

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2001 MAY -1 A 11: 38

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ARMENIAN NAT'L COMM. - PAC		2. FEC IDENTIFICATION NUMBER 000146969
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 104 NORTH BELMONT ST. SUITE 208-B		
CITY, STATE and ZIP CODE GLENDALE, CA 91206		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on 11/7/00 in the State of CA

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10.19.00</u> through <u>11.27.00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 6,040
(b) Cash on Hand at Beginning of Reporting Period	\$ 4,140	
(c) Total Receipts (from Line 19)	\$ 21,925	\$ 34,575
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 26,115	\$ 40,615
7. Total Disbursements (from Line 30)	\$ 20,151	\$ 34,651
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5,964	\$ 5,964
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

For further information contact:
Federal Election Commission
700 E Street, NW
Washington, DC 20462
Toll Free 800-424-9590
Local 202-694-1100

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
VICKEN SONENTZ-PAPAZIAN (ACTING TREASURER)

Signature of Treasurer

Vicken Sonentz-Papazian

Date

4/23/01

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 9/03)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
ANC - PAE	FROM	TO	
	10/19/00	11/27/00	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	21,975-	34,575-	11(c)(1)
ii. Unitemized			11(c)(2)
iii. Total (add i and ii) >	21,975-	34,575-	11(c)(3)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(a)
d. Total Contributions (add a, b and c) >	21,975-	34,575-	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) >	21,975-	34,575-	19
20. Total Federal Receipts (subtract line 18 from line 19) >			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i. Federal Share			21(a)(2)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a, b, ii, and b) >			22
22. Transfers to Affiliated/Other Party Committees			23
23. Contributions to Federal Candidates/Committees and Other Political Committees	16,050-	30,550-	24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
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) >	4,101-	4,101-	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	20,151-	34,651-	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	21,975-	34,575-	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	21,975-	34,575-	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 7 OF 9
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
Souzi M. Zerounian 10626 Valley Spring Lane, #304 Toluca Lake, CA 91602	AM/PM Market	11-1-00	\$ 600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Financial Analyst	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
Mary Koropatian 9914 Milburn Drive Barbanc, CA 91352	Victory Adult Day CARE CENTER	11-3-00	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Administrator	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
Ara Khatebadorian 1614 E. Chung Chase, #3 Glendale, CA 91206	Astarez Publishing	11-1-00	\$ 700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Editor	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
Artin Monoukian 626 N. Isabel Ave., Unit 102 Glendale, CA 91206	County of Los Angeles	11-1-00	\$ 700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Social Worker	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
Anahit Stepanian Ford 1822 1/2 Sharon Lane Glendale, CA 91208	CA Assoc. for Bilingual Education	11-1-00	\$ 700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Admin. Asst.	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
Steve Dourian 3379 Aligned Drive Encino, CA 91436	Law Offices of Robert Dourian	10-25-00	\$ 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	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
Souzi Zerounian 10626 Valley Spring Lane, #304 Toluca Lake, CA 91602	AM/PM Market	11-1-00	\$ 700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Financial Analyst	Aggregate Year-to-Date: \$	

SUBTOTAL of Receipts This Page (optional)

\$ 5,150.00

TOTAL This Period (last page this line number only)

\$ 5,150.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 9
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
Haig Boyadjian 7356 Laura Lane Reseda, CA 91335	Asbarez Publishing	11-3-00	\$ 900.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Asst. Editor</u> 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
Ara Khachatourian 1614 E. Chevy Chase, # 3 Glendale, CA 91206	Asbarez Publishing	11-1-00	\$ 900.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Editor</u> 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
Adrin Nazarian 8012 050 Ave. Winnetka, CA 91306	EDH & Associates	11-6-00	\$ 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Political Consultant</u> 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
Alex Sordor 556 West Wilson Ave, # 18 Glendale, CA 91203	Armenian Nat! Com.	11-3-00	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Ex. Dir.</u> 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
Ohannes Tashjian 711 1/2 W. Glenoaks Ave. Glendale, CA 91202	Western Palace of the Armenian Apostolic Church	11-3-00	\$ 900.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>DIRECTOR</u> 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
Armine Don Gigerian 9828 Amanda Ave. Tujunga, CA 91042	Armenian Cultural Fund.	10-25-00	\$ 700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Administrator</u> 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
Artin Manoukian 626 N. Deibel Ave, # 102 Glendale, CA 91206	L.A. County - Gain Program	11-6-00	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Social Worker</u> Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$5,650 ✓

TOTAL This Period (last page this line number only)

