



July 19, 1993

Ms. Terry Reynolds
Reports Analyst
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington, DC 20463

RECEIVED
FEDERAL ELECTION
COMMISSION
WASHINGTON
DC 20543
JUL 20 2 38 PM '93

Identification # C00003764

Dear Ms. Reynolds:

Treasurer Mark Gorman is unavailable to sign the June Federal Election Commission report. I have signed the report as the newly-appointed assistant treasurer of the National Restaurant Association Political Action Committee. An amended Statement of Organization identifying the assistant treasurer will be filed within 10 days as outlined in 102.2(a)(2).

The National Restaurant Association Political Action Committee has exercised our "best efforts" to obtain information for Schedule A supporting line 11(a)(i) on the June 1993 report. A solicitation card requesting this information has been sent to each contributor in order to comply with Federal Election Commission rule 11CFR104.3a4i.

Sincerely,

A handwritten signature in cursive script that reads "Don Thoren".

Don Thoren
Assistant Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Jul 20 2 39 PM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	2. FEC IDENTIFICATION NUMBER C0000 3764
CITY, STATE and ZIP CODE Washington, DC 20036	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

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 checked="" 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 |
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day 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>6/1/93</u> through <u>6/30/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 32,904.08
(b) Cash on Hand at Beginning of Reporting Period	\$ 82,750.12	
(c) Total Receipts (from Line 19)	\$ 18,885.24	\$ 107,877.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 101,635.36	\$ 140,781.36
7. Total Disbursements (from Line 30)	\$ 37,700.00	\$ 76,846.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 63,935.36	\$ 63,935.36
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	

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 Don Thoren, Assistant Treasurer	
Signature of Treasurer 	Date 7/20/93

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC	REPORT COVERING PERIOD FROM 6/1/93 TO: 6/30/93	
	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)	13,626.18	63,642.84
ii. Unitemized	5,092.64	22,659.25
iii. Total (add i and ii) >	18,718.82	86,302.09
b. Political Party Committees	.00	.00
c. Other Political Committees (such as PACs)	18,718.82	20,750.00
d. Total Contributions (add a iii, b and c) >	.00	107,052.09
12. Transfers From Affiliated/Other Party Committees	.00	.00
13. All Loans Received	.00	.00
14. Loan Repayments Received	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	166.42	825.19
18. Transfers from Nonfederal Account for Joint Activity	.00	.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	18,885.24	107,877.28
20. Total Federal Receipts (subtract line 18 from line 19) >	18,885.24	107,877.28
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	.00	1,296.00
ii. Non-Federal Share	.00	.00
b. Other Federal Operating Expenditures	.00	1,296.00
c. Total Operating Expenditures (add a i, a ii, and b) >	.00	.00
22. Transfers to Affiliated/Other Party Committees	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	37,700.00	75,400.00
24. Independent Expenditures (use Schedule E)	.00	.00
25. Coordinated Expenditures Made by Party Committees (3 U.S.C. 441a(d)) (use Schedule F)	.00	.00
26. Loan Repayments Made	.00	.00
27. Loans Made	.00	.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	.00	.00
b. Political Party Committees	.00	.00
c. Other Political Committees (such as PACs)	.00	.00
d. Total Contribution Refunds (add a, b and c) >	.00	.00
29. Other Disbursements	.00	150.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	37,700.00	76,846.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	37,700.00	76,846.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	18,718.82	107,052.09
33. Total Contribution Refunds (from line 28d)	.00	.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	18,718.82	107,052.09
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	.00	1,296.00
36. Offsets to Operating Expenditures (from line 15)	.00	.00
37. Net Operating Expenditures (subtract line 36 from 35) >	.00	1,296.00

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 9
	For Line Number 11a(1)	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Wade Avondoglio 350 Andover - Sparta Road Andover, NJ 07821	Name of Employer Perona Farms	Date(month, day, year) 06/01/93	Amount of Each Receipt This Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 500.00		

Full Name, Mailing Address and Zip Code Bernard Axel 2300 Woodcrest Place Birmingham, AL 35209	Name of Employer Christian's Classic Cuisine	Date(month, day, year) 06/03/93	Amount of Each Receipt This Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 500.00		

Full Name, Mailing Address and Zip Code Stephen B Bregdon Oxbow Farm, Dickinson Road Keene, NH 03431	Name of Employer Oxbow Farm	Date(month, day, year) 06/30/93	Amount of Each Receipt This Period 300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 300.00		

Full Name, Mailing Address and Zip Code Ted Burke PO Box 65 Capitola, CA 95010	Name of Employer Shadowbrook Restaurant	Date(month, day, year) 06/01/93	Amount of Each Receipt This Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 500.00		

