

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See instructions)

Off. Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

ARMENIAN AMERICAN PAC (ARMENPAC)

ADDRESS (Home or street) 421 E AIRPORT FREEWAY

X (Check if address is changed) IRVING TX 75206

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

jnhoffice@home.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 07 / 27 / 2001

3. FEC IDENTIFICATION NUMBER C00352054

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Dr. Sarkis J. Kechejian

Signature of Treasurer Electronically Filed by Dr. Sarkis J. Kechejian Date 07 / 27 / 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

5. TYPE OF COMMITTEE (Check One)

- (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 the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate	Office				State
Party Affiliation	Sought:	House	Senate	President	District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

- (d) This committee is a \_\_\_\_\_ (National, State (or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

\_\_\_\_\_  
 \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

**ARMENIAN AMERICAN PAC (ARMENPAC)**

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name Jim Horn

Mailing Address 1806 Southridge Drive

Denton

TX

76205 - 7814

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Dr. Sarkis J. Kechejian

Mailing Address 5515 Edlen Drive

Dallas

TX

75220 -

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Full Name of Designated Agent \_\_\_\_\_

Mailing Address \_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

