

**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.

12PB4M5

National Restaurant Association Political Action Committee

ADDRESS (number and street)

1200 17th Street, NW

Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C CD0003784

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

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)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

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

03

01

2000

through

03

31

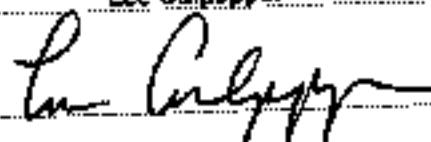
2000

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 Guiseppe

Signature of Treasurer



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**

Page 2

FEC Form 3X (Revised 1/01)

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="152,669.28"/>
(b) Cash on Hand at Beginning of Reporting Period	<input type="text" value="84,119.94"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="32,864.70"/>	<input type="text" value="33,327.34"/>
(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="116,974.86"/>	<input type="text" value="186,996.60"/>
7. Total Disbursements (from Line 30)	<input type="text" value="43,837.23"/>	<input type="text" value="122,559.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="73,437.42"/>	<input type="text" value="73,437.42"/>
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 3X (Revised 1/01)

Page 3

Write or Type Committee Name

National Restaurant Association Political Action Committee

Report Covering the Period: From: 03 01 2000 To: 03 31 2000

I. 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 (see Schedule A) .....	24,735.00	
(ii) Unitemized .....	6,035.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	30,770.00	31,047.40
(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) .....	30,770.00	31,047.40
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 38, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	1,000.00	1,000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1,084.70	1,378.04
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) .....	32,854.70	33,327.34
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	32,854.70	33,327.34

**DETAILED SUMMARY PAGE**

of Disbursements

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	2,037.23	2,069.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2,037.23	2,069.18
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	41,000.00	104,000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1,000.00
(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))	0.00	1,000.00
29. Other Disbursements	500.00	16,500.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	43,637.23	122,569.18
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	43,537.23	122,559.18

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans) (from Line 11(d), page 3)	30,770.00	31,047.40
33. Total Contribution Refunds (from Line 28(d))	0.00	1,000.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	30,770.00	30,047.40
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2,037.23	2,069.18
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	2,037.23	2,069.18

**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:  
(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	Outstanding Balance at Close of This Period 1 6 9 2 7 0 0
Amount Incurred This Period		

- 1) SUBTOTALS This Period This Page (optional) \_\_\_\_\_ ▶
- 2) TOTALS This Period (last page this line number only) \_\_\_\_\_ ▶
- 3) TOTALS OUTSTANDING LOANS from Schedule C (last Page only) \_\_\_\_\_ ▶
- 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

1 6 9 2 7 0 0
0 0 0
1 6 9 2 7 0 0

**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 1 OF 9	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 18

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. Frank Cates</b>		Date of Receipt 03 03 2000
Mailing Address <b>Southern Wine &amp; Spirits of NV 950 United Circle</b>		Amount of Each Receipt this Period 250.00
City <b>Sparks</b>	State Zip Code <b>NV 89431-5514</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000002405100002
Name of Employer <b>Southern Wine and Spirits of</b>	Occupation <b>Sales Consultant</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. James Sheppard</b>		Date of Receipt 03 03 2000
Mailing Address <b>N63W13400 Leon Rd</b>		Amount of Each Receipt this Period 200.00
City <b>Menomonee Falls</b>	State Zip Code <b>WI 53061-3306</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000002406400003
Name of Employer <b>Sandwich Properties</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>G. Robert St. John</b>		Date of Receipt 03 03 2000
Mailing Address <b>P.O. Box 17318</b>		Amount of Each Receipt this Period 500.00
City <b>Hattiesburg</b>	State Zip Code <b>MS 39404</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 10000062406200004
Name of Employer <b>The Purple Parrot</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	

SUBTOTAL of Receipts This Page (optional)	950.00
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 2 OF 9	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
	13		14		15
				<input type="checkbox"/>	12
					16
					17

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

**A. Gustavo Gutierrez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
6150 Channon Dr.  
 City Las Vegas State NV Zip Code 89146-3041  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: \_\_\_\_\_  
 Occupation: Restaurateur  
 Information Requested: \_\_\_\_\_  
 Receipt For:  Primary  General  Other (specify) \_\_\_\_\_  
 Aggregate Year-to-Date: 260.00

