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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

ARMENIAN NATIONAL COMMITTEE PAC

ADDRESS (number and street)

104 NORTH BELMONT SUITE 200 B

Check if different than previously reported. (ACC)

GLENDALE

CA

91206

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00146969

3. IS THIS REPORT

NEW (N)

OR

AMENDED (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 Quarterly 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 (12G)
- Runoff (12R)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

in the State of

5. Covering Period

01

01

2006

through

03

31

2006

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

NAZARETH LADORIAN

Signature of Treasurer

Date

4

6

2006

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. 02/2003)

26039031868

**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
01	01	2006

 To:

MM	DD	YYYY
03	31	2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>YYYYYY</td></tr><tr><td>2006</td></tr></table>	YYYYYY	2006		1141.49
YYYYYY				
2006				
(b) Cash on Hand at Beginning of Reporting Period	1141.49			
(c) Total Receipts (from Line 19)	10240.09	10240.09		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	11381.58	11381.58		
7. Total Disbursements (from Line 31)	8230.21	8230.21		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3151.37	3151.37		
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00			
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00			

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

200303031669

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
ARMENIAN NATIONAL COMMITTEE PAC

Report Covering the Period: From:

MM	DD	YYYY
01	01	2006

 To:

MM	DD	YYYY
03	31	2006

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)	8000.00	8000.00
(ii) Unitemized	2240.00	2240.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	10240.00	10240.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	10240.00	10240.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.09	0.09
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin 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))	10240.09	10240.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10240.09	10240.09

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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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6300.00	6300.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	1930.21	1930.21
30. 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 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))..	8230.21	8230.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	8230.21	8230.21

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	10240.00	10240.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10240.00	10240.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.09	0.09
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-0.09	-0.09

26039031872

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

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

FOR LINE NUMBER: PAGE 6 / 13

(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
							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

A. Full Name (Last, First, Middle Initial)
Misak H Abdulian

Mailing Address **6311 Mirror Lake Dr**

City **Los Angeles** State **CA** Zip Code **90068**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 29 / 2006

Transaction ID: **SA11A1.4377**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sahag Baghdassarian

Mailing Address **222 Monterey Rd #506**

City **Glendale** State **CA** Zip Code **91206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 17 / 2006

Transaction ID: **SA11A1.4411**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
EDH and Associates

Mailing Address **1453 14th St Suite 224**

City **Santa Monica** State **CA** Zip Code **90404**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
02 / 15 / 2006

Transaction ID: **SA11A1.4409**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this line number only)

26039031873

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

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

FOR LINE NUMBER: PAGE 7 / 13

(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
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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

Full Name (Last, First, Middle Initial) A. Kenneth V Hachiklan		Date of Receipt MM / DD / YYYY 02 / 28 / 2006
Mailing Address 1140 Windhaven Ct		Transaction ID: SA11A1.4403
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Khatchik Hairabedian		Date of Receipt MM / DD / YYYY 03 / 07 / 2006
Mailing Address 5560 Van Nuys Blvd		Transaction ID: SA11A1.4401
City Van Nuys	State CA	Zip Code 91401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Armen Martin		Date of Receipt MM / DD / YYYY 02 / 22 / 2006
Mailing Address 14554 Dickens St		Transaction ID: SA11A1.4405
City Sherman Oaks	State CA	Zip Code 91403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

26039031874

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

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

FOR LINE NUMBER: PAGE 8/13

(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
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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

Full Name (Last, First, Middle Initial) A. Ashken Pilavjian		Date of Receipt MM / DD / YYYY 02 / 23 / 2006
Mailing Address 465 21st Place		Transaction ID: SA11A1.4414
City Santa Monica	State CA	Zip Code 90402
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Peklar Pilavjian		Date of Receipt MM / DD / YYYY 02 / 23 / 2006
Mailing Address 4946 Gloria Ave		Transaction ID: SA11A1.4416
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Robert Sotrakian		Date of Receipt MM / DD / YYYY 02 / 09 / 2006
Mailing Address 126 E 56th St 15th Floor		Transaction ID: SA11A1.4381
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	6250.00
TOTAL This Period (last page this line number only)	