SUBTOTAL of Receipts This Page (optional)> 1550.00

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 2	Of 9
	For Line Number 11a(i)	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
James A Collins PO Box 92092 Los Angeles, CA 90009	Collins Foods International,	06/01/93	1200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 1200.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Walter Conti Route 611 & 313 Doylestown, PA 18901	Conti Cross Keys Inn	06/07/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 500.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
J. Craig Dickens 8 River Bend Circle Exeter, NH 03833		06/30/93	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Aggregate Year To Date> \$ 600.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Brad Etkins 3513 Berlin Turnpike Newington, CT 06111	Ruths Chris Steakhouse	06/23/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 2500.00

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 9
	For Line Number	
	11a(1)	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alice Eure PO Box 6357 Raleigh, NC 27628	The Angus Barn Limited	06/28/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward P Grace, III 1275 Wampanoag Trail PO Box 276 East Providence, RI 02915	Phelps Grace Co Inc.	06/28/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1150.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Greenfield PO Box 1002 Ludlow, VT 05149	Ires, Inc.	06/30/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wendy L Hayes Carrier Road Hopkinton, NH 03229		06/30/93	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 600.00		

SUBTOTAL of Receipts This Page (optional) 1400.00

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 9
	For Line Number 11a(i)	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Reg Johnston 2722 Darnbour Warren, OH 44483		06/29/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year To Date >	\$ 200.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Kelley 714 First Place Hermosa Beach, CA 90254	Concept: Hospitality Group	06/21/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Hospitality Management		
	Aggregate Year To Date >	\$ 200.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James M Kobylarz 171 Atlantic Avenue North Hampton, NH 03862		06/30/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year To Date >	\$ 300.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Henry Kristal 1664 University Avenue St. Paul, MN 55104	Embers Restaurants	06/21/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur		
	Aggregate Year To Date >	\$ 250.00	

SUBTOTAL of Receipts This Page (optional)> 950.00

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 5	Of 9
	For Line Number 11e(f)	

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 for such committee.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
L. R. LaRoche DBA Calico County Restaurant 1800 Washington St. Suite #315 Amarillo, TX 79102	Calico County Restaurant	06/28/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ralph Labnon 5617 S.E. Foxcross Place Dorham, NH 03581	Town & Country Motor Inn	06/30/93	600.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 600.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rolf Lewis 2108 Broadway San Francisco, CA 94115	Rolf's Restaurant Associates	06/28/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary L Marston PO Box 556 North Hampton, NH 03862	Abercrombie & Finch Restaurant	06/30/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional)> 1650.00

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	Of
	6	9
For Line Number		11a(1)

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
K.J. Mullins		06/30/93	600.00
Occupation			
Aggregate Year To Date >		\$	600.00

Receipt for: Primary | General
| Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
N. Donald S O'Neill 300t Monroe Avenue Rochester, NY 14618	Spring House Restaurant	06/07/93	1000.00
Occupation			
Aggregate Year To Date >		\$	1000.00

Receipt for: Primary | General
| Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arthur Pappathanni 426 Lynnway Lynn, MA 01905	Scargas Realty I	06/30/93	300.00
Occupation			
Aggregate Year To Date >		\$	300.00

Receipt for: Primary | General
| Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joan H Perrault PO Box 435 Milton, MA 03851		06/30/93	600.00
Occupation			
Aggregate Year To Date >		\$	600.00

Receipt for: Primary | General
| Other (specify)

SUBTOTAL of Receipts This Page (optional) 2500.00

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 7	Of 9
	For Line Number 11a(i)	

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 for such committee.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Parker J Ryan 401 Lafayette Road Hampton, NH 03842	Widow Fletcher's Tavern	06/30/93	450.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 450.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred J Schaake 724 Lafayette Road PO Box 232 Hampton, NH 03842	Hampton Beach Casino Properties	06/30/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William J Slater 2484 County #01 Delewan, WI 53115	Millie's Restaurants	06/03/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pamela Thurston Route 132, PO Box 97 Sanbornton, NH 03269		06/30/93	450.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 450.00		

SUBTOTAL of Receipts This Page (optional)> 1400.00

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	Of
	8	9
For Line Number		11a(1)

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Timia 325 Lafayette Road PO Box 1259 Hampton, NH 03842	Galley Hatch Restaurant	06/30/93	450.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 1,550.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eamien Vacalebre 578 Chase Avenue Waterbury, CT 06704	C.Vac	06/28/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional)> 1450.00

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 9 OF 9
FOR LINE NUMBER 11(a)(i)

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)