Date of Receipt: 03 / 03 / 2000  
 Amount of Each Receipt this Period: 260.00  
 Transaction ID: 100000240830005

**B. Ronald Magruder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
P.O. Box 787 305 Hartman Drive North  
 City Lebanon State TN Zip Code 37088  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Cracker Barrel Old Country Store  
 Occupation: Restaurateur  
 Information Requested: \_\_\_\_\_  
 Receipt For:  Primary  General  Other (specify) \_\_\_\_\_  
 Aggregate Year-to-Date: 5,000.00

Date of Receipt: 03 / 03 / 2000  
 Amount of Each Receipt this Period: 5,000.00  
 Transaction ID: 100000240480006

**C. Winston Parker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
Queens Drive P.O. Box 4847  
 City Spartanburg State SC Zip Code 29303  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: \_\_\_\_\_  
 Occupation: Restaurateur  
 Information Requested: \_\_\_\_\_  
 Receipt For:  Primary  General  Other (specify) \_\_\_\_\_  
 Aggregate Year-to-Date: 276.00

Date of Receipt: 03 / 03 / 2000  
 Amount of Each Receipt this Period: 275.00  
 Transaction ID: 100000240720007

SUBTOTAL of Receipts This Page (optional): 5,625.00  
 TOTAL This Period (last page this five 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 8  
 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. John Farguharson**

Mailing Address  
**1 Belmont Blvd  
Sawell**

City State Zip Code  
**NI 08080-2431**

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

Name of Employer Occupation  
**International Food Safety Council President**

Receipt For:  Primary  General  Other (specify)

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

Date of Receipt  
**03 03 2000**

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

Transaction ID: 1000002405100008

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

Mailing Address  
**PO Box 29502**

City State Zip Code  
**Raleigh NC 27626-0502**

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

Name of Employer Occupation  
**Golden Corral Corporation Restaurateur**

Receipt For:  Primary  General  Other (specify)

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

Date of Receipt  
**03 03 2000**

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

Transaction ID: 1000002406500019

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

Mailing Address  
**P.O. Box 4014 378 Chase Avenue**

City State Zip Code  
**Waterbury CT 06704-0514**

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

Name of Employer Occupation  
**CVAC Enterprises Restaurateur**

Receipt For:  Primary  General  Other (specify)

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

Date of Receipt  
**03 03 2000**

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

Transaction ID: 1000002404900010

**SUBTOTAL** of Receipts This Page (optional) **11,000.00**

**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 4 OF 9
<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. Robert L. Ansara</b>		Date of Receipt <b>03 03 2000</b>
Mailing Address <b>3803 S. Valley View Suite 2</b>		Amount of Each Receipt this Period <b>1,000.00</b>
City <b>Las Vegas</b>	State Zip Code <b>NV 89103-2922</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000240500011
Name of Employer <b>Ricardo's of Las Vegas, 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 ▼ <b>1,000.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Robert Williams, Jr.</b>		Date of Receipt <b>03 03 2000</b>
Mailing Address <b>1036 Market Street</b>		Amount of Each Receipt this Period <b>600.00</b>
City <b>Columbia</b>	State Zip Code <b>SC 29201-8741</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000240780012
Name of Employer <b>Lizard's Thicket Restaurants</b>	Occupation <b>Restaurateur</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Jay DiPietro</b>		Date of Receipt <b>03 03 2000</b>
Mailing Address <b>PO Box 3070</b>		Amount of Each Receipt this Period <b>1,610.00</b>
City <b>Boca Raton</b>	State Zip Code <b>FL 33431-0970</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243520013
Name of Employer <b>Boca West Club, 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 ▼ <b>1,610.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>3,110.00</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 5 OF 9	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial)  
**A. Lee Ann Johnston**

Mailing Address  
**815 Shoresbrook Dr.**  
City **Spartanburg** State **SC** Zip Code **29301**

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

Name of Employer: **Fundruckers** Occupation: **Restaurateur**

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

Aggregate Year-to-Date **105.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **100.00**

