

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED BY OS SHERIFFS COUNTY 2012 JUN -4 PM 2:32 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. Armenian National Committee PAC

ADDRESS (number and street) 120 N Sunset Canyon Drive Burbank CA 91501-1101

2. FEC IDENTIFICATION NUMBER C C00146969 3. IS THIS REPORT NEW OR AMENDED (N) OR (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) X January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 07 01 2011 through 12 31 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 Pamela Corradi

Signature of Treasurer Pamela Corradi Date 05 31 2012

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

12030823624

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Armenian National Committee PAC**

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2011 To: MM / DD / YYYY 12 / 31 / 2011

	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
6. (a) Cash on Hand January 1, 2011		3173.49
(b) Cash on Hand at Beginning of Reporting Period.....	1986.11	
(c) Total Receipts (from Line 19) .....	10600	10900
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	12586.11	14073.49
7. Total Disbursements (from Line 31).....	10416	11903.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2170.11	2170.11
9. 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 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

12030823625

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Armenian National Committee PAC**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 07 01 2011 To: <sup>M M / D D / Y Y Y Y</sup> 12 31 2011

12030823626

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).....	10500	21000
(ii) Unitemized .....	100	-10400
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10600	10600
(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 Totals to Line 33, page 5).....▶	10600	10600
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	300
14. Loan Repayments Received.....	0	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)).....▶	10600	10900
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10600	10900

**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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	8	8
(ii) Non-Federal Share.....	8	8
(b) Other Federal Operating Expenditures .....	0	1487.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16	1503.38
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E).....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	10400	10400
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10416	11903.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10408	11895.38

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**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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) .....	10600	10600
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10600	10600
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8	1495.38
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8	1495.38

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**FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION**

**Form/Schedule: F3XA**  
**Transaction ID :**

corrected beginning balances. Explanation that all corporate contributions went to Jack Hadjinian for Montebello City Council.

12030823629

**Form/Schedule:**  
**Transaction ID:**

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

Form A: Serv-Wel Disposal & Cycling
Full Name (Last, First, Middle Initial)
Mailing Address 901 S Maple Avenue
City Montebello State CA Zip Code 90640-5411
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 2000

Date of Receipt 10 / 03 / 2011
Transaction ID : SA11AI-12-5-c
Amount of Each Receipt this Period 2000
city council fundraiser

Form B: Universal Waste Systems, Inc.
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3038
City Whittier State CA Zip Code 90605-0038
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 2000

Date of Receipt 10 / 03 / 2011
Transaction ID : SA11AI-13-6-c
Amount of Each Receipt this Period 2000
city council fundraiser

Form C: California Commerce Casino, Inc.
Full Name (Last, First, Middle Initial)
Mailing Address 6131 Telegraph Road
City Commerce State CA Zip Code 90040-2501
FEC ID number of contributing federal political committee. C
Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 2500

Date of Receipt 10 / 03 / 2011
Transaction ID : SA11AI-14-7-c
Amount of Each Receipt this Period 2500
city council fundraiser

Table with 2 columns: Description and Amount.
SUBTOTAL of Receipts This Page (optional) 6500.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 16					
	<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

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) <b>A. AAA Rubbish</b>		Date of Receipt MM / DD / YYYY 10 / 03 / 2011
Mailing Address PO Box 2158		Transaction ID : SA11AI-15-16-c
City Bell Gardens	State CA	Zip Code 90202-2158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer	Occupation	City Council Fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000	

Full Name (Last, First, Middle Initial) <b>B. Key Disposal, Inc.</b>		Date of Receipt MM / DD / YYYY 10 / 03 / 2011
Mailing Address PO Box 459		Transaction ID : SA11AI-19-23-c
City Montebello	State CA	Zip Code 90640-0459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer	Occupation	city council fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	10500.00

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)							
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	PAGE 9 OF 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) <b>A. Jack Hadjinian For Montebello City Council</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address 1012 W. Beverly Blvd., #115		Transaction ID : SB29-8-1-e
City Montebello	State CA	
Purpose of Disbursement contribution to city council candidate		Amount of Each Disbursement this Period  10400
Candidate Name <b>Jack Hadjinian</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	(For State/Local Candidate Support)
State: District:	Category/ Type 011	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....▶	10400.00
TOTAL This Period (last page this line number only).....▶	10400.00