National Restaurant Association Political Action Committee

00000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Gorman 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$50.00 (\$25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Thoren 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$41.66 (\$20.83 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 249.96	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elaine Graham 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$47.60 (\$23.80 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 214.20	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Culpepper 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 239.03	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JoAnn Emerson 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 239.03	
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):	Occupation	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):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$226.18

TOTAL This Period (last page this line number only)

\$13,626.18

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

National Restaurant Association Political Action Committee C0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
1st American Bank 740 15th Street, NW Washington, DC 20036	Interest received on investment-money market checking account	6/30/93	\$85.62
Receipt For: <input type="checkbox"/> Primary <input 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
1st American Bank 11751 Pinnacle Drive McLean, VA 22102-3833	Interest received on cash equivalent fund	6/30/93	\$80.80
Receipt For: <input type="checkbox"/> Primary <input 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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):	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
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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$166.42
TOTAL This Period (last page in this line number only)	\$166.42

SCHEDULE B (ITEMIZED DISBURSEMENTS)

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 7
	For Line Number	
	23	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Ben Cardin for Congress 20 South Charles Street 10th Floor Baltimore, MD 21201	Cont. to Ben Cardin (MD-03) ----- Disbursement for: P Primary General -- - - - - Other (specify)	06/15/93	1000.00

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Bob Matsui for Congress 90 Box 13190 Sacramento, CA 95813	Cont. to Bob Matsui (CA-05) ----- Disbursement for: P Primary General .. - - - - Other (specify)	06/15/93	2000.00

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Citizens for Bunning 6703 Foxcroft Road Prospect, KY 40059	Cont. to Jim Bunning (KY-06) ----- Disbursement for: P Primary General -- - - - - Other (specify)	06/15/93	2000.00

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Citizens for Kasich 665 Macon Alley Columbus, OH 43206	Cont. to John Kasich (OH-12) ----- Disbursement for: P Primary General -- - - - - Other (specify)	06/24/93	500.00

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Conte. to Elect Mel Reynolds PO Box 308217 Chicago, IL 60631	Cont. to Mel Reynolds (IL-02) ----- Disbursement for: P Primary General -- - - - - Other (specify)	06/15/93	1000.00

SUBTOTAL of Disbursements This Page(optinal).....> 6500.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 2	Of 7
	For Line Number 23	

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 for such committee.

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Susan Molinari PO Box 060248 New Dorp Station Staten Island, NY 10306-	Cont. to Susan Molinari (NY-14) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	06/15/93	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Donald Manzullo for Congress 400 Washington Street Oregon, IL 61061-	Cont. to Don Manzullo (IL-16) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1992 General Debt Retirement	06/15/93	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Fred Grandy for Congress Cont. PO Box 1775 Sioux City, IA 51102-	Cont. to Fred Grandy (IA-05) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	06/15/93	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Friends of Bryan '94 300 South 4th Street #1400 Las Vegas, NV 89101-	Cont. to Richard Bryan (NV) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	06/15/93	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Friends of John Boehner 7908 Cincinnati-Dayton Road West Chester, OH 45069-	Cont. to John Boehner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	06/15/93	500.00

SUBTOTAL of Disbursements This Page(optimal).....> 6000.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	Of
	3	7
	For Line Number	
	23	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Friends of Mike Parker 219 North Jackson Street Brookhaven, MS 39601-	Cont. to Mike Parker (MS-04)	06/15/93	1000.00
	Disbursement for: P Primary General		
	Other (specify)		

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Hancock For Congress 300 East Pershing Springfield, MO 65806-	Cont. to Mel Hancock (MO-07)	06/15/93	2000.00
	Disbursement for: P Primary General		
	Other (specify)		

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Hobson for Congress Committee 333 North Limestone Street Springfield, OH 45503-	Cont. to Dave Hobson (OH-07)	06/15/93	500.00
	Disbursement for: P Primary General		
	Other (specify)		

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Ike Skelton for Congress Cate. PO Box A Harrisonville, MO 64701-	Cont. to Ike Skelton (MO-04)	06/15/93	500.00
	Disbursement for: P Primary General		
	Other (specify)		

Full Name ,Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
John Lewis for Congress 1520 Pinehurst Drive, SW Atlanta, GA 30311-	Cont. to John Lewis (GA-05)	06/15/93	2000.00
	Disbursement for: P Primary General		
	Other (specify)		

SUBTOTAL of Disbursements This Page(optional).....> 6000.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 4	Of 7
	For Line Number 23	

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 for such committee.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Ken Calvert for Congress PO Box 51992 Riverside, CA 92517-	Purpose of Disbursement Cont. to Ken Calvert (CA-43)	Date(month, day, year) 06/15/93	Amount of Each Disbursement This Period 2000.00
	Disbursement for: Primary General R Other (specify) 1992 General Debt Retirement		