Transaction ID: 100000240500014

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

Mailing Address  
**815 Shoresbrook Dr.**  
City **Spartanburg** State **SC** Zip Code **29301**

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

Name of Employer: **Fundruckers** Occupation: **Restaurateur**

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

Aggregate Year-to-Date **200.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **100.00**

Transaction ID: 100000240500015

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

Mailing Address  
**3060 Peachtree Tree Rd. NW #93**  
City **Atlanta** State **GA** Zip Code **30305-2225**

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

Name of Employer: **Buckhead Life Restaurant Group** Occupation: **Restaurateur**

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

Aggregate Year-to-Date **600.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **600.00**

Transaction ID: 100000240500016

SUBTOTAL of Receipts This Page (optional) **700.00**

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 6 OF 8  
(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)  
**A. Arith Daffinson**

Mailing Address  
**400 Lang Drive**  
City **LaCrosse** State **WI** Zip Code **54603**

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

Name of Employer: **Ardie's Restaurant** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **200.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **200.00**

Transaction ID: 1000000243500017

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

Mailing Address  
**PO Box 601 427 Oneida & Milwaukee Streets**  
City **Winnequo** State **WI** Zip Code **54548-0901**

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

Name of Employer: **Polecat & Lace** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **200.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **200.00**

Transaction ID: 10000002435400018

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

Mailing Address  
**1844 Concord Pike**  
City **Wilmington** State **DE** Zip Code **19803-2901**

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

Name of Employer: **Howard Johnson's Restaurant** Occupation: **Restaurateur**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date: **200.00**

Date of Receipt: **03 03 2000**

Amount of Each Receipt this Period: **200.00**

Transaction ID: 100000024408100019

SUBTOTAL of Receipts This Page (optional): **600.00**

TOTAL This Period (last page this line number only): **600.00**

**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 7 OF 8	
	<input checked="" type="checkbox"/> 13a	<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) <b>A. Donna Rucker</b>		Date of Receipt 03 03 2000
Mailing Address <b>4001 S. Decatur Blvd. #217</b>		Amount of Each Receipt this Period <b>250.00</b>
City <b>Las Vegas</b>	State Zip Code <b>NV 89103</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000244000026
Name of Employer <b>Tommy Rucker'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>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Kerry Soborinski</b>		Date of Receipt 03 03 2000
Mailing Address <b>72 Westview Ave</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Greenville</b>	State Zip Code <b>SC 29609</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000240770021
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>500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Cynthia Palm</b>		Date of Receipt 03 14 2000
Mailing Address <b>6409 115 12 Avenue N</b>		Amount of Each Receipt this Period <b>250.00</b>
City <b>Champion</b>	State Zip Code <b>MN 55316</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 1000000243060022
Name of Employer <b>The Palm Tree</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>250.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1,000.00</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 8 OF 8	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	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) <b>A. John Byrne</b>		Date of Receipt <b>03 14 2000</b>
Mailing Address <b>312 Kresson Rd</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Cherry Hill</b>	State Zip Code <b>NJ 08034-3355</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 10000002430900023
Name of Employer <b>La Campagne</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>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. David Craig</b>		Date of Receipt <b>03 14 2000</b>
Mailing Address <b>801 Washington St</b>		Amount of Each Receipt this Period <b>300.00</b>
City <b>Cape May</b>	State Zip Code <b>NJ 08204-1851</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 10000002430700024
Name of Employer <b>Washington Inn</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>300.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Frank Sacco</b>		Date of Receipt <b>03 14 2000</b>
Mailing Address <b>4 Wood St</b>		Amount of Each Receipt this Period <b>300.00</b>
City <b>Pittsburgh</b>	State Zip Code <b>PA 15222-1903</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 10000002431800025
Name of Employer <b>Piccolo Piccolo Ristorante</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>300.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>1,100.00</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 9
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
13	14	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. Bryan Littleton Jr.</b>		Date of Receipt <b>03 14 2000</b>
Mailing Address <b>2415 Arkansas Blvd.</b>		Amount of Each Receipt this Period <b>250.00</b>
City <b>Taxahouas</b>	State Zip Code <b>AR 71864-2017</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 100000243090026
Name of Employer <b>Little S's Mexican Food</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>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Steven Anderson</b>		Date of Receipt <b>03 25 2000</b>
Mailing Address <b>1200 17th St NW</b>		Amount of Each Receipt this Period <b>500.00</b>
City <b>Washington</b>	State Zip Code <b>DC 20036-3008</b>	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID: 100000248050027
Name of Employer <b>National Restaurant Association</b>	Occupation <b>President &amp; CEO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID:
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	<b>750.00</b>
TOTAL This Period (last page this line number only)	<b>24,735.00</b>

