Image# 12971257710				PAGE 1 / 16
	REPORT OF	RECEIPTS		Г
	AND DISBUR			
	For Other Than An Auth	iorized Committee	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typ over the lines.	De 12FE4M5	
Armenian National Cor	nmittee PAC			
ADDRESS (number and street)	120 N Sunset Canyon Drive			
Check if different				
than previously reported. (ACC)	Burbank		CA 918	501-1101
2. FEC IDENTIFICATION NU	IMBER V CIT	Y 🔺	STATE 🔺	ZIP CODE
C C00146969		EPORT (N)	OR × AMENDE (A)	D
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q 	Apr (c) 12-Day PRE-Election Report for the:	20 (M2) May 20 20 (M3) Jun 20 20 (M4) Jul 20 Primary (12P) Convention (12C)	(M6) Sep 20 (Ms	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
January 31 Year-End Report (Y July 31 Mid-Year Report (Non-election Year Only) (MY)	E) Electio	n on General (30G)	Runoff (30R)	in the State of Special (30S)
Termination Report (TER)	Electio	n on	D / Y = Y = Y = Y	in the State of
5. Covering Period 07		through	12 31 2	2011
I certify that I have examined th Type or Print Name of Treasure	-	my knowledge and belief	it is true, correct and comp	olete.
Signature of Treasurer	la Corradi	[Electronically Filed]		31 / Y Y Y Y 31 2012
NOTE: Submission of false, errone	ous, or incomplete information	may subject the person sig	gning this Report to the pena	alties of 2 U.S.C. §437g.
Office Use Only			FE	C FORM 3X Rev. 12/2004

05/31/2012 17 : 14

SUMMARY PAGE	
OF RECEIPTS AND DISBURSEMENTS	

Write or Type Committee Name Armenian National Committee PAC

FEC Form 3X (Rev. 02/2003)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
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

DET	AILED SUMMARY PAGE	7
FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Write or Type Committee Name		
Armenian National Committee PAC		
Report Covering the Period: From: 07	/ D D / Y Y Y Y 01 2011 To	b: 12 / D D / Y Y Y Y 31 2011
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
(i) Itemized (use Schedule A)	7 7 7	
(ii) Unitemized	100	-10400
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	10600	10600
	0	0
(b) Political Party Committees (c) Other Political Committees	7 7 7 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	40000	10000
(subtract Line 18(c) from Line 19)▶	10600	10900

Image# 12971257712

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	II Disbursements COLUMN A			
. Operating Expenditures:	Total This Period	COLUMN B Calendar Year-to-Date		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	8			
(ii) Non-Federal Share	8			
(b) Other Federal Operating		4407.0		
Expenditures	0	1487.3		
(add 21(a)(i), (a)(ii), and (b))▶	16	1503.3		
Transfers to Affiliated/Other Party				
Committees Contributions to	0			
Federal Candidates/Committees and Other Political Committees	0			
Independent Expenditures				
(use Schedule E) Coordinated Party Expenditures	0			
(2 U.S.C. §441a(d)) (use Schedule F)	0			
Loan Repayments Made	0			
Loans Made	0			
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0			
(b) Political Party Committees	0			
(c) Other Political Committees				
(such as PACs)	0			
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))►	0			
Other Disbursements	10400	1040		
Other Dispursements	10400	7 7		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0			
(ii) "Levin" Share	0			
(b) Federal Election Activity Paid Entirely With Federal Funds	0			
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))►	0			
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	10416	11903.3		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	10408	11895.38		

I

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	10600	10600
 Total Contribution Refunds (from Line 28(d)) 	0	0
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	10600	10600
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 		1495.38
 Offsets to Operating Expenditures (from Line 15, page 3) 	0	0
 Net Operating Expenditures (subtract Line 37 from Line 36) 	8	1495.38

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

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

Form/Schedule: Transaction ID:

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 7 OF

16

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) Armenian National Committee PAC		
Full Name (Last, First, Middle Initial) A. Serv-Wel Disposal & Cycling Mailing Address 901 S Maple Avenue City State Montebello CA FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: Primary General Other (specify) ▼ Image: Control of the specified of the specifi	Zip Code 90640-5411 Year-to-Date ▼ 2000	Date of Receipt
Full Name (Last, First, Middle Initial) B. Universal Waste Systems, Inc. Mailing Address PO Box 3038 City State Whittier CA FEC ID number of contributing C federal political committee. Occupation Name of Employer Occupation Receipt For: Primary Other (specify) ▼ General	Zip Code 90605-0038 Year-to-Date ▼ 2000	Date of Receipt
Full Name (Last, First, Middle Initial) C. California Commerce Casino, Inc. Mailing Address 6131 Telegraph Road City State Commerce CA FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: Aggregate Other (specify) ▼ Image: Commerce	Zip Code 90040-2501 Year-to-Date ▼ 2500	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•••••	6500.00

