

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

Mar 20 9 50 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC	2. FEC IDENTIFICATION NUMBER C 0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check 1 different than previously reported 1200 17th Street, NW	3. <input checked="" type="checkbox"/> This committee qualified as a non-candidate committee DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE Washington, DC 20038	

4. TYPE OF REPORT

(a) April 15 Quarterly Report Monthly Report Due On:

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

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

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 _____

Termination Report

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>02/01/96</u> through <u>02/29/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 239,180.70
(b) Cash on Hand at Beginning of Reporting Period	\$ 169,206.77	
(c) Total Receipts (from Line 18)	\$ 36,506.89	\$ 62,120.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 205,713.66	\$ 301,300.97
7. Total Disbursements (from Line 30)	\$ 3,220.47	\$ 98,807.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 202,493.19	\$ 202,493.19
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 995 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-215-3425
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 Thuren, Assistant Treasurer	Date 3/20/96
Signature of Treasurer 	

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

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
National Restaurant Association PAC		FROM 02/01/96	TO: 02/29/96
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		21,753.84	42,403.84
i. Itemized (use Schedule A)		9,380.14	11,777.44
ii. Unitemized			
iii. Total (add i and ii) >		31,133.98	54,181.28
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		4,500.00	5,000.00
d. Total Contributions (add a ii, b and c) >		35,633.98	59,181.28
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.)		872.91	2,938.99
18. Transfers from Non-Federal Account for Joint Activity		.00	.00
19. Total Receipts (add 11 d, 12, 13, 14, 15, 16, 17, and 18) >		36,506.89	62,120.27
20. Total Federal Receipts (subtract line 18 from line 19) >		36,506.89	62,120.27
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		.00	.00
ii. Non-Federal Share		.00	.00
b. Other Federal Operating Expenditures		220.47	318.33
c. Total Operating Expenditures (add a i, a ii, and b) >		220.47	318.33
22. Transfers to Affiliated/Other Party Committees		.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		3,000.00	98,489.45
24. Independent Expenditures (use Schedule E)		.00	.00
25. Coordinated Expenditures Made by Party Committees (2 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. Individual/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	.00
30. Total Disbursements (add 21 c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		3,220.47	98,807.78
31. Total Federal Disbursements (subtract line 21 a i from line 30) >		3,220.47	98,807.78
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11 d)		35,633.98	59,181.28
33. Total Contribution Refunds (from line 28d)		.00	.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		35,633.98	59,181.28
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		220.47	318.33
36. Offsets to Operating Expenditures (from line 15)		.00	.00
37. Net Operating Expenditures (subtract line 36 from 35) >		220.47	318.33

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 10
	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
Wade Avondoglio 350 Andover - Sparta Road Andover, NJ 07821	Perona Farms	02/22/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bernard Axel PO Box 59284 Birmingham, AL 35259 9284	Christian's Classic Cuisine	02/26/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
M J Berkovick 1835 South 251st Place Seattle, WA 98198	Northlake Tavern	02/22/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eggy Berkowitz 33 Everett Street Allston, MA 02134	Legal Seafoods	02/26/96	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)> 1500.00

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 10
	For Line Number 11a(1)	

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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
Douglas S Cavanaugh 110 Newport Center Drive #110 Newport Beach, CA 92660 6907	The Ruby Restaurant Group	02/13/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Martha J Cheshire 451 Cliffside Drive Somerset, KY 42501 8011	Dairy Queen	02/12/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
David Cruz 110 West Davis Mesitas, TX 75208	Tejano Restaurant	02/22/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Carole L Cunningham 947 Mountain Road Cheshire, CT 06410	J. Cunningham Incorporated	02/22/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur Aggregate Year To Date: \$ 350.00	

SUBTOTAL of Receipts This Page (optional)> 1500.00

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 10
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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
Horace Divine 7555 Elkhorn Mountain Littleton, CO 80127	University of Colorado	02/22/96	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
Jerome Fein 613 Royal Street New Orleans, LA 70130	Joseph Fein Caterer's, Inc.	02/22/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General <input checked="" type="checkbox"/> 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
Charles Goodson 3809 Ambassador Caffery Hwy. Lafayette, LA 70503	Charley G's Seafood Grill	02/22/96	700.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date \$ 700.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Lee Higgins 1537 Via Lopez Rancho Palms Verde, CA 90274	Trans/Pacific Restaurants, Inc.	02/21/96	1500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date \$ 1500.00

SUBTOTAL of Receipts This Page (optional)> 2950.00

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 10
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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
Louis Hochman 111 North Big Spring Midland, TX 79701	Luigi's	02/08/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wesley Howard 3515 Preston Street, Suite 102 Mesquite, TX 75005	Dairy Queen	02/22/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen Johnson 1001 North Central Avenue Phoenix, AZ 85012	Maccyo's Restaurants	02/21/96	1500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date \$ 1500.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Kavabough 5096 Cotton Lane Waukegan, WI 53197	Esquire Club	02/26/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date \$ 400.00	

