

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL ROOM

2002 JAN 31 P 4 38

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

National Restaurant Association Political Action Committee

ADDRESS (number and street)

1200 17th Street, NW

Check if different than previously reported. (ACC)

Washington

DC

20038

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 000003764

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)  
 Mar 20 (M3)  
 Apr 20 (M4)

May 20 (M5)  
 Jun 20 (M6)  
 Jul 20 (M7)

Aug 20 (M8)  
 Sep 20 (M9)  
 Oct 20 (M10)

Nov 20 (M11) (Non-Fraction Year Only)  
 Dec 20 (M12) (Non-Fraction Year Only)  
 Jan 31 (YE)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)

(c) 12-Day PRE-Election Report for the:

Primary (12P)  
 Convention (12C)

General (12G)  
 Special (12S)

Runoff (12R)

Election on

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

04

01

2000

through

04

30

2000

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

Lee Culpepper

Signature of Treasurer

*Lee Culpepper*

Date

01

31

2002

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

Office Use Only

FEC FORM 3X  
(Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

National Restaurant Association Political Action Committee

Report Covering the Period From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2000"/>		<input type="text" value="192,669.26"/>
(b) Cash on Hand at Beginning of Reporting Period	<input type="text" value="73,437.42"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25,642.44"/>	<input type="text" value="68,989.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<input type="text" value="99,079.86"/>	<input type="text" value="221,959.04"/>
7. Total Disbursements (from Line 30)	<input type="text" value="16,378.00"/>	<input type="text" value="137,857.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="83,701.86"/>	<input type="text" value="83,701.86"/>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="16,927.00"/>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 8X (Revised 1/01)

Page 3

Write or Type Committee Name

National Restaurant Association Political Action Committee

Report Covering the Period:

From:

04 01 2000

To:

04 30 2000

1. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	24,565.00	
(ii) Unitemized .....	667.88	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	25,432.88	56,480.28
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) .....	25,432.88	56,480.28
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	1,000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	208.56	1,489.50
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	25,642.44	58,969.78
20. Total Federal Receipts (subtract Line 16 from Line 19) .....	25,642.44	58,969.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 2X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	41.87	2,101.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	41.87	2,101.06
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	12,675.13	116,875.13
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441o(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1,880.00	2,880.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1,880.00	2,880.00
29. Other Disbursements	808.00	16,300.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	15,378.00	137,937.18
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	15,378.00	137,937.18
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	25,432.88	56,480.28
33. Total Contribution Refunds (from Line 28(d))	1,880.00	2,880.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	23,672.88	53,820.28
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	41.87	2,101.06
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	41.87	2,101.06

**SCHEDULE D (FEC Form 3X)  
DEBTS AND OBLIGATIONS  
Excluding Loans**

(Use separate schedule(s) for each numbered line) PAGE 1 OF 1  
FOR LINE NUMBER: 9  
(check only one)  9  10

NAME OF COMMITTEE (in Full)  
National Restaurant Association PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Larry Forth

Mailing Address  
PO Box 787

City State ZIP Code  
Lebanon, TN 37088-0787

Nature of Debt (Purpose):  
Misappropriated Funds

Outstanding Balance Beginning This Period 1 6 9 2 7 0 0	Payment This Period 0 0 0 0 0 0 0	Outstanding Balance at Close of This Period 1 6 9 2 7 0 0
Amount Incurred This Period 0 0 0 0 0 0 0		

1) SUBTOTALS This Period This Page (optional)	1 6 9 2 7 0 0
2) TOTALS This Period (last page this line number only)	0 0 0
3) TOTALS OUTSTANDING LOANS from Schedule C (last Page only)	1 6 9 2 7 0 0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

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

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

FOR LINE NUMBER:		PAGE 1 OF 11	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Edward Iacono</b>		Date of Receipt 04 19 2000
Mailing Address <b>6211 E. 42nd Avenue</b>		Amount of Each Receipt This Period 1,300.00
City <b>Denver</b>	State Zip Code <b>CO 80216</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000244070002
Name of Employer <b>Seattle Fish Company</b>	Occupation <b>President</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1,300.00	