**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 1 OF 1	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13	<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 Ensign for US Senate</b>		Date of Receipt <b>03 31 2000</b>
Mailing Address <b>P.O. Box 26588</b>		Amount of Each Receipt this Period <b>1,000.00</b>
City <b>Las Vegas</b>	State Zip Code <b>NV 89128</b>	
FEC ID number of contributing federal political committee <b>C</b>		Refund From: <b>John Ensign for US Senate</b>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,000.00</b>	
Transaction ID: <b>100000308100028</b>		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID:
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee <b>C</b>		Transaction ID:
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	<b>1,000.00</b>
TOTAL This Period (last page this line number only)	<b>1,000.00</b>

**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 1 OF 1		
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" 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) <b>A. SunTrust Bank</b>		Date of Receipt <b>03 31 2000</b>	
Mailing Address <b>Post Office Box 65024</b>		Amount of Each Receipt this Period <b>166.32</b>	
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23280-6024</b>	Transaction ID: 1000000242860029
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>380.56</b>	
Name of Employer <b>Interest Earned</b>		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>380.56</b>	

Full Name (Last, First, Middle Initial) <b>B. SunTrust Bank</b>		Date of Receipt <b>03 31 2000</b>	
Mailing Address <b>Post Office Box 65024</b>		Amount of Each Receipt this Period <b>919.38</b>	
City <b>Richmond</b>	State <b>VA</b>	Zip Code <b>23280-6024</b>	Transaction ID: 1000000300310000
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>1,279.94</b>	
Name of Employer <b>Interest Earned</b>		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>1,279.94</b>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Transaction ID:
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional)	<b>1,084.70</b>
TOTAL This Period (last page this line number only)	<b>1,084.70</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 26	<input type="checkbox"/> 22 27	<input type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 28
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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 86024**

City

State

Zip Code

**Richmond**

**VA**

**23260-6024**

Purpose of Disbursement

**Bank/Credit Card Fees**

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

03 31 2000

Amount of Each Disbursement this Period

2,037.23

Transaction ID: 16000063084300002

**B.**

Full Name (Last, First, Middle Initial)

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

03 31 2000

Amount of Each Disbursement this Period

Transaction ID:

**C.**

Full Name (Last, First, Middle Initial)

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

03 31 2000

Amount of Each Disbursement this Period

Transaction ID:

SUBTOTAL of Disbursements This Page (optional)

2,037.23

TOTAL This Period (last page this line number only)

2,037.23

**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 18
	<input type="checkbox"/> 21b 28	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 26	<input type="checkbox"/> 29	<input type="checkbox"/> 30	<input type="checkbox"/> 31

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

Full Name (Last, First, Middle Initial) <b>A. Ryan for Congress</b>		Date of Disbursement 03 06 2000
Mailing Address <b>P.O. Box 1819</b>		Amount of Each Disbursement this Period 500.00
City <b>Jamesville</b>	State Zip Code <b>WI 53547</b>	
Purpose of Disbursement <b>YTD: \$500.00 Paul Ryan, U.S. HOUSE 1st WI</b>		Category/Type <b>24K</b>
Candidate Name <b>Paul Ryan</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) ▼	Transaction ID: 1000000242680003
State: <b>WI</b> District: <b>1</b>		

Full Name (Last, First, Middle Initial) <b>B. Barrett for Congress</b>		Date of Disbursement 03 06 2000
Mailing Address <b>7720 Rogers Avenue</b>		Amount of Each Disbursement this Period 500.00
City <b>Wauwatosa</b>	State Zip Code <b>WI 53213</b>	
Purpose of Disbursement <b>YTD: \$500.00 Thomas M. Barrett, U.S. HOUSE 5th WI</b>		Category/Type <b>24K</b>
Candidate Name <b>Thomas M. Barrett</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) ▼	Transaction ID: 1000000242700004
State: <b>WI</b> District: <b>5</b>		