SUBTOTAL of Receipts This Page (optional)> 2800.00

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

SCHEDULE A IDENTIFIED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 5	of 10
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	11811)	

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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
Thomas A Marshaw 84 Beacon Street Boston, MA 02108	Hampshire House Corporation	02/15/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date: \$ 5000.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Kinsey 3837 Evelyn Drive Salt Lake City, UT 84124	Sizzler Restaurants	02/28/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brent Kyte 3902 East Pima Street Tucson, AZ 85712 4322	Pizza Hut	02/21/96	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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wayne J Lapp 4282 South Akron Court Englewood, CO 80111	Aurora Summit Restaurant	02/28/96	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

SUBTOTAL of Receipts This Page (optional)	6700.00
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 6	OF 10
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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
Jack E Major 9235 Shawnee Run Road Cincinnati, OH 45243	Sold Star Grill Inc	02/28/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David McDougal 1324 A East 17th Avenue Denver, CO 80218	Dougal's Catering Service	02/01/96	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard McLaughlin PO Box 116 Lincolnville, MR 04849	Lobster Pound Restaurant Inc.	02/21/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Shwin Novak 1421 Oneida Street Denver, CO 80220	Brokey Restaurants	02/22/96	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) 2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule (a)	Page	OF
for each category of the	7	10
Detailed Summary Page	-----	-----
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	11a(1)	

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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
Receipt for: Primary General Other (specify)	Occupation PAC		
	Aggregate Year To Date > \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alfred T Peck, Jr. 506 Hill Street, Box 567 Green Lake, WI 54941 0567	Alfred's Inc. - Alfred's	02/25/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Receipt for: Primary General Other (specify)	Occupation		
	Aggregate Year To Date > \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Sellers Box 14536 Oklahoma City, OK 73113	Sellers Marketing Company, Inc.	02/26/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURATEUR		
	Aggregate Year To Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional) > 1,200.00

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
	2 10
	For Line Number
	11a(1)

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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
Walter D Seput 374 Bush Street San Francisco, CA 94104	Sam's Grill	02/28/96	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
John Struckman, Jr. 6520 Powers Ferry Road, #120 Atlanta, GA 30339	S.M. Services, Inc.	02/21/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ether L Snyder 13502 East Virginia Avenue Baldwin Park, CA 91706	In-N-Out Burgers Inc.	02/21/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Packie Irujillo 199 First Street, #212 Los Altos, CA 94022 2807	Harmon Management Corporation	02/21/96	1300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1300.00		

SUBTOTAL of Receipts This Page (optional) 2,750.00

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 10
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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
Lawrence J Weiss 100 East 40th Street Apt. 22X New York, NY 10016	Weiss Foodservice Visions, Inc.	02/28/96	200.00
	Occupation Restaurateur		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date \$ 200.00		

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

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

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NAME OF COMMITTEE (in Full)

National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Sizzler International Good Gov't Fund 12655 W. Jefferson Blvd. Los Angeles, CA 90066</p>	<p>Name of Employer contribution Occupation</p>	<p>Date (month, day, year) 02/21/96</p>	<p>Amount of Each Receipt this Period 3,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 3,000.00</p>		
<p>B. Full Name, Mailing Address and ZIP Code PepsiCo Concerned Citizens Fund P.O. Box 32070 Louisville, KY 40232-2070</p>	<p>Name of Employer contribution Occupation</p>	<p>Date (month, day, year) 02/06/96</p>	<p>Amount of Each Receipt this Period 1,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 1,500.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		

SUBTOTAL of Receipts This Page (optional) 4,500.00

TOTAL This Period (last page this line number only) 4,500.00

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NAME OF COMMITTEE (in Full)

National Restaurant Association PAC

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crestar NA P.O. Box 26150 Richmond, VA 23260	interest earned on cash equivalent fund	02/29/96	363.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 604.61	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Securities Corp. P.O. Box 498 Richmond, VA 23204-0498	interest earned on money market acct.	02/29/96	509.51
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 2,334.38	
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)	872.91
TOTAL This Period (last page this line number only)	872.91

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 21 b

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NAME OF COMMITTEE (in Full)

National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express 200 Vesey Street New York, NY 10285	credit card fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/96	220.47
B. 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
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) 220.47

TOTAL This Period (last page this line number only) 220.47

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SCHEDULE B OTHER DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 1

	For Line Number	
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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dunnings for Congress 2300 Calvert Street Baltimore, MD 21203-	Cont. to Dunnings (MD-7) ----- Disbursement for: P Primary General -- - - - - - - - - - - Other (specify)	02/09/96	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ken Calvert for Congress PO Box 1414 Riverside, CA 92502-	cont. to Ken Calvert (CA-43) ----- Disbursement for: P Primary General -- - - - - - - - - - - Other (specify)	03/14/96	2000.00

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SUBTOTAL of Disbursements This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	3,000.00

**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.

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DATE OF RECEIPT

3-20-96

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 and Registration

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 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

Sub

PREPARER

3-20-96

DATE PREPARED

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