Full Name (Last, First, Middle Initial) <b>B. Richard Ayers</b>		Date of Receipt 04 19 2000
Mailing Address <b>6225 E. Falmount Dr.</b>		Amount of Each Receipt This Period 500.00
City <b>Denver</b>	State Zip Code <b>CO 80231-1128</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000245720003
Name of Employer <b>Restaurant Specialists, Inc.</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Ayers</b>		Date of Receipt 04 19 2000
Mailing Address <b>6225 E. Falmount Dr.</b>		Amount of Each Receipt This Period 165.00
City <b>Denver</b>	State Zip Code <b>CO 80231-1128</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243970004
Name of Employer <b>Restaurant Specialists, Inc.</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 165.00	

SUBTOTAL of Receipts This Page (optional)	1,965.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 2 OF 11  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Karan Kristinpell Parker**

Mailing Address  
**7802 E. Hampden Avenue**  
City **Denver** State **CO** Zip Code **80231**

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

Name of Employer: **The Fresh Fish Company** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **500.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**500.00**

Transaction ID: 1000000243820008

Full Name (Last, First, Middle Initial)  
**B. Diane White**

Mailing Address  
**5650 N. Peoria Street**  
City **Denver** State **CO** Zip Code **80221**

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

Name of Employer: **Auto-Chlor System** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **325.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**325.00**

Transaction ID: 1000000243818006

Full Name (Last, First, Middle Initial)  
**C. Dennis McCann**

Mailing Address  
**7962 East Kenyon Drive**  
City **Denver** State **CO** Zip Code **80237**

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

Name of Employer: **Information Requested** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **550.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**550.00**

Transaction ID: 1000000243880007

SUBTOTAL of Receipts This Page (optional) **1,475.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 3 OF 11  
(check only one)  
 11a 13  11b 14  11c 15  12 16  17

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Anthony Varda</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>50 Cambridge Rd City Madison State WI Zip Code 53704-5908</b>		Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000002441200003
Name of Employer <b>Information Requested</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>	

Full Name (Last, First, Middle Initial) <b>B. M. William Gerard</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>420 8th St S City La Crosse State WI Zip Code 54601-4508</b>		Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000002442000008
Name of Employer <b>Gerard Realty Corporation</b>	Occupation <b>President</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Dennis Glatzer</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>420 Detroit St City Denver State CO Zip Code 80208-4312</b>		Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000002440800010
Name of Employer <b>Information Requested</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>200.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>600.00</b>
TOTAL This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4 OF 11
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. John Guardo</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>450 25th St.</b>		Amount of Each Receipt This Period <b>1,300.00</b>
City <b>Greeley</b>	State Zip Code <b>CO 80631</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 100000243940011
Name of Employer <b>Meadow Gold Dairy</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,300.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Scott Jones</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>646 Bryant St.</b>		Amount of Each Receipt This Period <b>325.00</b>
City <b>Danver</b>	State Zip Code <b>CO 80204</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 100000243950012
Name of Employer <b>Robinson Dairy</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>325.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Michael Goldberg</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>14200 E. Monarch Dr Suite E</b>		Amount of Each Receipt This Period <b>325.00</b>
City <b>Aurora</b>	State Zip Code <b>CO 80011-4804</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 100000243960013
Name of Employer <b>Beverage Distributors Corp.</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>325.00</b>	

SUBTOTAL of Receipts This Page (optional)	<b>1,950.00</b>
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 6 OF 11  
(check only one)  
 11a 13  11b 14  11c 15  12 16  17

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

**A. Jon Plamann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**7316 Westbourne**  
 City State Zip Code  
**Waunakee WI 53719**  
 Occupation  
**Restaurateur**  
 Amount of Each Receipt this Period  
**200.00**  
 Transaction ID: 1000000243600014

**B. Frank W. Bering, Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**2631 North 12th Street**  
 City State Zip Code  
**Grand Junction CO 81501-8202**  
 Occupation  
**Restaurateur**  
 Amount of Each Receipt this Period  
**200.00**  
 Transaction ID: 1000000243600016

**C. Ed Novak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**1421 Oneida Street**  
 City State Zip Code  
**Denver CO 80220**  
 Occupation  
**Restaurateur**  
 Amount of Each Receipt this Period  
**1,000.00**  
 Transaction ID: 1000000243600016

**SUBTOTAL of Receipts This Page (optional)** ..... **1,400.00**  
**TOTAL This Period (last page this line number only)** .....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Joseph Fasalar**

Mailing Address  
**1450 N. Central Ave.**  
City **Phoenix** State **AZ** Zip Code **85004**

