01/30/2011 23:40

## **FEC** FORM 3X

COMMITTEE (in full)

ADDRESS (number and street)

Check if different

than previously

C00352054

**TYPE OF REPORT** 

(a) Quarterly Reports:

April 15

July 15

(TER)

Covering Period

Signature of Treasurer

Office

Use

Only

Type or Print Name of Treasurer

October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE)

July 31 Mid-Year

Report(Non-election Year Only) (MY)

Termination Report

1 1

Electronically Filed by

Quarterly Report(Q1)

Quarterly Report(Q2)

(Choose One)

Χ

reported. (ACC)

FEC IDENTIFICATION NUMBER

ARMENIAN AMERICAN PAC (ARMENPAC)

1. NAME OF

Χ

# REPORT OF RECEIPTS AND DISBURSEMENTS

OR TYPE OR PRINT

West New York

(b) Monthly

(c)

(d)

23

Jason P Capizzi

Report

Due On:

12-Day

30-Day

For Other Than An Authorized Committee

Office Use Only **USE FEC MAILING LABEL** Example: If typing, type over the lines 24 Avenue at Port Imperial # 209 NJ 07093 **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** Χ REPORT OR (N) (A) Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12S) in the Election on State of Post -Election General (30G) Runoff (30R) Special (30S) Report for the: in the Election on State of 2010 12 3 1 2010 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Jason P Capizzi 0 1 30 2011 Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. **FEC FORM 3X** 

(Rev. 12/2004)

FE6AN026

# **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)	2/9	
	Write or Type Committee Name ARMENIAN AMERICAN PAC (ARMENPAC)		
	Report Covering the Period: From:	23 2010	To: D D D 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 2010 Y Y Y		4097.33
	(b) Cash on Hand at Begining of Reporting Period	2001.94	
	(c) Total Receipts (from Line 19)	0.00	600.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2001.94	4697.33
7.	Total Disbursements (from Line 31)	194.62	2890.01
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1807.32	1807.32
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	1900.00	
10	. Debts and Obligations owed BY		

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

0.00

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

the committee (Itemize all on

Schedule C and/or Schedule D) .....

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 9

Write or Type Committee Name

ARMENIAN AMERICAN PAC (ARMENPAC)

Report Covering the Period:

From:

<sup>D</sup> 23

2010

\_. | M 1

1 2 D D 3 1

Y Y Y Y 2 0 1 0

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)	0.00	500.00				
(ii) Unitemized	0.00	100.00				
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	600.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees (such as PACs)	0.00	0.00				
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	▶ 0.00	600.00				
12. Transfers From Affiliated/Other Party Committees	0.00	0.00				
13. All Loans Received	0.00	0.00				
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00				
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00				
to Federal candidates and Other Political Committees	0.00	0.00				
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00				
8. Transfers from Non-Federal and Levin F	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))	0.00	600.00				
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	600.00				

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/9

	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)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	104.62	1890.01
	Expenditures(c) Total Operating Expenditures	194.62	1890.01
	(add 21(a)(i), (a)(ii) and (b))	194.62	1890.01
22.	Transfers to Affiliated/Other Party		
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	1000.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
٠.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
	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	0.00	200
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
		0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	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	0.00	0.00
	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))	194.62	2890.01
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	194.62	2890.01

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 9

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)	0.00	600.00			
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00			
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	600.00			
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	194.62	1890.01			
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	194.62	1890.01			

FE6AN026

A.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 6/9						
TEMIZED DISBURSEMENTS	for each category of the	(check only	- ´ — —	🗆						
	Detailed Summary Page	X 21b 27		24 25 26 30b						
Any Information copied from such Reports and Statemer	ents may not be sold or used by									
or for commercial purposes, other than using the name	and address of any political co	mmittee to so	licit contributions from s	uch committee						
NAME OF COMMITTEE (In Full)										
ARMENIAN AMERICAN PAC (ARMENPAC	<b>(</b> )									
Full Name (Last, First, Middle Initial)			Transaction ID: Si	B21B.4263						
Jason P Capizzi			Date of Disbursemen							
			111 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Mailing Address 24 Avenue at Port Imperia	al #209		30	2010						
City	State Zip Code		Amount of Each Disk	oursement this Period						
West New York	NJ 07093									
Purpose of Disbursement	Г	-		194.62						
reimbursable expenses - office expenses										
Candidate Name		Category/								
		Туре								
Office Sought: House Disburse										
Senate	Primary X General									
President	Other (specify)									
State: District:										

			-				
SUBTOTAL of Disbursements This Page (optional)						194.62	
	,		-	-			
TOTAL This Period (last page this line number only)	•					194.62	

#### PAGE 7 / 9 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) X 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 City State ZIP Code 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4130 300.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 300.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 State 7IP Code City 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4140 200.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 200.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 ZIP Code City State Royal Oak 48067 ΜI Outstanding Balance Beginning This Period Transaction ID: SD9.4133 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 200.00 700.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

3) TOTAL OUTSTANDING LOANS

#### PAGE 8 / 9 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) X 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 City State ZIP Code 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4134 100.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 100.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 State 7IP Code City 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4135 100.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 100.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 State ZIP Code City Royal Oak 48067 ΜI Outstanding Balance Beginning This Period Transaction ID: SD9.4136 100.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 100.00 300.00 1) SUBTOTALS This Period This Page (optional)..... 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)

#### PAGE 9 / 9 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) X 9 numbered line) **Excluding Loans** 10 NAME OF COMMITTEE (In Full) ARMENIAN AMERICAN PAC (ARMENPAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): repayment of 7/26/02 \$3500 overpayment Mida Giragosian Mailing Address 1316 N. Campbell Suite 6 City State ZIP Code 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4137 100.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 100.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 State 7IP Code City 48067 Royal Oak MI Outstanding Balance Beginning This Period Transaction ID: SD9.4138 600.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 600.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mida Giragosian repayment of 7/26/02 \$3500 overpayment Mailing Address 1316 N. Campbell Suite 6 State ZIP Code City Royal Oak 48067 ΜI Outstanding Balance Beginning This Period Transaction ID: SD9.4139 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 200.00 900.00 1) SUBTOTALS This Period This Page (optional)..... 1900.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

1900.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)