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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Us	se Only
1. NAME OF TY COMMITTEE (in full)	PE OR PRINT		ample: If typir er the lines.	ng, type	12FE	4M5	
Armenian National Comr	mittee PAC						
ADDRESS (number and street)	120 N Sunset Ca	nyon Drive					
Check if different							
than previously reported. (ACC)	Burbank				CA	91501	-1101
2. FEC IDENTIFICATION NUM	BER ▼	CITY 🛦		Ş	STATE A		ZIP CODE 🛦
C C00146969		3. IS THIS REPORT		NEW N) OR	×	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)		Aug 20 (M8)	Nov 20 (M1 (Non-Election Year Only)
(a) Quarterly Reports:	Due Oil.	Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)	Dec 20 (M1 (Non-Election Year Only)
X April 15 Quarterly Report (Q1)	(2)	Apr 20 (M4)		Jul 20 (M7)	Щ	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)		Election	Primary (12F	-	1	neral (12G)	Runoff (12R
October 15 Quarterly Report (Q3)	пери	for the:	Convention (120)	Эре	ecial (12S)	
January 31 Year-End Report (YE)		Election on	M M /	D D /	YIYI	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		/ Election	General (300	G)	Rur	noff (30R)	Special (30S
Termination Report (TER)	Пероп	Election on	M = M /	D = D /	Y	Y	in the State of
5. Covering Period 01	01	2012	through	03	/ D 31	D / Y Y 20	2
certify that I have examined this	•	ne best of my kno	wledge and I	pelief it is tru	e, corre	ct and comple	te.
Type or Print Name of Treasurer	Pamela Corradi						
Signature of Treasurer Pamela	Corradi		[Electronically	Filed] D	ate	M M / D 31	2012
NOTE: Submission of false, erroneou	us, or incomplete	information may s	ubject the pers	son signing th	is Repor	t to the penalti	es of 2 U.S.C. §437g
Office Use Only							FORM 3X lev. 12/2004

OF FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Armenian National Committee PAC		
Report Covering the Period: From: 01	01 2012 To	e: 03 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		2170.11
(b) Cash on Hand at Beginning of Reporting Period	2170.11	
(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)	4170.11	4170.11
7. Total Disbursements (from Line 31)	498	498
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3672.11	3672.11
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1986.11	
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 multicandid	date committee. (see FEC FORM 1M)	
For	further information contact:	
F	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

Λ κ ικο ο κοίο κο	Motional	C a ma ma itt a a	$D \wedge C$
Armenian	malional	Committee	PAC

R		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	03 31 2012
	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	2000
	(i) Itemized (use Schedule A)	2000	2000
	(ii) Unitersiand	0	0
	(ii) Unitemized(iii) TOTAL (add	0	
	Lines 11(a)(i) and (ii)	2000	2000
	Lines Tr(a)(i) and (ii)		
	(b) Political Party Committees	0	0
	(c) Other Political Committees		
	(such as PACs)	0	0
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		2000
	Totals to Line 33, page 5)▶	2000	2000
12.	Transfers From Affiliated/Other		
	Party Committees	0	0
10	All Loans Received	0	0
13.	All Loans neceived	7	7
	Land Barrella Barria I	0	0
	Loan Repayments Received		0
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0	0
16.	Refunds of Contributions Made		
	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 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))▶	2000	2000
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	2000	2000

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		
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Gliou	Calcildai Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0	0		
(ii) Non-Federal Share	0	0		
(b) Other Federal Operating	400	100		
Expenditures	498	498		
(c) Total Operating Expenditures	498	498		
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	450	490		
Committees	0	0		
. Contributions to				
Federal Candidates/Committees and Other Political Committees	0	0		
. Independent Expenditures				
(use Schedule E)	0	0		
. Coordinated Party Expenditures				
(2 U.S.C. §441a(d)) ' (use Schedule F)	0	0		
. Loan Repayments Made	0	0		
. Loans Made Refunds of Contributions To:	0	0		
(a) Individuals/Persons Other				
Than Political Committees	0	0		
4		0		
(b) Political Party Committees	0			
(c) Other Political Committees (such as PACs)	0	0		
(Such as FAOS)				
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0	0		
. Other Disbursements	0	0		
	7	7		
. Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)		0		
(i) Federal Share	0	0		
(") III II G:	^	0		
(ii) "Levin" Share	0			
(b) Federal Election Activity Paid Entirely	0	0		
With Federal Funds	0			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0	0		
Lines 30(a)(i), 30(a)(ii) and 30(b))				
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	498	498		
-, -,,,,,,,,, -	100	1		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	498	498		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2000	2000
4. Total Contribution Refunds (from Line 28(d))	0	0
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2000	2000
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	498	498
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
8. Net Operating Expenditures (subtract Line 37 from Line 36)	498	498

