FEC FORM 1	ORGAN	MENT OF NIZATION structions)		Office	use only
1. NAME OF COMMITTEE (in t	(Check if na is changed)	ame Example over the	: If typying, type lines	12FE4M5	
Pasadena Are	a United Democratic Heado	uarters			
ADDRESS (number and s	street) P.O. Box 672				
X (Check if addre is changed)	Sierra Made				91025
COMMITTEE'S E-MAI		CITY	S	TATE	ZIP CODE
vjinbach@ade					
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
<u>_</u>					
COMMITTEE'S FAX N					
2. DATE 0 4	/ D D / Y Y Y Y 13 2006]			
3. FEC IDENTIFICA		C C0038	0568		
			500		
4. IS THIS STATEM	ENT NEW (N)	OR X	AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of	my knowledge and be	lief it is true, correct and c	complete	
Type or Print Name of	Treasurer Mr. Varouj	an Sarkis Jinbac	hian		
Signature of Treasurer	Electronically Filed by Mr.	Varoujan Sarkis	Jinbachian Da	ate 04	13 / Y Y Y Y Y 10 / 2006
NOTE: Submission of fal	se, erroneous, or incomplete informa ANY CHANGE IN INF		erson signing this Statem		2 U.S.C. S437g.
Office Use Only		Fee Tol	further information con leral Election Commissior I Free 800-424-9530 al 202-694-1100	ז ד	EC FORM 1 Revised 02/2003)

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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.) 	didata
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the can information below.)	uluale
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	(d) This committee is a (National, State (Dem Repu	ocratic, blican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee.	or party
6.	Name of Any Connected Organization or Affiliated Committee	
	Mailing Address	
	CITY STATE ZI	P CODE 🛦
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	
	Membership Organization Trade Association Cooperative	

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Writ	e or Type Committee Name			
	Pasadena Area United I	Democratic Headquarters		
	Custodian of Records: Ide bossession of Committee	entify by name, address, (phone number books and records.	optional), and position of th	ne person in
F	ull Name			
N	Nailing Address			
т	itle or Position ♥	CITY A		 ZIP CODE 🛦
'			STATE	
_			Telephone number	
. T n	name and address of any	and address (phone number optional) of designated agent (e.g., assistant treasurer	the treasurer of the commi).	ttee; and the
	Full Name of Treasurer Mr. Var	oujan Sarkis Jinbachian		
0		oujan Sarkis Jinbachian P. O. Box 672		
0	f Treasurer Mr. Var		CA	91025
o N	f Treasurer Mr. Var	P. O. Box 672	<u>_CA</u> STATE▲	91025 ZIP CODE A
o N	f Treasurer <u>Mr. Var</u> <i>M</i> ailing Address	P. O. Box 672 Sierra Madre CITY A		
0 M T 	f Treasurer <u>Mr. Var</u> <i>M</i> ailing Address	P. O. Box 672 Sierra Madre CITY A	STATE	
O M T F C A	f Treasurer <u>Mr. Var</u> <i>M</i> ailing Address Title or Position ♥ Treasurer Full Name of Designated	P. O. Box 672 Sierra Madre CITY A	STATE	
O M T F C A	f TreasurerMr. Var Mailing Address Title or Position ▼ Treasurer Full Name of Designated Agent	P. O. Box 672 Sierra Madre CITY A	STATE	
O M T F G A M	f TreasurerMr. Var Mailing Address Title or Position ▼ Treasurer Full Name of Designated Agent	P. O. Box 672 Sierra Madre CITY A	STATE	
O M T F C A N	f TreasurerMr. Var Mailing Address Title or Position ♥ Treasurer Full Name of Designated Agent Mailing Address	P. O. Box 672 Sierra Madre CITY ▲	STATE A	ZIP CODE A

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9.	Banks or Other safety deposit box Name of Bank, D	xes	or n	nair	nta	ins		List nds		ba	Ink	s 0	r ot	hei	r de	epo	sito	orie	es i	n w	/hic	ch t	he	CO	nm	itte	e d	lepo	osit	s fu	Ind	s, h	old	s a	cco	bun	ts,	rer	nts				
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	Mailing Address																	I				1						I					I	I				1					
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