\$10,800 ✓

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 9
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
Hrag Yedekian 3349 Mary St., #A La Crescent, CA 91214	25,000 in 2000 Voter Registration Project	11-6-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Outreach Coordinator 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
Souzi Zerounian 10626 Valley Spring Lane, #304 Toluca Lake, CA 91602	AM/PM Market	11-3-00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Financial Analyst 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
Angela Pinto 500 E. Santa Anita, Apt. A Burbank, CA 91501	Victory Adult Day Care Center	11-3-00	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director 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
Mary Karapetian 9914 Milburn Drive Burbank, CA 91352	Victory Adult Day CARE CENTER	11-3-00	\$1500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Administrator 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
Richard Gragoosian 5500 Friendship Heights, #906 Bethesda, MD 20814	ABT Assoc.	10-24-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst 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
Ara Chachin Philadelphia, PA	Self-Employed	10-21-00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Medical Doctor 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
Edward Dambalagian 3712 Clairton Drive Mitchellville, MD 20721	Self-Employed	10-24-00	\$200.00
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)

\$3,600.00

TOTAL This Period (last page this line number only)

\$14,400.00

SCHEDULE A

ITEMIZED RECEIPTS

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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
ANC-SF 51 Commonwealth Ave San Francisco, CA 94118	N/A	10-19-00	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Rita Varganian P.O. Box 27863 Los Angeles, CA 90027	Armenian Relief Society	10-19-00	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Administration	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
Mher Dar Ohannessian 1912 Hillhurst Ave., Suite B Los Angeles, CA 90027	Self.	10-19-00	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Accountant	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
Ramig Astanian 27 West 47th St. NY, NY 10036	Self	11-1-00	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	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
Armine Sarkisyan 1155 Thompson Ave. #5 Glendale, CA	Armenian Nat'l Comm.	11-1-00	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Admin. Asst.	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
Levon D. Asatourian 11419 Bedfordshire Ave. Potomac, MD 20854	U.S. Dept. of Transport.	10-22-00	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst	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
Sahag Dardarian 13513 Creekside Drive Silver Spring, MD 20904	Self-employed	10-22-00	\$ 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Engineer	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$ 1,550 -

TOTAL This Period (last page this line number only)

\$ 15,950 -

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 9
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
Anne M. Dardarian 13513 Creekside Drive Silver Spring, MD 20904	Montgomery County	10-27-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Educator	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
Paprouh Yekhozorian 2658 Glenlyle Drive Vienna, VA 22180	Self	10-26-00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst	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
Armen Carapehian 908 Wild Forest Drive Gaithersburg, MD 20878	Paca Global Resources	10-20-00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst	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
Gourgen Assaharian 6809 Lupine Lane McLean, VA 22101	Retired	10-23-00	\$150.00
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
Jacques Kouchakdjian 2804 Hathaway Terrace Silver Spring, MD 20906	Retired	10-27-00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Arshag Sarkissian 20 Wade Court Gaithersburg, MD 20878	AS Interior Design	10-27-00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Owner/Operator	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
Margaret B. Komachian 6 Allaway Ct. Patoma, MD 20854	Retired	10-22-00	\$150.00
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)

\$975-

TOTAL This Period (last page this line number only)

\$16,925-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 19 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

ARMENIAN National Committee - Political Actions Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vahé Doukhtian 28 Wacha Court Gaithersburg, MD 20878	Self-employed Occupation: Leather Work	10-27-00	\$ 300-
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Ayvazov 11201 Blackhorse Court Potomac, MD 20854	Retired Occupation: —	10-19-00	\$ 50-
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
Raffi Asatourian 11419 Bedfordshire Ave. Potomac, MD 20854	Nightlife Broadcasting Channel Occupation: Public Relations	10-19-00	\$ 100-
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
Zaruhi Armenian 2151 Dominion Way Falls Church, VA	Broadway Worldwide Occupation: Vice-President	10-22-00	\$ 150-
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Christopher Hehonian 1764 Carcoran St., NW Washington, DC 20009	Armenian Nat'l Comm. Occupation: Gov't Relations	10-21-00	\$ 100-
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Roobina Sookazian 3715 Keefen Ct. Fairfax, VA 22033	Homemaker Occupation: —	10-20-00	\$ 50-
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Bedros Bandazian Two Foxmore Drive Richmond, VA 23233	Self-employed Occupation: Real Estate	10-24-00	\$ 250-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$ 1000-

TOTAL This Period (last page this line number only)