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

Name of Employer: **Vlad Corporation** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **5,000.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**5,000.00**

Transaction ID: **10000002436700017**

Full Name (Last, First, Middle Initial)  
**B. Larry Glewisch**

Mailing Address  
**1373 S. Allen Way**  
City **Denver** State **CO** Zip Code **80112**

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

Name of Employer: **Jackson's All American Sports** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **325.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**325.00**

Transaction ID: **10000002437500018**

Full Name (Last, First, Middle Initial)  
**C. Bill McCormick**

Mailing Address  
**44837 SW Riverwood Rd.**  
City **Portland** State **OR** Zip Code **97219**

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

Name of Employer: **McCormick & Schmick Management Group** Occupation: **Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **5,000.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**5,000.00**

Transaction ID: **10000002437100019**

SUBTOTAL of Receipts This Page (optional) **10,325.00**

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 OF 11  
(check only one)  
 11a  11b  11c  12  
13 14 15 16 17

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Geoff Bailey**

Mailing Address  
**801 Corporate Circle**  
City **Golden** State **CO** Zip Code **80401-5630**

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

Name of Employer: **Arby's/The Bailey Company** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify) **▼**

Aggregate Year-to-Date **650.00**

Date of Receipt: **04 19 2000**

Amount of Each Receipt this Period: **650.00**

Transaction ID: 10000002436300020

Full Name (Last, First, Middle Initial)  
**B. David McDougal**

Mailing Address  
**1324 E 17th Ave**  
City **Denver** State **CO** Zip Code **80218-1527**

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

Name of Employer: **Dougal's Catering Services** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify) **▼**

Aggregate Year-to-Date **1,000.00**

Date of Receipt: **04 19 2000**

Amount of Each Receipt this Period: **1,000.00**

Transaction ID: 10000002437300021

Full Name (Last, First, Middle Initial)  
**C. David McDougal**

Mailing Address  
**1324 E 17th Ave**  
City **Denver** State **CO** Zip Code **80218-1527**

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

Name of Employer: **Dougal's Catering Services** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify) **▼**

Aggregate Year-to-Date **1,325.00**

Date of Receipt: **04 19 2000**

Amount of Each Receipt this Period: **325.00**

Transaction ID: 10000002438900022

SUBTOTAL of Receipts This Page (optional) **1,975.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Ronald Livesay</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>5700 Wadsworth Bypass</b>		Amount of Each Receipt this Period <b>1,000.00</b>
City <b>Arvada</b>	State Zip Code <b>CO 80002-2539</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243840023
Name of Employer <b>Goodberry's</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Pete Meersman</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>430 E. 7th Avenue</b>		Amount of Each Receipt this Period <b>400.00</b>
City <b>Denver</b>	State Zip Code <b>CO 80203</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243800024
Name of Employer <b>Colorado Restaurant Association</b>	Occupation <b>Executive</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>400.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Tom Garrett</b>		Date of Receipt <b>04 19 2000</b>
Mailing Address <b>P.O. Box 774199</b>		Amount of Each Receipt this Period <b>650.00</b>
City <b>Steamboat Springs</b>	State Zip Code <b>CO 80477</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243800025
Name of Employer <b>La Montana &amp; SW Restaurant</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>650.00</b>	

SUBTOTAL of Receipts This Page (optional)	<b>2,050.00</b>
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 9 OF 11	
<input checked="" type="checkbox"/>	11a 13	<input type="checkbox"/>	11b 14	<input type="checkbox"/>	11c 15
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	12 18
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Robert Hahn</b>		Date of Receipt <b>04 19 2000</b>	
Mailing Address <b>P.O. Box 81487 Suite 310</b>		Amount of Each Receipt this Period <b>325.00</b>	
City <b>Denver</b>	State <b>CO</b>	Zip Code <b>80208-4726</b>	Transaction ID: 100000243840826
FEC ID number of contributing federal political committee <b>C</b>		Aggregate Year-to-Date <b>325.00</b>	
Name of Employer <b>Airport Services, Inc.</b>		Occupation <b>Executive</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Tom Flanagan</b>		Date of Receipt <b>04 19 2000</b>	
Mailing Address <b>224 Spyglass Cir</b>		Amount of Each Receipt this Period <b>650.00</b>	
City <b>Louisville</b>	State <b>CO</b>	Zip Code <b>80077-3246</b>	Transaction ID: 100000243810027
FEC ID number of contributing federal political committee <b>C</b>		Aggregate Year-to-Date <b>650.00</b>	
Name of Employer <b>Outback Steakhouse Denver Joint</b>		Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Matt Larson</b>		Date of Receipt <b>04 18 2000</b>	
Mailing Address <b>3501 W. 10th St</b>		Amount of Each Receipt this Period <b>325.00</b>	
City <b>Grasley</b>	State <b>CO</b>	Zip Code <b>80634</b>	Transaction ID: 100000243870028
FEC ID number of contributing federal political committee <b>C</b>		Aggregate Year-to-Date <b>325.00</b>	
Name of Employer <b>Stampede Steak Ranch Stampede</b>		Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	<b>1,300.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 11							
	(check only one)							
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. John Ziegler**

