC/10-L4
Armenian National Committee PA	AC .		
LOAN SOURCE Full Name (Last, First, N	Middle Initial)		Election: 2012
Image Cube Design & Print			Primary
			General
Mailing Address 3609 1/2 W, Magnolia Blvd			Other (specify) ▼
City Burbank		de 91505	
Original Amount of Loan	Cumulative Payment To	Date	Balance Outstanding at Close of This P
300		0	300
TERMS  Date Incurred	Date Due	Interes	st Rate Secured:
M M / D D / Y Y Y Y	M M / D D / Y	riteres	
04 01 2011	01 01	1900	0.00 % (apr) Yes
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	
City	ZII Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed	
,		Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed	
,		Outstanding:	7
SUBTOTALS This Period This Page (optional	ıl)	<b>&gt;</b>	300.00
TOTALS This Period (last page in this line o	nly)	<b>&gt;</b>	4993.77
Carry outstanding balance only to LINE 3, S	schedule D, for this line. If	no Schedule D, carr	ry forward to appropriate line of Summa

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

**Excluding Loans** 

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

FOR LINE NUMBER: (check only one)

PAGE

X	9
	10

11

OF

NAME OF COMMITTEE (In Full) Armenian National Committee PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): -embezzelled funds Kindee Durkee Mailing Address 1212 S Victory Boulevard State Zip Code Burbank 91502-2551 Transaction ID: SD9-DEBT34 Outstanding Balance Beginning This Period 1986.11 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0 1986.11 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 1986.11 1) SUBTOTALS This Period This Page (optional)..... 1986.11 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...... 1986.11 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)