\$ 17,925-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 9
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
Aro Asatourian 11419 Bedfordshire Ave. Potomac, MD 20854	U.S. Justice Dept.	10-19-00	\$100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst	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
Sarkis Nazarian 9509 Falls Road Potomac, MD 20854	Self-employed	10-21-00	\$500-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Gorabed Armutian 6006 Galsom Drive McLean, VA 22101	Siemens, Inc	10-22-00	\$150-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	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
Dr. Miray Komporian 8624 Finerock Road Laurel, MD 20724	Self-Employed	10-22-00	\$150-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Medical Doctor	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
Aram Komporian 1207 S. Frederick St. Arlington, VA 22204	Armenian Nat'l Committee (ANLC)	10-20-00	\$250-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Exec. Dir.	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
Vorken P. Zanjan 5515 Freyman Drive Chevy Chase, MD 20815	U.S. Govt	10-22-00	\$100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Civil Servant	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
Seda Galentian 220 Grandview Circle Germantown, MD 20874	Homemaker/Retired	10-22-00	\$100-
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)

\$1,350-

TOTAL This Period (last page this line number only)

\$19,275-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 9
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
Elizabeth Choudjian 5055 Seminary Rd. #1522 Alexandria, VA 22311	Armenian Nat'l Comm.	10-22-00	\$100 -
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Administrator 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
Krikor Moussessian 7502 Conantuff Ct. Springfield, VA 22153	Self-employed	10-23-00	\$150 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Shoe Store Owner 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
Khosro Habeshian, Rev. 13808 Bergenfield Drive Gaithersburg, MD 20878	Self-employed	10-22-00	\$1000 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Reverend/Pastor 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
Stephen Krikorian 4300-L Cedar Forest Drive Fairfax, VA 22030	Security Exchange Comm.	10-22-00	\$150 -
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Analyst 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
Avedis Abrahamian A2 Eldwich Court Potomac, MD 20854	Self-employed	10-20-00	\$100 -
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Dentist 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
Col. Harry Sachakian 20520 Falcon Landing Circle, 2510 Sterling, VA 20165	Retired	10-23-00	\$100 -
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A 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
Arsha Nourian 22 Monroe St., #202 Rowville, MD 20850	Self-employed	10-22-00	\$100 -
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Auto Body Repair Aggregate Year-to-Date: \$		

SUBTOTAL of Receipts This Page (optional)

\$1,700

TOTAL This Period (last page this line number only)

\$20,975

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 9
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
Ara Melkomein 1621 East Gude Drive Rockville, MD 20850 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self- Occupation: <u>Autobody Repair</u> Aggregate Year-to-Date: \$	10-22-00	\$1000-
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$1000-

TOTAL This Period (last page this line number only)

\$21,975-

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
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
Sherman for Congress 21755 Ventura Blvd., Box 193 Woodland Hills, CA 91364	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-19-00	\$ 300-
Sherman for Congress 21755 Ventura Blvd., Box 193 Woodland Hills, CA 91364	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-5-00	\$ 4,700-
Ferraria 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)	10-19-00	\$ 500-
Schiff for Congress 36 S. Raymond Ave., #206 Pasadena, CA 91105	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-4-00	\$ 5000-
Citizens for Strabones P.O. Box 26222 Baltimore, MD 21210	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23-00	\$ 4,550-
Friends of Connie Moretha 7101 Wisconsin Ave., #102 Bethesda, MD 20814	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23-00	\$ 500-
Gedjensan Re-election Committee P.O. Box 1218 Bozrah, CT 06334	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-19-00	\$ 500-
U.S. Postmaster Glendale, CA Branch	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-1-00	\$ 145-
U.S. Postmaster Glendale, CA Branch Glendale, CA	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-2-00	\$ 3,052-

SUBTOTAL of Disbursements This Page (optional)

19,247-

TOTAL This Period (last page this line number only)

19,247-

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
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 - PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>U.S. Postmaster Glendale, CA Branch Glendale, CA</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11-3-00</i>	<i>\$ 684.00</i>
<i>U.S. Postmaster Glendale, CA Branch Glendale, CA</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11-1-00</i>	<i>\$ 200.00</i>
<i>Verdugo Banking Co. 400 No. Brand Blvd., #900 Glendale, CA 91203</i>	Purpose of Disbursement: <i>Service Charge</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-24-00</i>	<i>\$ 20.00</i>
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

904-

TOTAL This Period (last page this line number only)

20,151-

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 4-30-01
<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	
 <i>W</i> PREPARER	 5-1-01 DATE PREPARED