Mailing Address  
**7373 S Alton Way Suite 202**

City State Zip Code  
**Denver CO 80112-2332**

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

Name of Employer  
**Jackson's All American Sports**

Occupation  
**Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**500.00**

Transaction ID: 1000000243750023

Full Name (Last, First, Middle Initial)  
**B. Donald Cusley**

Mailing Address  
**220 Worthington Mall**

City State Zip Code  
**Worthington OH 43085**

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

Name of Employer  
**Franco's Pizza**

Occupation  
**Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**500.00**

Transaction ID: 1000000244040030

Full Name (Last, First, Middle Initial)  
**C. William Hoppe**

Mailing Address  
**5228 Pinehurst Drive**

City State Zip Code  
**Boulder CO 80301**

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

Name of Employer  
**Tam O'Shanter**

Occupation  
**Restaurateur**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**325.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**325.00**

Transaction ID: 1000000244069031

SUBTOTAL of Receipts This Page (optional) ..... **1,325.00**

TOTAL This Period (last page this line number only) ..... **1,325.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 11  
(check only one)  
 11a  
 11b  
 11c  
 12  
 13  
 14  
 15  
 16  
 17

Any information copied from such Reports and Statements may not be add 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**

Full Name (Last, First, Middle Initial)  
**A. Lea Culver**

Mailing Address  
**540 Water St.  
Prairie du Sac**

City State Zip Code  
**WI 63678**

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

Name of Employer Occupation  
**Culver Franchising System Restaurateur**

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) **200.00**

Date of Receipt  
**04 19 2000**

Amount of Each Receipt this Period  
**200.00**

Transaction ID: **10000002437600032**

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify)

Date of Receipt

Amount of Each Receipt this Period

Transaction ID:

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify)

Date of Receipt

Amount of Each Receipt this Period

Transaction ID:

SUBTOTAL of Receipts This Page (optional) **200.00**

TOTAL This Period (last page this line number only) **24,565.00**

**200.00**

**24,565.00**



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

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

FOR LINE NUMBER:		PAGE 1 OF 1	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. SunTrust Bank**

Mailing Address  
**Post Office Box 85024**

City State Zip Code  
**Richmond VA 23260-5024**

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

Name of Employer Occupation  
**Interest Earned**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1,489.50**

Date of Receipt  
**04 30 2000**

Amount of Each Receipt This Period  
**209.58**

Transaction ID: 10000002480700033

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt This Period

Transaction ID:

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt This Period

Transaction ID:

SUBTOTAL of Receipts This Page (optional)	<b>209.58</b>
TOTAL This Period (last page this line number only)	<b>209.58</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address

**PO Box 85024**

City

State

Zip Code

**Richmond**

**VA**

**23260-5024**

Purpose of Disbursement

**April Bank Fees**

Candidate Name

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

04 30 2000

Amount of Each Disbursement this Period

41.87

Transaction ID: 1800900245060002

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

04 30 2000

Amount of Each Disbursement this Period

Transaction ID:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

04 30 2000

Amount of Each Disbursement this Period

Transaction ID:

SUBTOTAL of Disbursements This Page (optional) ▶

41.87

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

41.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)								PAGE 1 OF 6	
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Culberson for Congress</b>		Date of Disbursement 04 04 2000	
Mailing Address <b>P.O. Box 56485</b>		Amount of Each Disbursement this Period 2,500.00	
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77256</b>	24K Category/ Type
Purpose of Disbursement <b>YTD: \$2500.00 Culberson, U.S. HOUSE 7th TX</b>		Candidate Name <b>John Culberson</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>2000 Primary Runoff U.S. House</b>		
State: <b>TX</b> District: <b>7</b>	Transaction ID: 100000245690003		