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

7 7 7 7

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 8 OF

16

	EMIZED RECEIPTS		for each category o Detailed Summary I		X 11a 13	11		11c 15	12	Г	17
	ny information copied from such Reports and Sta for commercial purposes, other than using the										
\rangle	NAME OF COMMITTEE (In Full) Armenian National Committee P	AC									
Α.	Mailing Address PO Box 2158 City Bell Gardens	State CA	Zip Code 90202-2158			action	03 ID:\$	/ Y SA11AI- eceipt th		1 c	
	FEC ID number of contributing federal political committee. Name of Employer Receipt For:	C Occupation Aggregate	Year-to-Date ▼	2000	City Cou	ıncil Fu	ndrais	ser		200	0
в.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Key Disposal, Inc. Mailing Address PO Box 459				Date of	/ [03	/ Y	2011]
	City Montebello FEC ID number of contributing federal political committee. Name of Employer	State CA Occupation	Zip Code 90640-0459			t of Ead	ch R€	SA11AI- eccipt th			D
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V	2000							
C.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code		Date of	_	pt	/ Y	Ŷ	Y Y	
	FEC ID number of contributing federal political committee. Name of Employer	Occupation			Amount	t of Ead	ch Re	eceipt th	is Per	iod	
	Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼	· · ·							
s	UBTOTAL of Receipts This Page (optional)			····· ►				- 7	-	00.00	-
Ĺт	OTAL This Pariod (last page this line number o	nhu)							105	00.00)

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

S	CHEDULE B (FEC Form 3X)			F	0P		- NI	JMBEF	<u>ع</u> .			PA	GE	9 (DF 16			
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the			k on	ly o	ne)										
-		Detailed	Summary Page			21b 27		22 28a		23 28b		24 28c	×	25 29	26 30b			
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nan	nents may ne and add	not be sold or us ress of any politio	ed by cal cor	any nmi	/ per	son to s	for the	e pur ontrit	rpose	of s f	soliciting	g coi	ntribut	tions			
\backslash	NAME OF COMMITTEE (In Full)																	
	Armenian National Committee PAC	2																
Full Name (Last, First, Middle Initial) A. Jack Hadjinian For Montebello City Council								Date of Disbursement										
	Mailing Address 1012 W. Beverly Blvvd., #115							10	M 7		12			011	Ŷ			
	Montebello	State CA	Zip Code 90640				Transaction ID : SB29-8-1-e											
	Purpose of Disbursement contribution to city council candidate			C	011			Amou	nt of	Each	D	isburser	sement this Period					
	Candidate Name Jack Hadjinian			Cat T	ego ype						7			10	400			
	Office Sought: House Disbursement For: Senate Primary General President Other (specify)							(For St	tate/I	Local (Ca	Indidate	Supp	port)				
В.	Full Name (Last, First, Middle Initial)							Date	_				W	Y	Y			
	Mailing Address													Ŷ				
	City	State	Zip Code															
	Purpose of Disbursement							Amount of Each Disbursement this Period					Period					
	Candidate Name			Category/ Type														
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General cify) ▼															
	State: District:																	
C.	Full Name (Last, First, Middle Initial)							Date of	_	sburse			V	Y	Y			
	Mailing Address																	
	City	State	Zip Code				+											
	Purpose of Disbursement							Amou	nt of	Each	ı D	lisburser	nent	this I	Period			
	Candidate Name					ry/		Γ.										
	Office Sought: House Disburser Senate President State: District:	nent For: Primary Other (spe	General cify) ▼							,		,						
								_	-	-				10.400	00			
⊢	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)							H	-	7			÷	10400 10400				
L '	The this i chou (last page this life number only)			•••••		• 🕨			1.0	7	-		1	1				

Use separate schedule(s)	PAGE	10	OF	16
for each category of the				
Detailed Summary Page	FOR	LINE	13 OF	FO

