Image# 12970844493 PAGE 1 / 13

#### **FEC** FORM 3X

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

1. NAME OF COMMITTEE (in full)  Armenian National Committee PAC  ADDRESS (number and street)  TYPE OR PRINT ▼ Example: If typing, type over the lines.  12FE4M5  12FE4M5	
Check if different	
than previously reported. (ACC)  Burbank  CA  91501-1101	
2. <b>FEC IDENTIFICATION NUMBER ▼</b> CITY ▲ STATE ▲ ZIP CODE ▲	
C C00146969 3. IS THIS REPORT X (N) OR AMENDED (A)	
Due On: Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 5	20 (M12)
(a) Quarterly Reports.	nly) 1 (YE)
X April 15 Ouarterly Report (O1)	
July 15 Quarterly Report (Q2)  (C) 12-Day Primary (12P) General (12G) Runof PRE-Election Report for the: Convention (12C) Special (12S)	f (12R)
October 15 Quarterly Report (Q3)	
January 31 Year-End Report (YE)  Election on  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
July 31 Mid-Year Report (Non-election Year Only) (MY)  (d) 30-Day  POST-Election Report for the:	al (30S)
Termination Report (TER)  Election on  State of	
5. Covering Period 01 01 2012 through 03 31 2012	
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 Pamela Corradi	
Signature of Treasurer  Pamela Corradi  [Electronically Filed] Date  MMM / 03 / 201	
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	<u></u>

O FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
Armenian National Committee PAC		
Report Covering the Period: From: 01	M / 01 / Y Y Y Y Y Y Y TO:	03 / 31 / 2012
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		5177.77
(b) Cash on Hand at Beginning of Reporting Period	5177.77	
(c) Total Receipts (from Line 19)	2000	2000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7177.77	7177.77
7. Total Disbursements (from Line 31)	498	498
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6679.77	6679.77
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	1986.11	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	4993.77	
This committee has qualified as a multican	didate committee. (see FEC FORM 1M)	
F	or 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

		NI 41 I		$\neg$
ΔrmΔi	กเฉก	National	Committee	$D\Delta U$
	ınan	Hallollai		$I \land C$

Report Covering the Period: From:	01 01 2012 To:	03 31 2012
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:	<u> </u>	
(a) Individuals/Persons Other		
Than Political Committees	2000	2000
(i) Itemized (use Schedule A)	2000	2000
<i>4</i> 0		
(ii) Unitemized	0	0
(iii) TOTAL (add	2000	2000
Lines 11(a)(i) and (ii)▶	2000	2000
(b) Political Party Committees	0	0
(c) Other Political Committees	7	7 7
(such as PACs)	0	0
(d) Total Contributions (add Lines	7	7
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	2000	2000
12. Transfers From Affiliated/Other		
Party Committees	0	0
•	7	
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0	0
16. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0	0
17. Other Federal Receipts		
(Dividends, Interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Fund	ds	
(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))	2000	2000
, -, , -, -, -, -, -, -, -, -, -, -, -,		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	2000	2000
, , , , , , , , , , , , , , , , , , , ,		7

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(a) A	ting Expenditures: Ilocated Federal/Non-Federal ctivity (from Schedule H4)	roar ring renou	Calendal Tear-to-Date
A (i		0	0
(1,	Todoral Charo		
•	) Non-Federal Share	0	0
	ther Federal Operating		
	xpenditures	498	498
	otal Operating Expenditures	498	498
	add 21(a)(i), (a)(ii), and (b))▶ ers to Affiliated/Other Party	490	430
	ittees	0	0
. Contri	outions to al Candidates/Committees		
and O	ther Political Committees	0	0
Indepe	endent Expenditures		
(use S	Schedule E)	0	0
(2 U.S	nated Party Expenditures .C. §441a(d))	0	
(use S	Schedule F)		0
Loon	Panaymenta Mada	0	0
Loan	Repayments Made	7	
Loans	Made	0	0
Refun	ds of Contributions To:	7	
(a) Ir T	dividuals/Persons Other han Political Committees	0	0
(b) P	olitical Party Committees	0	0
` '	ther Political Committees		
(8	such as PACs)	0	0
(d) To	otal Contribution Refunds		
` '	add Lines 28(a), (b), and (c))	0	0
(-	2.1100 20(4), (5), 4.14 (6),		7
Other	Disbursements	0	0
		7	7
Federa	al Election Activity (2 U.S.C. §431(20))		
. ,	llocated Federal Election Activity		
	rom Schedule H6)	0	0
(1	Federal Share		
(i	) "Levin" Share	0	0
	ederal Election Activity Paid Entirely	7 7	
(5)	With Federal Funds	0	0
(c) To	otal Federal Election Activity (add		
L	ines 30(a)(i), 30(a)(ii) and 30(b))▶	0	0
	Disbursements (add Lines 21(c), 22,		
23, 24	, 25, 26, 27, 28(d), 29 and 30(c))	498	498
Total I	Federal Disbursements		
	act Line 21(a)(ii) and Line 30(a)(ii)		
	ine 31)	498	498
5111 L			7