Full Name (Last, First, Middle Initial) <b>B. John Lewis for Congress Committee</b>		Date of Disbursement 04 12 2000	
Mailing Address <b>1570 Pinhurst Drive SW</b>		Amount of Each Disbursement this Period 2,000.00	
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30311</b>	24K Category/ Type
Purpose of Disbursement <b>YTD: \$2000.00 John Lewis, U.S. HOUSE 5th GA</b>		Candidate Name <b>John Lewis</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>▼</b>		
State: <b>GA</b> District: <b>6</b>	Transaction ID: 100000244130004		

Full Name (Last, First, Middle Initial) <b>C. Simpson for Congress</b>		Date of Disbursement 04 12 2000	
Mailing Address <b>Box 1541</b>		Amount of Each Disbursement this Period 500.00	
City <b>Boise</b>	State <b>ID</b>	Zip Code <b>83701</b>	24K Category/ Type
Purpose of Disbursement <b>YTD: \$500.00 Mike Simpson, U.S. HOUSE 2nd ID</b>		Candidate Name <b>Mike Simpson</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>▼</b>		
State: <b>ID</b> District: <b>2</b>	Transaction ID: 100000244490005		

SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (in Full)  
**National Restaurant Association Political Action Committee**

**A. Citizens for Tom Petri**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**Post Office Box 270**  
City  
**Waukesha** State **WI** Zip Code **54986**

Date of Disbursement  
**04 12 2000**

Amount of Each Disbursement this Period  
**600.00**

Purpose of Disbursement  
**YTD: \$600.00 Tom Petri, U.S. HOUSE 6th WI** Category/Type **24K**

Candidate Name  
**Tom Petri**

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

State: **WI** District: **6**

Transaction ID: 100000244800006

**B. Jim Davis for Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**P.O. Box 2984**  
City  
**Washington** State **DC** Zip Code **20013**

Date of Disbursement  
**04 12 2000**

Amount of Each Disbursement this Period  
**500.00**

Purpose of Disbursement  
**YTD: \$500.00 Jim Davis, U.S. HOUSE 11th FL** Category/Type **24K**

Candidate Name  
**Rep. Jim Davis**

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

State: **FL** District: **11**

Transaction ID: 100000244810007

**C. Jefferson Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**650 Perdus Street Suite 2348**  
City  
**New Orleans** State **LA** Zip Code **70130**

Date of Disbursement  
**04 12 2000**

Amount of Each Disbursement this Period  
**1,000.00**

Purpose of Disbursement  
**YTD: \$1000.00 William J. Jefferson, U.S. HOUSE 2nd LA** Category/Type **24K**

Candidate Name  
**William J. Jefferson**

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

State: **LA** District: **2**

Transaction ID: 100000244820008

SUBTOTAL of Disbursements This Page (optional) ..... **2,000.00**

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 6

21b  22  23  24  25  
 26  27  28a  28b  28c  29

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial)

Date of Disbursement

**A. Bill Thomas Campaign Committee**

01  02  03  04  05  06  
 07  08  09  10  11  12  13  
 14  15  16  17  18  19  20  21  
 22  23  24  25  26  27  28  29

Mailing Address

**P.O. Box 396**

City

**Bakersfield**

Purpose of Disbursement

**YTD: \$1000.00 Bill Thomas, U.S. HOUSE 21st CA**

Candidate Name

**Bill Thomas**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CA**

District: **21**

Amount of Each Disbursement this Period

**1,000.00**

**24K**  
Category/  
Type

Transaction ID: 1000002445300008

Full Name (Last, First, Middle Initial)

Date of Disbursement

**B. Linder for Congress**

01  02  03  04  05  06  
 07  08  09  10  11  12  13  
 14  15  16  17  18  19  20  21  
 22  23  24  25  26  27  28  29

Mailing Address

**Post Office Box 942060**

City

**Atlanta**

Purpose of Disbursement

**YTD: \$500.00 John Linder, U.S. HOUSE 4th GA**

Candidate Name

**Congressman John Linder**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **GA**

District: **4**

Amount of Each Disbursement this Period

**500.00**

**24K**  
Category/  
Type

Transaction ID: 1000002445400018

Full Name (Last, First, Middle Initial)