		Detailed Summary Page	
NAME OF COMMITTEE (In Full)		Trar	nsaction 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)
City Glendale Sta	te CA ZIP Co	de 91206	
	umulative Payment To		ance Outstanding at Close of This Period
1200		0	1200
TERMS			
Date Incurred	Date Due	Interest Rate	
	01	1900 0.00	9/ (apr) Yes X NO
List All Endorsers or Guarantors (if any) to Lo	oan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State Z	IP Code	Guaranteed	
O Full Name (Least First Middle Isitial)		Outstanding:	, ,
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State Z	IP Code	Guaranteed Outstanding:	/g
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Occupation	
		Amount	
City State Z	IP Code	Guaranteed Outstanding:	-19. I
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State Z	IP 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, Schedu	le D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s)	PAGE	11	OF	16
for each category of the				
Detailed Summary Page	FOR	LINE	13 OF	FO

	Detailed Summary Page FOR LINE 13 OF FORM 3X						
NAME OF COMMITTEE (In Full)	Transaction ID : SC/10-L5						
Armenian National Committee PAC							
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: 2012						
Ani Tchaghlasian	X Primary						
	General						
Mailing Address 233 Miller Rd	Other (specify)						
City Mahwah State NJ ZIP Co	de 07430						
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period						
493.77	0 493.77						
TERMS	Interact Data Coouradi						
Date Incurred Date Due	Interest Rate Secured:						
05 14 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						
	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	Guaranteed Outstanding:						
4. Full Name (Last, First, Middle Initial)	Name of Employer						
Mailing Address	Occupation						
	Amount						
City State ZIP Code	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.							

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

16

		Detailed Summary Page			
NAME OF COMMITTEE (In Full)		Trar	saction ID : SC/10-L1		
Armenian National Committee PAC)				
LOAN SOURCE Full Name (Last, First, Mid Berdj Karapetian	Idle Initial)		Election: 2012 Primary General		
Mailing Address 1623 Ben Lomond Drive			Other (specify) ▼		
City Glendale	State CA ZIP Coo	^{de} 91202-1249			
Original Amount of Loan	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period		
1500		0	1500		
TERMS Date Incurred	Date Due	Interest Rate	e Secured:		
M 11 / D1 / Y YY Y 2010		1900 0.00) Ves X No		
List All Endorsers or Guarantors (if any) to	D Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
01-1-		Amount			
City State	ZIP Code	Guaranteed Outstanding:	7 7		
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:	y 1 y 1 y 1 y 1 y		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
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.					

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

16

		Detailed Summary Pag	FOR LINE 13 OF FORM 3X				
NAME OF COMMITTEE (In Full)		Tra	nsaction ID : SC/10-L2				
Armenian National Committee PAC							
LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)		Election: 2012				
Mary Karapetian			Primary				
			General				
Mailing Address 1623 Ben Lomond Drive			Other (specify)				
City Glendale	State CA ZIP Coc	^{le} 91202-1249					
Original Amount of Loan	Cumulative Payment To	Date Bal	ance Outstanding at Close of This Period				
1500		0	1500				
TERMS							
Date Incurred	Date Due	Interest Rat	te Secured:				
	01 / D D / Y	1900 0.0	0 % (apr) Yes X No				
List All Endorsers or Guarantors (if any) to	o Loan Source						
1. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
	-	Amount					
City State	ZIP Code	Guaranteed					
		Outstanding:	7				
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City State	ZIP Code	Guaranteed Outstanding:					
		0					
3. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City State	ZIP Code	Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
Maning Address	_						
City	ZID Code	Amount					
City State	ZIP Code	Guaranteed Outstanding:	-7				
			1500.00				
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.							

Use separate schedule(s)	PAGE	14	OF	16
for each category of the				
Detailed Summary Page	FOR	LINE	13 OF	FO

	Detailed Summary Page	FOR LINE 13 OF FORM 3X				
VAME 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				
Mailing Address 3609 1/2 W, Magnolia Blvd.	Other (specify)					
City Burbank State CA ZIP Co	de 91505					
Original Amount of Loan Cumulative Payment To	Date Balan	ce Outstanding at Close of This Period				
300	0	300				
TERMS Date Incurred Date Due	Interest Rate	Secured:				
$\begin{array}{c c} M & M \\ 04 \\ \end{array} \begin{array}{c} 01 \\ 01 \\ \end{array} \begin{array}{c} Y \\ 2011 \\ \end{array} \begin{array}{c} Y \\ 01 \\ \end{array} \begin{array}{c} 01 \\ 01 \\ \end{array} \begin{array}{c} 01 \\ \end{array} \begin{array}{c} 01 \\ \end{array} \begin{array}{c} 01 \\ \end{array} \begin{array}{c} Y \\ 01 \\ \end{array} \begin{array}{c} 01 \\ \end{array} \begin{array}{c} Y \\ 01 \\ \end{array} \begin{array}{c} Y \\ Y \\ \end{array}$	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					
City State ZIP Code	Amount Guaranteed Outstanding:	yy				
2. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Outstanding:	y				
3. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
City State ZIP Code	Amount Guaranteed Outstanding:	y. 1 1 /y. 1 1 /#. 1				
4. Full Name (Last, First, Middle Initial)	Name of Employer					
Mailing Address	Occupation					
	Amount					
City State ZIP Code	Guaranteed Outstanding:	9. 1. 1. 9. 1. 1. 10. 1				
SURTOTALS This Period This Page (optional)		300.00				
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.						