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-

penditures

(from Line 11(d), page 3) .....

(from Line 28(d)).....

(subtract Line 34 from Line 33) .....

(add Line 21(a)(i) and Line 21(b)) ........▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36) .....

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 2000 2000 0 2000 2000 498 498 0 498 498

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

FOR LINE NUMBER: Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	6	OF	13		
(che	ck only	or	ıe)					
X	11a		11b		11c	12		
	13		14		15	16	,	17

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 t	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Armenian National Committee	PAC	
Full Name (Last, First, Middle Initial) Frank Melkonian		Date of Receipt
Mailing Address 815 Saint Katherine Dr.		02 02 2012
City La Canada	State Zip Code CA 91011-4122	Transaction ID : SA11AI-41-38-c
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	2000
Name of Employer	Occupation	
Closet World	owner	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2000	
Full Name (Last, First, Middle Initial)	•	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).	•	2000.00
TOTAL This Period (last page this line number	er only)	2000.00

#### S ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 7 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	´	
	Detailed Summary Page	X 21b	22	23 24 25 26
Г		27	28a	28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
Armenian National Committee PAC				
Full Name (Last, First, Middle Initial)				
A. Pamela Corradi			Date of D	visbursement
Mailing Address 120 N Sunset Canyon Drive			02	01 2012
City	State Zip Code		Transaci	tion ID : SB21B-3-48-e
Burbank	CA 91501-1101		Transac	
Purpose of Disbursement Treasurer			Amount of	f Each Disbursement this Period
Candidate Name		Category/ Type		275
Office Sought: House Disburser	nent For:	.,,,,,		,
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Data of D	lighurgament
B. Pamela Corradi				isbursement
Mailing Address 120 N Sunset Canyon Drive			03	02 2012
City	State Zip Code		Transac	etion ID : SB21B-3-49-e
Burbank	CA 91501-1101		Transac	MON ID . OB2 IB-3-43-6
Purpose of Disbursement treasurer			Amount of	f Each Disbursement this Period
Candidate Name		Category/ Type		175
Office Sought: House Disburser	nent For:	1,700		, , , , , , , , , , , , , , , , , , , ,
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			D-4 ( D	Pala
C.			Date of D	isbursement
Mailing Address			M = M	/ D D / Y Y Y Y
City	State Zip Code			
Purpose of Disbursement				
		1 []	Amount of	f Each Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	nent For:			
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				450.00
			-	
TOTAL This Period (last page this line number only)				450.00

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

PAGE 8 OF 13

		Detailed S	Summary Page	FOR LINE	E 13 OF FORM 3X
AME OF COMMITTEE (In Full) Armenian National Committee PA	AC		Trans	action ID : SC/10	)-L3
LOAN SOURCE Full Name (Last, First, Mark Armenian Cultural Foundation	Middle Initial)			Election: 2012  Primary  General	
Mailing Address 104 N. Belmont St., #300				Other (spec	ify) 🔻
City Glendale	State CA ZIP Cod	de 91206			
Original Amount of Loan	Cumulative Payment To	Date	Balan	ce Outstanding a	at Close of This Period
1200			0		1200
TERMS  Date Incurred	Date Due		Interest Rate		Secured:
09 / 02 / Y 2009	01 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	nployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Em	nployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Em	nployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Em	nployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:		,	
SUBTOTALS This Period This Page (optiona	l)		· [.		1200.00
OTALS This Period (last page in this line or	nly)		. · ·	.,	7
Carry outstanding balance only to LINE 3, S	chedule D, for this line. If	no Schedule	D, carry forwa	ard to appropria	te line of Summary.