1mage# 12951932585 PAGE 6 / 14

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DC FHž G7 < 98 I @ 'C F' ± H9 A ± N5 H± C B

Form/Schedule: F3XA Transaction ID :

corrected beginning balances.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 (check only one) X 11a 11b 11c

OF 14 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 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** Full Name (Last, First, Middle Initial) Frank Melkonian Date of Receipt Mailing Address 815 Saint Katherine Dr. 2012 02 City State Zip Code Transaction ID: SA11AI-41-38-c CA La Canada 91011-4122 Amount of Each Receipt this Period FEC ID number of contributing C 2000 federal political committee. Name of Employer Occupation Closet World owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2000 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... 2000.00 TOTAL This Period (last page this line number only).....

17

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE			8 O)F 14	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(official offic)		, –			
	Detailed Summary Page	X 21b		23	24	25	26
		27	28a	28b	28c	29	30b
Any information copied from such Reports and Staten							
or for commercial purposes, other than using the name	ie and address of any polit	icai committee	o soiicit contri	DUTIONS TOI	ın such co	ommitte	. e.
NAME OF COMMITTEE (In Full)							
Armenian National Committee PAC	,						
Full Name (Last, First, Middle Initial)							
A. Pamela Corradi			Date of D	isbursemer	nt		
			M = M	/ D D		Y	Υ
Mailing Address 120 N Sunset Canyon Drive			02	01	_ 20	012	
City	State Zip Code		-				
Burbank	CA 91501-1101		Transac	tion ID : SE	321B-3-48	3-е	
Purpose of Disbursement			1				
Treasurer			Amount of	f Each Dist	oursement	this P	Period
Candidate Name		Category/				2	275
Office Cought		Туре		7	7		., 0
Office Sought: House Disburser Senate							
President	Primary General Other (specify) ▼						
State: District:	onioi (apooliy) ▼						
Full Name (Last, First, Middle Initial)							
B. Pamela Corradi			Date of D	isbursemer	nt		
			M = M	/ D D	/ Y Y	Y	Υ
Mailing Address 120 N Sunset Canyon Drive			03	02	2	012	
City	75.0.4.						
City S Burbank	State Zip Code CA 91501-1101		Transac	tion ID : SI	B21B-3-49)-е	
Purpose of Disbursement	31301-1101		+				
treasurer			Amount of	f Each Dist	bursement	this P	Period
Candidate Name		Category/				- 4	175
		Туре		7	7	1	175
Office Sought: House Disbursen							
Senate President	Other (specify) —						
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C.			Date of D	isbursemer	nt		
			M M	/ D D	/ Y Y	Υ	Υ
Mailing Address							
0.1	N-1-						
City	State Zip Code						
Purpose of Disbursement			+				
•			Amount of	f Each Dist	bursement	this P	Period
Candidate Name		Category/		2.5.			
		Type		7	7		
Office Sought: House Disburser							
	Primary General						
State: President District:	Other (specify) ▼						
orare. District.							
SUBTOTAL of Disbursements This Page (optional)						450.	00
ODDIOTAL OF DISDUISEMENTS THIS Page (optional)			-	7	7		
TOTAL This Period (last page this line number only)		_			_	450.	00

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

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FOR LINE 13 OF FORM 3X

	Detailed Sulfilliary Page
AME OF COMMITTEE (In Full)	Transaction ID : SC/10-L3
Armenian National Committee PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: 2012
Armenian Cultural Foundation	Primary
	General
Mailing Address 104 N. Belmont St., #300	Other (specify) ▼
	ode 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:
Man / Date liculed Date Due	V
09 02 2009 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
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Amount Guaranteed
5.000	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Amount Guaranteed
	Outstanding:
SUBTOTALS This Period This Page (optional)	1200.00
OTALS This Period (last page in this line only)	>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE 10 OF 14