SCHEDULE D (FEC Form 3X)		Г	(Lloo concrete	PAGE 15 OF 16
DEBTS AND OBLIGATIONS			(Use separate schedule(s)	FOR LINE NUMBER:
Excluding Loans			for each numbered line)	(check only one) X 9
NAME OF COMMITTEE (In Full)				10
Armenian National Committee PAC				
A. Full Name (Last, First, Middle Initial) of Debtor o	r Craditar		Notice of D	
Kindee Durkee	r Creditor		-embezzell	ebt (Purpose): ed funds
Mailing Address 1212 S Victory Boulevard				
City State	Zip Code			
Burbank	CA	91502-2551		
Outstanding Balance Beginning This Period			Transactio	on ID : SD9-DEBT34
1986.11				
Amount Incurred This Period	Payma	nt This Period	Outstandir	ng Balance at Close of This Period
	i ayine			
0			0	1986.11
B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		Nature of D	ebt (Purpose):
Mailing Address				
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payme	nt This Period	Outstandir	ng Balance at Close of This Period
				· · · · · · · · · · · · · · · · · · ·
C. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Delayer Designing This Design				
Outstanding Balance Beginning This Period				
Outstanding Balance Beginning This Period				
Outstanding Balance Beginning This Period	Payme	nt This Period	Outstandir	ng Balance at Close of This Period
	Payme	nt This Period	Outstandir	ng Balance at Close of This Period
	Payme	nt This Period	Outstandir	ng Balance at Close of This Period
Amount Incurred This Period				· · · · · · · · · · · · · · · · · · ·
				ng Balance at Close of This Period
Amount Incurred This Period				· · · · · · · · · · · · · · · · · · ·
Amount Incurred This Period 1) SUBTOTALS This Period This Page (optional) 2) TOTALS This Period (last page this line number on	ıly)	• • • • •		1986.11 , 1986.11
Amount Incurred This Period 1) SUBTOTALS This Period This Page (optional)	ıly)	• • • • •		1986.11

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME	OF	COMMITTEE	(In	Full)	
	<u> </u>		(i un,	

Α	rmenian National Committee I	PAC				
Α.	Full Name (Last, First, Middle Initial) Bank of America	Transactio	n ID : H4-4-32-e			ted Activity or Event:
	Mailing Address 345 N Brand Boulevard					/oter Drive Direct Candidate Support
	City	State	Zip Code	•	F	Public Comm (ref to party only) by PAC
	Glendale Purpose of Disbursement:	CA	91203-230	3	Allo	cated Activity or Event Year-To-Date
	service charge					16
	Activity or Event Identifier: Bank of America			Category/ Type	Date	12 09 / Y Y Y Y 12 09
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
			7 7	8		16
В.	Full Name (Last, First, Middle Initial)				Alloca	ted Activity or Event:
						Administrative Fundraising Exempt
	Mailing Address				□ v	/oter Drive Direct Candidate Support
	City	State	Zip Code			Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allo	cated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/		M = M / D = D / Y = Y = Y = Y
				Туре	Date	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
					1 Г	
C.	Full Name (Last, First, Middle Initial)					ted Activity or Event:
	Mailing Address					/oter Drive Direct Candidate Support
	City	State	Zip Code		F	Public Comm (ref to party only) by PAC
					Allo	cated Activity or Event Year-To-Date
	Purpose of Disbursement:					
	Activity or Event Identifier:					7 7 *
				Category/ Type	Date	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=	TOTAL AMOUNT
					1 Г	
SI	JBTOTAL of Allocated Federal and NonFed FEDERAL SHARE	leral Activity Th +	is Page NONFEDERAL	SHARE	=	TOTAL AMOUNT
	8.00			8.00	٦Г	16.00
т	DTAL This Period (last page for each line o	nlv)(Federal st	are to 21(a)(i) and	1 1 10 1	are to 2	
	FEDERAL SHARE		NONFEDERAL			TOTAL AMOUNT
	8.00			8.00	1 Г	16.00

ı.

3

FE6AN026

PAGE 16 OF 16 FOR LINE 21a OF FORM 3X