

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 National Committee PAC

ADDRESS (number and street) 1212 S Victory Bl
 Check if different than previously reported. (ACC)
Burbank CA 91502

2. **FEC IDENTIFICATION NUMBER** C00146969
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 Kinde Durkee
Signature of Treasurer Electronically Filed by Kinde Durkee Date 07 19 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 National Committee PAC

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"/>		3173.49
(b) Cash on Hand at Beginning of Reporting Period	3173.49	
(c) Total Receipts (from Line 19)	1800.00	1800.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4973.49	4973.49
7. Total Disbursements (from Line 31)	2987.38	2987.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1986.11	1986.11
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	4993.77	

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 National Committee PAC

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)	1100.00	1100.00
(ii) Unitemized	700.00	700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1800.00	1800.00
(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)	1800.00	1800.00
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))	1800.00	1800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1800.00	1800.00

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.....	1383.96	1383.96
(ii) Non-Federal Share.....	1383.95	1383.95
(b) Other Federal Operating Expenditures.....	219.47	219.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2987.38	2987.38
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))..	2987.38	2987.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1603.43	1603.43

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)	1800.00	1800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1800.00	1800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1603.43	1603.43
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1603.43	1603.43

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 13
	(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 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 National Committee PAC

A.

Full Name (Last, First, Middle Initial) Sarkis T Arevian		Date of Receipt MM / DD / YYYY 06 / 30 / 2011	
Mailing Address 4525 Atherton St		Transaction ID: SA11ai00000000812245	
City Long Beach	State CA	Zip Code 90815	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Memorial Counseling Assoc Inc	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B.

Full Name (Last, First, Middle Initial) Armen Goenjian		Date of Receipt MM / DD / YYYY 06 / 30 / 2011	
Mailing Address 501 Via La Selva		Transaction ID: SA11ai00000000812244	
City Redondo Beach	State CA	Zip Code 90277	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Memorial Psychiatric Health Services I	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	1100.00

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

Transaction ID: SC/10000000000001676

LOAN SOURCE Full Name (Last, First, Middle Initial) Berdj Karapetian - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1623 Ben Lomond Dr	
City Glendale State CA ZIP Code 91202	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>1</td></tr> </table>	M	M	1	1	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>1</td></tr> </table>	D	D	0	1	<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	Y	Y	Y	Y	2	0	1	0	0 % (apr) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
1	1																		
D	D																		
0	1																		
Y	Y	Y	Y																
2	0	1	0																

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: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="1500.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

Transaction ID: SC/10000000000001675

LOAN SOURCE Full Name (Last, First, Middle Initial) Mary Karapetian - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1623 Ben Lomond Dr	
City Glendale State CA ZIP Code 91202	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 1 D D 0 1 Y Y Y Y 2 0 1 0		0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional) ▶	<input style="width: 100%;" type="text" value="1500.00"/>
TOTALS This Period (last page in this line only) ▶	<input style="width: 100%;" type="text" value="3000.00"/>

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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Armenian Cultural Foundation			Nature of Debt (Purpose): Office Rent
Mailing Address 104 N Belmont St #300			
City Glendale	State CA	ZIP Code 91206	

Outstanding Balance Beginning This Period 1200.00		Transaction ID: SD10000000000008723	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Image Cube Design & Print			Nature of Debt (Purpose): Design costs
Mailing Address 3609 1/2 W Magnolia Bl			
City Burbank	State CA	ZIP Code 91505	

Outstanding Balance Beginning This Period 548.75		Transaction ID: SD10000000000009329	
Amount Incurred This Period 0.00	Payment This Period 548.75	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Image Cube Design & Print			Nature of Debt (Purpose): Website hosting & maintenance
Mailing Address 3609 1/2 W Magnolia Bl			
City Burbank	State CA	ZIP Code 91505	

Outstanding Balance Beginning This Period 300.00		Transaction ID: SD10000000000009874	
Amount Incurred This Period 300.00	Payment This Period 300.00	Outstanding Balance at Close of This Period 300.00	

1) SUBTOTALS This Period This Page (optional).....	1500.00
2) TOTALS This Period (last page this line number only).....	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	[]
4) ADD 2) and 3) 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)	PAGE 10 / 13
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tchaghasian, Ani			Nature of Debt (Purpose): Reimbursement of office expenses
Mailing Address 233 Miller Rd			
City Mahwah	State NJ	ZIP Code 07430	

Outstanding Balance Beginning This Period		Transaction ID: SD100000000000009145	
493.77			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	493.77	

1) SUBTOTALS This Period This Page (optional).....	493.77
2) TOTALS This Period (last page this line number only).....	1993.77
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	3000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	4993.77

A. Form/Schedule : **SD10**

Delta Printing - \$530.00 FedEx Kinkos - \$11.77 US Postmaster - \$352.00

Transaction ID : **SD10000000000009145**

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 Armenian National Committee PAC

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

A. Full Name (Last, First, Middle Initial) Image Cube Design & Print			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3609 1/2 W Magnolia Bl			Allocated Activity or Event Year-To-Date 2767.91	
City Burbank	State CA	Zip Code 91505	Date M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 1	
Purpose of Disbursement: Website hosting & maintenance			Transaction ID: H4000000000000782419	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
424.38		424.37		848.75

B. Full Name (Last, First, Middle Initial) Durkee & Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1212 S. Victory Blvd.			Allocated Activity or Event Year-To-Date 2767.91	
City Burbank	State CA	Zip Code 91502	Date M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 1	
Purpose of Disbursement: Professional accounting services			Transaction ID: H4000000000000782420	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
549.76		549.76		1099.52

C. Full Name (Last, First, Middle Initial) Durkee & Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1212 S. Victory Blvd.			Allocated Activity or Event Year-To-Date 2767.91	
City Burbank	State CA	Zip Code 91502	Date M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 1 1	
Purpose of Disbursement: Professional accounting services			Transaction ID: H40000000000000813658	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
409.82		409.82		819.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1383.96		1383.95		2767.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
1383.96		1383.95		2767.91