FOR LINE 13 OF FORM 3X

		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	Balanc	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	l)		.	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 s for each category Detailed Summ

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X

	Botanoa Gammary 1 ago
IAME 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)
	le 91202-1249
Original Amount of Loan Cumulative Payment To I	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 / Y =	Y Y Y Y
11 01 2010 01 01	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
	Amount
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	A
City State ZIP Code	Amount Guaranteed
Sind Zin Good	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
-	Amount
City State ZIP Code	Guaranteed
only state in some	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
0	Amount
City State ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Posted This Posts (2015) 201	1500.00
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 n	no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE 12 OF 14

FOR LINE 13 OF FORM 3X

		Detailed Summary Pag	ge FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (In Full)	10	Tra	nsaction ID : SC/10-L2
rmenian National Committee P	AC		
LOAN SOURCE Full Name (Last, First, Mary Karapetian	Middle Initial)		Election: 2012 Primary General
Mailing Address 1623 Ben Lomond Drive			Other (specify)
City Glendale	State CA ZIP Co	ode 91202-1249	
Original Amount of Loan	Cumulative Payment To		lance Outstanding at Close of This Perio
1500	, , , , , ,	0	1500
TERMS	Data Dua	Interest De	Consumed
Date Incurred 11 01 2010	Date Due	Interest Ra	
List All Endorsers or Guarantors (if any	r) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
JBTOTALS This Period This Page (option	al)	>	1500.00
OTALS This Period (last page in this line of	only)	>	
arry outstanding balance only to LINE 3,	Schedule D. for this line. If	no Schedule D. carry for	rward to appropriate line of Summary.

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

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FOR LINE 13 OF FORM 3X

	De	etailed Summary Page	e TON LINE 13 OF TONIN 3X
AME OF COMMITTEE (In Full) Armenian National Committee PAC	<u> </u>	Trar	nsaction ID : SC/10-L4
amenian National Committee FAC			
LOAN SOURCE Full Name (Last, First, Middle Initia	al)		Election: 2012
Image Cube Design & Print			Primary
Mailing Address			General Other (specify) ▼
Mailing Address 3609 1/2 W, Magnolia Blvd.			Other (specify)
City Burbank State (
Original Amount of Loan Cumula	ative Payment To Date	Bala	ance Outstanding at Close of This Period
300	7	0	300
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M M / D D / Y Y Y Y M M /	D D / Y Y	0.00	
04 01 2011 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)	Nam	e of Employer	
Mailing Address	Occ	upation	
City State ZIP C	Amo	ount ranteed	
Siny State ZII C		standing:	7
2. Full Name (Last, First, Middle Initial)	Nam	ne of Employer	
Mailing Address	Occ	upation	
City State ZIP C	ode Amo	ranteed	
5.17		standing:	
3. Full Name (Last, First, Middle Initial)	Nam	e of Employer	
Mailing Address	Occ	upation	
0.4 710.0	Amo		
City State ZIP C		ranteed standing:	7
4. Full Name (Last, First, Middle Initial)		ne of Employer	
Mailian Address			
Mailing Address	Occi	upation	
	Amo	ount	
City State ZIP C	ode Gua	ranteed	
	Outs	standing:	
SUBTOTALS This Period This Page (optional)			300.00
			7 7 7
TOTALS This Period (last page in this line only)		······	4993.77
Carry outstanding balance only to LINE 3, Schedule D	for this line. If no So	chedule D, carry for	ward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

X	9
	10

14

NAME OF COMMITTEE (In Full) Armenian National Committee PAC		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kindee Durkee		Nature of Debt (Purpose): -embezzelled funds
Mailing Address 1212 S Victory Boulevard		
City State Burbank	Zip Code CA 91502-2551	
Outstanding Balance Beginning This Period	91302-2331	Transaction ID : SD9-DEBT34
1986.11		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0	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 Debto	or 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
1) SUBTOTALS This Period This Page (optional)	>	1986.11
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	1986.11	