Full Name, Mailing Address and Zip Code Laughlin for Congress PO Box 504 West Columbia, TX 77486-	Purpose of Disbursement Cont. to Greg Laughlin (TX-14)	Date(month, day, year) 06/24/93	Amount of Each Disbursement This Period 500.00
	Disbursement for: P Primary General Other (specify)		

Full Name, Mailing Address and Zip Code Maloney for Congress 89 East 92nd Street New York, NY 10128-	Purpose of Disbursement Cont. to C. Maloney (NY-13)	Date(month, day, year) 06/15/93	Amount of Each Disbursement This Period 1000.00
	Disbursement for: P Primary General Other (specify)		

Full Name, Mailing Address and Zip Code McMulty for Congress PO Box 1560 Green Island, NY 12183-	Purpose of Disbursement Cont. to Mike McMulty (NY-21)	Date(month, day, year) 06/15/93	Amount of Each Disbursement This Period 1000.00
	Disbursement for: P Primary General Other (specify)		

Full Name, Mailing Address and Zip Code Orton for Congress P.O. Box 1997 Provo, UT 84603-	Purpose of Disbursement Cont. to Bill Orton (UT-3)	Date(month, day, year) 06/15/93	Amount of Each Disbursement This Period 1000.00
	Disbursement for: P Primary General Other (specify)		

SUBTOTAL of Disbursements This Page(optional).....> 5500.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 5	Of 7
	For Line Number 23	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-Elect Congressman Joe Moakley Committee 99 Summer Street, Suite 1250 Boston, MA 02110	Cont. to Joe Moakley (MA-09) Disbursement for: [P] Primary [General] -- Other (specify)	06/15/93	2000.00
Re-Elect Don Sundquist Date. 67 Madison Ave. 12th Floor Memphis, TN 38103	Cont. to Don Sundquist (TN-07) Disbursement for: [P] Primary [General] -- Other (specify)	06/15/93	2500.00
Re-Elect Nancy Johnson to Congress Committee 141 South Mountain Drive New Britain, CT 06052	Cont. to Nancy Johnson (CT-06) Disbursement for: [P] Primary [General] -- Other (specify)	06/15/93	2000.00
Richard E. Neel for Congress Committee 76 Magnolia Terrace Springfield, MA 01108	Cont. to Richard Neel (MA-02) Disbursement for: [P] Primary [General] -- Other (specify)	06/15/93	1000.00
Santorum for Congress Suite 2, 316 Washington Road Pittsburg, PA 15216	Cont. to Rick Santorum (PA-18) Disbursement for: [P] Primary [General] -- Other (specify)	06/15/93	2000.00

SUBTOTAL of Disbursements This Page (optional).....> 9500.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	Of
	6	7
	For Line Number	
	23	

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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scott Klug for Congress, Inc. PO Box 5619 Madison, WI 53705-	Cont. to Scott Klug (WI-04) ----- Disbursement for: P Primary General -- " - - - - - Other (specify)	06/24/93	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Slaughter Re-Election Cmte. 700 First Federal Plaza Rochester, NY 14614-	Cont. to L. Slaughter (NY-28) ----- Disbursement for: P Primary General -- " - - - - - Other (specify)	06/21/93	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Visclosky for Congress Cmte. P.O. Box 10003 Merrillville, IN 46411-	Cont. to Pete Visclosky (IN-1) ----- Disbursement for: P Primary General -- " - - - - - Other (specify)	06/15/93	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wally Herger for Congress Committee PO Box 2223 Marysville, CA 95901-	Cont. to Wally Herger (CA-02) ----- Disbursement for: P Primary General -- " - - - - - Other (specify)	06/15/93	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wynn for Congress '94 9700 Central Avenue, #306 Landover, MD 20785-	Cont. to Albert Wynn (MD-04) ----- Disbursement for: P Primary General -- " - - - - - Other (specify)	06/24/93	500.00

SUBTOTAL of Disbursements This Page (optional).....> 4000.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
 National Restaurant Association Political Action Committee C0000 3764

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jean Louis at Watergate 2650 Virginia Avenue, NW Washington, DC	Reception gift certificate for Ken Calvert (CA-43) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/93	\$200.00 (in-kind)
Talent for U.S. Congress 955 Executive Parkway St. Louis, MO 63141	Cont. to Jim Talent (MO-2) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) redesignated	2/24/93 (orig. reported in Feb.) 6/1/93	\$1,000 Memo \$1,000 Memo
C. 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
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)	200.00
TOTAL This Period (last page this line number only)	\$37,700.00

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.

Hand Delivered

DATE OF RECEIPT

7-20-93

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

DATE OF RECEIPT

T.M.H.
PREPARED

7-21-93
DATE PREPARED