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

PAGE 9 OF 13

FOR LINE 13 OF FORM 3X

	Detailed Summary Page 1 On EINE 13 Of 1 Only 3X
AME OF COMMITTEE (In Full) Armenian National Committee PAC	Transaction ID : SC/10-L5
Anneman National Committee FAC	
LOAN SOURCE Full Name (Last, First, Middle Initial) Ani Tchaghlasian	Election: 2012  Primary  General
Mailing Address 233 Miller Rd	Other (specify) ▼
City Mahwah State NJ ZIP Coc	de <sub>07430</sub>
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
493.77	0 493.77
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 r	<b>&gt;</b>

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

PAGE 10 OF 13
FOR LINE 13 OF FORM 3X

	Detailed Sulfilliary 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 Pay	ment To Date  Balance Outstanding at Close of This Period
1500	0 1500
TERMS Date Incurred Date Incurred	ate Due Interest Rate Secured:
Mam / Dab / Yayayay Mam / Dab	
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
	Amazinak
City State ZIP Code	Amount Guaranteed
5, State 211 500e	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Amount Guaranteed
State Zii Sode	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Account
City State ZIP Code	Amount Guaranteed
State ZIF Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
City State ZIP Code	Outstanding:
	·
UBTOTALS This Period This Page (optional)	1500.00
(	
OTALS This Period (last page in this line only)	<b>&gt;</b>
Carry outstanding balance only to LINE 3, Schedule D, for this	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 11 OF 13
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  0 1500  Interest Rate Secured: 1900  1900  Yes  No
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  Interest Rate Secured:
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  Interest Rate Secured:
City Glendale State CA ZIP Cod Original Amount of Loan Cumulative Payment To I	Date Balance Outstanding at Close of This Period  0 1500  Interest Rate Secured:
Original Amount of Loan Cumulative Payment To I	Date Balance Outstanding at Close of This Period  0 1500  Interest Rate Secured:
1500	Interest Rate Secured:
	Interest Rate Secured:
	1000
TERMS  Date Incurred  Date Due	1000
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 12 OF 13
FOR LINE 13 OF FORM 3X

		Detailed Suffiffacy i	rage   . or. == .o or . or or.
AME OF COMMITTEE (In Full)	240		Fransaction ID : SC/10-L4
Armenian National Committee F	AC		
LOAN SOURCE Full Name (Last, First	, Middle Initial)		Election: 2012
Image Cube Design & Print			Primary
			General
Mailing Address 3609 1/2 W, Magnolia Blv	vd.		Other (specify)
City Burbank		ode 91505	
Original Amount of Loan	Cumulative Payment To	Date	Balance Outstanding at Close of This Period
300		0	300
TERMS  Date Incurred	Date Due	Interest	Rate Secured:
Date incurred	Date Due	V V V	
04 01 2011	01 01	1900	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if ar	ny) to Loan Source		
1. Full Name (Last, First, Middle Initial)	)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		·	
City	2 7 D Codo	Amount	
City Stat	e ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option	nal)	<b>&gt;</b>	300.00
TOTALS This Period (last page in this line	only)	<b>&gt;</b>	4993.77
Carry outstanding balance only to LINE 3,	Schedule D, for this line. If	no Schedule D, carry	forward to appropriate line of Summary.

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

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

**X** 9 10

13

		Hamborod iiio)	10	
NAME OF COMMITTEE (In Full) Armenian National Committee PAC				
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose	Nature of Debt (Purpose):	
Kindee Durkee		-embezzelled funds		
Mailing Address 1212 S Victory Boulevard				
City State	Zip Code			
Burbank	CA 91502-2551			
Outstanding Balance Beginning This Period		Transaction ID : SD9-	DEBT34	
1986.11				
Amount Incurred This Period	Payment This Period	Outstanding Balance a	at Close of This Period	
0		0	1986.11	
B 5    M	0 10			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose	e):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Period  Amount Incurred This Period	Payment This Period	Outstanding Balance a	at Close of This Period	
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of Debt (Purpose	<del>)</del> ):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstanding Balance a	at Close of This Period	
			,	
SUBTOTALS This Period This Page (optional)			1986.11	
., costo inter the rate age (optional)		···	4	
2) TOTALS This Period (last page this line number	only)	>	1986.11	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		0.00	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page or	nly) ▶	1986.11	