26039931875

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 13	
	(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

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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

A. Full Name (Last, First, Middle Initial)
Dr. Armen Shahbazian

Mailing Address 2617 E Chapman Ave Suite 102

City	State	Zip Code
Orange	CA	92869

FEC ID number of contributing federal political committee: **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2006

Transaction ID: SA11A1.4412

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	8000.00

26039031876

**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 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

Full Name (Last, First, Middle Initial) A. Kaloogian For Congress		Transaction ID: SB23.4433 Date of Disbursement MM / DD / YYYY 03 / 07 / 2006	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	4300.00
Purpose of Disbursement		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Radanovich For Congress		Transaction ID: SB23.4429 Date of Disbursement MM / DD / YYYY 02 / 20 / 2006	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	2000.00
Purpose of Disbursement		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	6300.00

26039031877

**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 11 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

Full Name (Last, First, Middle Initial) A. Armen Carapetian		Transaction ID: SB29.4391
Mailing Address		Date of Disbursement MM / DD / YYYY 02 / 19 / 2006
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period 400.00
Candidate Name		001 Category/ Type
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) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Check copies Fee		Transaction ID: SB29.4365
Mailing Address		Date of Disbursement MM / DD / YYYY 01 / 03 / 2006
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period 4.00
Candidate Name		Category/ Type
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) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Color Dots		Transaction ID: SB29.4436
Mailing Address		Date of Disbursement MM / DD / YYYY 03 / 22 / 2006
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period 411.35
Candidate Name		001 Category/ Type
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) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	815.35
TOTAL This Period (last page this line number only)	

26039031878

**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"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

PAGE 12 / 13

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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

A. Image Cube

Full Name (Last, First, Middle Initial)
Transaction ID: SB29.4358
Date of Disbursement
01 / 10 / 2006

Mailing Address

City State Zip Code

Purpose of Disbursement
Amount of Each Disbursement this Period
400.00

Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

B. Lema Keyserian

Full Name (Last, First, Middle Initial)
Transaction ID: SB29.4394
Date of Disbursement
01 / 26 / 2006

Mailing Address

City State Zip Code

Purpose of Disbursement
Amount of Each Disbursement this Period
239.13

Candidate Name
Category/Type
001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

C. SBC

Full Name (Last, First, Middle Initial)
Transaction ID: SB29.4360
Date of Disbursement
01 / 10 / 2006

Mailing Address

City State Zip Code

Purpose of Disbursement
Amount of Each Disbursement this Period
61.16

Telephone
Candidate Name
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶ 700.29

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

26039031879

**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 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARMENIAN NATIONAL COMMITTEE PAC

Full Name (Last, First, Middle Initial) A. SBC		Transaction ID: SB29.4393
Mailing Address		Date of Disbursement
City State Zip Code		<input type="text" value="02"/> <input type="text" value="09"/> <input type="text" value="2006"/>
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
		<input type="text" value="001"/>
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) ▼	<input type="text" value="144.50"/>
State: District:		

Full Name (Last, First, Middle Initial) B. SBC		Transaction ID: SB29.4431
Mailing Address		Date of Disbursement
City State Zip Code		<input type="text" value="03"/> <input type="text" value="06"/> <input type="text" value="2006"/>
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
		<input type="text" value="001"/>
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) ▼	<input type="text" value="32.02"/>
State: District:		

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: SB29.4396
Mailing Address		Date of Disbursement
City State Zip Code		<input type="text" value="02"/> <input type="text" value="10"/> <input type="text" value="2006"/>
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
		<input type="text" value="001"/>
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) ▼	<input type="text" value="238.05"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="414.57"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1930.21"/>

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 4/6/06
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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