

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED BY 103 ALPHESS COUNTY 2012 JUN -4 PM 2:32 Office Use Only

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 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 (X) (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 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) Convention (12C) General (12G) 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 01 01 2012 through 03 31 2012

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 table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

12030823642

**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: 01 01 2012 To: 03 31 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012	2170.11	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
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3672.11	3672.11
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

12030823643

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: 01 / 01 / 2012 To: 03 / 31 / 2012

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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).....	2000	2000
(ii) Unitemized	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2000	2000
(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).....▶	2000	2000
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
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)).....▶	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)

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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	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	498	498
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	498	498
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	0	0
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))..	498	498
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	498	498

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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)	2000		2000	
34. Total Contribution Refunds (from Line 28(d))	0		0	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2000		2000	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	498		498	
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0		0	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	498		498	

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FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XA
Transaction ID :

corrected beginning balances.

12030823647

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 OF 14		
	(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

Full Name (Last, First, Middle Initial) A. Frank Melkonian		Date of Receipt MM / DD / YYYY 02 / 02 / 2012
Mailing Address 815 Saint Katherine Dr.		Transaction ID : SA11AI-41-38-c
City La Canada	State CA	Zip Code 91011-4122
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer Closet World	Occupation owner	
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.		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 ▼	

Full Name (Last, First, Middle Initial) C.		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 ▼	

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

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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)						PAGE 8 OF 14	
	<input checked="" 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 type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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)*

A. Pamela Corradi

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2012

Mailing Address 120 N Sunset Canyon Drive

Transaction ID : SB21B-3-48-e

City State Zip Code
Burbank CA 91501-1101

Amount of Each Disbursement this Period

Purpose of Disbursement
Treasurer

Candidate Name

Category/
Type

275

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Pamela Corradi

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2012

Mailing Address 120 N Sunset Canyon Drive

Transaction ID : SB21B-3-49-e

City State Zip Code
Burbank CA 91501-1101

Amount of Each Disbursement this Period

Purpose of Disbursement
treasurer

Candidate Name

Category/
Type

175

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

Amount of Each Disbursement this Period

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶ 450.00

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SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Armenian National Committee PAC** Transaction ID : **SC/10-L3**

LOAN SOURCE Full Name (Last, First, Middle Initial) Armenian Cultural Foundation	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)	<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)..... ▶	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.	

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SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page
 PAGE 10 OF 14
 FOR LINE 13 OF FORM 3X

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

LOAN SOURCE Full Name (Last, First, Middle Initial)
 Ani Tchaghlasian
 Mailing Address 233 Miller Rd
 City Mahwah State NJ ZIP Code 07430
 Election: 2012
 Primary
 General
 Other (specify) ▼

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 14 / 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:

SUBTOTALS This Period This Page (optional) ▶ 493.77
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.

12030823651

SCHEDULE C (FEC Form 3X)

LOANS

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

LOAN SOURCE 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:

SUBTOTALS This Period This Page (optional).....▶	1500.00
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.	

12030823652

SCHEDULE C (FEC Form 3X)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 12 OF 14
	FOR LINE 13 OF FORM 3X

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

LOAN SOURCE 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

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:

SUBTOTALS This Period This Page (optional)..... ▶	1500.00
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.	

12030823653

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Armenian National Committee PAC** Transaction ID : **SC/10-L4**

LOAN SOURCE Full Name (Last, First, Middle Initial) Image Cube Design & Print	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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.

12030823654

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 14
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Armenian National Committee PAC

12030823655

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	Zip Code	
Burbank	CA	91502-2551	
Outstanding Balance Beginning This Period 1986.11		Transaction ID : SD9-DEBT34	
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

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
6/13/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER

6/22/12
DATE PREPARED

12030825656