Date of Disbursement

**C. Buck McKean for Congress**

01  02  03  04  05  06  
 07  08  09  10  11  12  13  
 14  15  16  17  18  19  20  21  
 22  23  24  25  26  27  28  29

Mailing Address

**Post Office Box 2071**

City

**Santa Clara**

Purpose of Disbursement

**YTD: \$500.00 Howard "Buck" McKean, U.S. HOUSE 25th CA**

Candidate Name

**Howard P. "Buck" McKean**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CA**

District: **25**

Amount of Each Disbursement this Period

**500.00**

**24K**  
Category/  
Type

Transaction ID: 1000002445500011

SUBTOTAL of Disbursements This Page (optional)

**2,000.00**

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 4 OF 6	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 28
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Moran for Congress</b>		Date of Disbursement 04 12 2000	
Mailing Address <b>P.O. Box 2618</b>		Amount of Each Disbursement this Period <b>500.00</b>	
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22301</b>	Category/Type <b>24K</b>
Purpose of Disbursement <b>YTD: \$500.00 James P. Moran, U.S. HOUSE 8th VA</b>		Candidate Name <b>James P. Moran</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>VA</b>	District: <b>8</b>		
Transaction ID: 1000002445200012			

Full Name (Last, First, Middle Initial) <b>B. Walden for Congress</b>		Date of Disbursement 04 12 2000	
Mailing Address <b>Post Office Box 1091</b>		Amount of Each Disbursement this Period <b>1,000.00</b>	
City <b>Head River</b>	State <b>OR</b>	Zip Code <b>97031</b>	Category/Type <b>24K</b>
Purpose of Disbursement <b>YTD: \$1000.00 Greg Walden, U.S. HOUSE 2nd OR</b>		Candidate Name <b>Greg Walden</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>OR</b>	District: <b>2</b>		
Transaction ID: 1000002445700013			

Full Name (Last, First, Middle Initial) <b>C. Georgians for Jackson</b>		Date of Disbursement 04 12 2000	
Mailing Address <b>6086 Brownell Rd</b>		Amount of Each Disbursement this Period <b>1,000.00</b>	
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30328</b>	Category/Type <b>24K</b>
Purpose of Disbursement <b>YTD: \$1000.00 Johnny Jackson, U.S. HOUSE 8th GA</b>		Candidate Name <b>Mr. Johnny Jackson</b>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>GA</b>	District: <b>8</b>		
Transaction ID: 1000002445800014			

SUBTOTAL of Disbursements This Page (optional)	<b>2,500.00</b>
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Southern Wine &amp; Spirits of NV</b>		Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">04</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">26</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000</div>
Mailing Address <b>950 United Circle</b> City State Zip Code City <b>NV</b> Zip Code <b>89431</b>		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>
Purpose of Disbursement <b>Refund</b>	Candidate Name	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">22Y</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>B. Boca West Club, Inc.</b>		Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">04</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">26</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000</div>
Mailing Address <b>P.O. Box 3870</b> City State Zip Code City <b>FL</b> Zip Code <b>33431</b>		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">1,610.00</div>
Purpose of Disbursement <b>Refund</b>	Candidate Name	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">22Y</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: inline-block;">00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">00</div>
Mailing Address City State Zip Code		Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
Purpose of Disbursement Candidate Name	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1,860.00</div>
TOTAL This Period (last page this line number only) ..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1,860.00</div>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Iowa Hospitality Association</b>		Date of Disbursement 04 03 2000	
Mailing Address <b>8525 Douglas Avenue Suite 47</b>		Amount of Each Disbursement this Period <b>800.00</b>	
City <b>Des Moines</b>	State <b>IA</b>	Zip Code <b>50322</b>	Category/Type
Purpose of Disbursement <b>Non-federal disbursement</b>			
Candidate Name		Transaction ID: 1000002480100020	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:	Full Name (Last, First, Middle Initial) <b>B.</b>		
Mailing Address		Date of Disbursement	
City		Amount of Each Disbursement this Period	
State	Zip Code	Category/Type	
Purpose of Disbursement		Transaction ID:	
Candidate Name		Full Name (Last, First, Middle Initial) <b>C.</b>	
Mailing Address		Date of Disbursement	
City		Amount of Each Disbursement this Period	
State	Zip Code	Category/Type	
Purpose of Disbursement		Transaction ID:	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional) .....		800.00	
TOTAL This Period (last page this line number only) .....		800.00	