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**SCHEDULE C (FEC Form 3X)**

**LOANS**

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

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L3

**Armenian National Committee PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)

Armenian Cultural Foundation

Election: 2012

Primary

General

Other (specify) ▼

Mailing Address 104 N. Belmont St., #300

City Glendale

State CA

ZIP Code 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:

09 / 02 / 2009

01 / 01 / 1900

0.00

% (apr)

Yes  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

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:

**SUBTOTALS** This Period This Page (optional) .....

1200.00

**TOTALS** 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.

12030823633

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Armenian National Committee PAC** Transaction ID : **SC/10-L5**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ani Tchaghlasian	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 233 Miller Rd	
City Mahwah State NJ ZIP Code 07430	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
493.77	0	493.77

<b>TERMS</b>	Date Incurred 05 / 14 / 2010	Date Due 01 / 01 / 1900	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	
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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	493.77
<b>TOTALS</b> 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.	

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**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Armenian National Committee PAC** Transaction ID : SC/10-L1

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Berdj Karapetian	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1623 Ben Lomond Drive	
City Glendale State CA ZIP Code 91202-1249	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500	0	1500

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
11 / 01 / 2010	01 / 01 / 1900	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
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:

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1500.00
<b>TOTALS</b> 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.	

12030823635

**SCHEDULE C (FEC Form 3X)  
LOANS**

NAME OF COMMITTEE (In Full) **Armenian National Committee PAC** Transaction ID : SC/10-L2

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Mary Karapetian	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1623 Ben Lomond Drive	
City Glendale State CA ZIP Code 91202-1249	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500	0	1500

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	11 / 01 / 2010	01 / 01 / 1900	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
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:

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1500.00
<b>TOTALS</b> 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.	

12030823636

**SCHEDULE C (FEC Form 3X)**

**LOANS**

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

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10-L4

**Armenian National Committee PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)  
Image Cube Design & Print

Election: 2012

Primary

General

Other (specify) ▼

Mailing Address 3609 1/2 W, Magnolia Blvd.

City Burbank State CA ZIP Code 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:
04 / 01 / 2011	01 / 01 / 1900	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
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:

**SUBTOTALS** This Period This Page (optional) ..... ▶ 300.00

**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 Schedule D, carry forward to appropriate line of Summary.

12030823637

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 16
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Armenian National Committee PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kindee Durkee</b>	Nature of Debt (Purpose): -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 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 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

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 line of Summary Page (last page only)▶	1986.11

12030823638

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

NAME OF COMMITTEE (In Full)  
**Armenian National Committee PAC**

A. Full Name (Last, First, Middle Initial) <b>Bank of America</b>		Transaction ID : H4-4-32-e	Allocated Activity or Event: <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 <b>345 N Brand Boulevard</b>			Allocated Activity or Event Year-To-Date _____ 16	
City <b>Glendale</b>	State <b>CA</b>	Zip Code <b>91203-2303</b>	Date <b>12 / 09 / 2011</b>	
Purpose of Disbursement: service charge		Category/ Type		
Activity or Event Identifier: <b>Bank of America</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
8			8	16

B. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input 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		Allocated Activity or Event Year-To-Date _____	
City	State	Zip Code	Date
Purpose of Disbursement:		Category/ Type	
Activity or Event Identifier:			
FEDERAL SHARE		+	NONFEDERAL SHARE = TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input 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		Allocated Activity or Event Year-To-Date _____	
City	State	Zip Code	Date
Purpose of Disbursement:		Category/ Type	
Activity or Event Identifier:			
FEDERAL SHARE		+	NONFEDERAL SHARE = TOTAL AMOUNT

<b>SUBTOTAL of Allocated Federal and NonFederal Activity This Page</b>			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
8.00		8.00	16.00
<b>TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))</b>			
FEDERAL SHARE		NONFEDERAL SHARE	TOTAL AMOUNT
8.00		8.00	16.00

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Federal Election Commission  
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