

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 NOV -4 A 9:09

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ARMENIAN NATIONAL COMMITTEE POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER 000146969
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 104 NORTH BELMONT STREET, SUITE 208-B		
CITY, STATE and ZIP CODE GLENDALE, CA 91206		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- 12-Day Pre-Election Report for the General
(Type of Election)
election on Nov. 7, 2000 in the State of CA
 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10-1-00</u> through <u>10-18-00</u>		
6. (a) Cash on Hand January 1, <u>19-2000</u>		\$ <u>6,040</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>1,040</u>	
(c) Total Receipts (from Line 19)	\$ <u>3,600</u>	\$ <u>12,600</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>4,640</u>	\$ <u>18,640</u>
7. Total Disbursements (from Line 30)	\$ <u>500</u>	\$ <u>14,500</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>4,140</u>	\$ <u>4,140</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9580 Local 202-534-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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

VICKERJ SONENTZ-PAPAZIAN

Signature of Treasurer

Vickerj Sonentz-Papazian

Date

10-21-00

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

(revised 9/99)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 2X

(revised 1/1/91)

NAME OF COMMITTEE ANC-PAC	REPORT COVERING PERIOD		
	FROM	TO:	
I. Receipts			
	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3,600-	12,600-	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	3,600-	12,600-	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	3,600-	12,600-	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,600-	12,600-	19
20. Total Federal Receipts (subtract line 16 from line 19) >	3,600-	12,600-	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500-	14,500-	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	500-	14,500-	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3,600-	12,600-	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,600-	12,600-	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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 - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrsak Abdulian 6311 Mirror Lake Drive Los Angeles, CA 90068	Self-employed	10-1-00	100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arbat Issakhanian 1310 South Central Avenue Glendale, CA 91204	Self-employed	10-2-00	200-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sahag Baghdassorian 1960 Stoneale Road Glendale, CA 91207	Self-employed	10-1-00	100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hacob Shirvanian 1641 Dakengate Drive Glendale, CA 91207	Retired	10-1-00	500-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: - Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Manug Haladjian 3830 Seneca Avenue Los Angeles, CA 90039	Retired	10-5-00	100-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: - Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward Marsothkhanian 1443 E. Mountain Street Glendale, CA 91207	Advanced Construction	10-5-00	100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Project Manager Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hosmanmen 501 East Colorado Glendale, CA 91205	N/A	10-4-00	500-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: - Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 1,600-

TOTAL This Period (last page this line number only) 1,600-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Armenian National Committee - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Stepan Bagdasarian</u> <u>16000 Ventura Blvd., #408</u> <u>Encino, CA 91436</u>	<u>Self-employed</u>	<u>10-5-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>attorney</u>	Aggregate Year-to-Date: <u>\$</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Pierre Chraghduan</u> <u>14535 Valley View Avenue, Suite N1</u> <u>Santa Fe Springs, CA 90670</u>	<u>Vast Trading, Inc.</u>	<u>10-5-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Owner/Operator</u>	Aggregate Year-to-Date: <u>\$</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Ardashes Gogorian</u> <u>2021 Chilton Drive</u> <u>Glendale, CA 91201</u>	<u>Self-employed</u>	<u>10-5-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Industrial Cleaning</u>	Aggregate Year-to-Date: <u>\$</u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Hagos Tehakerian</u> <u>941 Jacin Way</u> <u>Pacific Palisades, CA 90272</u>	<u>Self-employed</u>	<u>10-5-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Owner Radiator Shop</u>	Aggregate Year-to-Date: <u>\$</u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Vic Melkonian</u> <u>17110 Mayall Street</u> <u>Northridge, CA 91325</u>	<u>Budget Blinds</u>	<u>10-5-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Owner/Operator</u>	Aggregate Year-to-Date: <u>\$</u>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Homenetmen - LA</u> <u>1203 N. Vermont Ave</u> <u>Los Angeles, CA 90029</u>	<u>N/A</u>	<u>10-4-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date: <u>\$</u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Arto Kenleyan</u> <u>5460 White Oak Ave., A-321</u> <u>Encino, CA 91316-2406</u>	<u>Chaz Clothing</u>	<u>10-4-00</u>	<u>100-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Sales Rep.</u>	Aggregate Year-to-Date: <u>\$</u>	

SUBTOTAL of Receipts This Page (optional)

700-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARMENIANS NATIONAL COMMITTEE - POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Melksonian 1243 North Everett Street Glendale, CA 91207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Occupation: _____ Aggregate Year-to-Date > \$	10.5.00	100 -
Ressa Aghian 210 South Kenwood St., #200 Glendale, CA 91205 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Occupation: Consulting Aggregate Year-to-Date > \$	10.5.00	100 -
Arair Aghian, DDS 13207 Addison Street Sherman Oaks, CA 91423-2106 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Occupation: Dentist Aggregate Year-to-Date > \$	10.5.00	100 -
AAB-WR 57 Westglencrooks Glendale, CA 91423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: _____ Aggregate Year-to-Date > \$	10.5.00	300 -
Vahan Bezdikian 1924 Erin Way Glendale, CA 91206 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Occupation: Trading/Consulting Aggregate Year-to-Date > \$	10.5.00	200 -
Mary Marjanian 6368 Wynne Avenue Tarzana, CA 91355 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Marjarian Const. Occupation: Owner Aggregate Year-to-Date > \$	10.5.00	100 -
Varoujan Koundakjian 3317 North Knoll Drive Los Angeles, CA 90068 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Diamatek Inc. Occupation: Owner/operation Aggregate Year-to-Date > \$	10.5.00	200 -

SUBTOTAL of Receipts This Page (optional)

4,100 -

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

American National Committee - Political Action Committee

A. Full Name, Mailing Address and ZIP Code Katchig T. Hizon 9555 Bianca Avenue Northridge, CA 91325	Name of Employer <u>Gatt Industries</u> Occupation <u>Owner</u>	Date (month, day, year) <u>10.5.00</u>	Amount of Each Receipt this Period <u>150-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code John Krikorian P.O. Box 2088 Glendale, CA 91209	Name of Employer <u>Cal-Con Enterprises</u> Occupation <u>Owner/Operator</u>	Date (month, day, year) <u>10.5.00</u>	Amount of Each Receipt this Period <u>50-</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
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)

200-

TOTAL This Period (last page this line number only)

3,600-

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Armenian National Committee - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Feinstein for Senate 10350 Santa Monica Blvd., #250 Los Angeles, CA 90025	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-4-00	\$500
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$500

TOTAL This Period (last page this line number only)

\$500

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has 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"/> First Class Mail	POSTMARKED 11/2/00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 Q.A.Q.	 11/4/00
PREPARER	DATE PREPARED