Full Name (Last, First, Middle Initial) <b>C. Cable for Congress</b>		Date of Disbursement 03 10 2000
Mailing Address <b>Post Office Box 1177</b>		Amount of Each Disbursement this Period 600.00
City <b>Greensboro</b>	State Zip Code <b>NC 27402</b>	
Purpose of Disbursement <b>YTD: \$600.00 Howard Cable, U.S. HOUSE 6th NC</b>		Category/Type <b>24K</b>
Candidate Name <b>Congressman Howard Cable</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) ▼	Transaction ID: 10000002427100005
State: <b>NC</b> District: <b>6</b>		

SUBTOTAL of Disbursements This Page (optional).....	1,500.00
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 2 OF 18	
<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"/> 28
<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 29	<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. Bob Ney for Congress</b>		Date of Disbursement <b>03 10 2000</b>
Mailing Address <b>P.O. Box 480</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>St. Clairsville</b>	State Zip Code <b>OH 43850</b>	
Purpose of Disbursement <b>YTD: \$1,000.00 Bob Ney, U.S. HOUSE 18th OH</b>		Category/Type <b>24K</b>
Candidate Name <b>Rep. Bob Ney</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) ▼	Transaction ID: 10000002427200006
State: <b>OH</b>	District: <b>18</b>	

Full Name (Last, First, Middle Initial) <b>B. Ken Calvert for Congress</b>		Date of Disbursement <b>03 10 2000</b>
Mailing Address <b>PO Box 1414</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Riverside</b>	State Zip Code <b>CA 92502</b>	
Purpose of Disbursement <b>YTD: \$500.00 Ken Calvert, U.S. HOUSE 43rd CA</b>		Category/Type <b>24K</b>
Candidate Name <b>Congressman Ken Calvert</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) ▼	Transaction ID: 10000002427300007
State: <b>CA</b>	District: <b>43</b>	

Full Name (Last, First, Middle Initial) <b>C. Tom DeLay Congressional Committee</b>		Date of Disbursement <b>03 10 2000</b>
Mailing Address <b>10707 Corporate Drive Suite 130</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Stafford</b>	State Zip Code <b>TX 77477</b>	
Purpose of Disbursement <b>YTD: \$1,000.00 Tom DeLay, U.S. HOUSE 22nd TX</b>		Category/Type <b>24K</b>
Candidate Name <b>Tom DeLay</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) ▼	Transaction ID: 10000002427400008
State: <b>TX</b>	District: <b>22</b>	

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Gallegly for Congress**

Mailing Address

**P.O. Box 3789**

City

**Simi Valley**

Purpose of Disbursement

**YTD: \$500.00 Elton Gallegly, U.S. HOUSE 23rd CA**

Candidate Name

**Elton Gallegly**

Office Sought

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CA**

District: **23**

Date of Disbursement

03 / 10 / 2000

Amount of Each Disbursement this Period

500.00

24K  
Category/  
Type

Transaction ID: 100000242750009

Full Name (Last, First, Middle Initial)

**B. Friends of John Boehner**

Mailing Address

**7808 Cincinnati - Dayton Road, #1**

City

**West Chester**

Purpose of Disbursement

**YTD: \$1000.00 John A. Boehner, U.S. HOUSE 8th OH**

Candidate Name

**John A. Boehner**

Office Sought

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **OH**

District: **8**

Date of Disbursement

03 / 10 / 2000

Amount of Each Disbursement this Period

1,000.00

24K  
Category/  
Type

Transaction ID: 100000242750010

Full Name (Last, First, Middle Initial)

**C. Re-Elect Brian Bilbray for Congress**

Mailing Address

**12780 High Bluff Circle #270**

City

**San Diego**

Purpose of Disbursement

**YTD: \$500.00 Brian P. Bilbray, U.S. HOUSE 49th CA**

Candidate Name

**Brian P. Bilbray**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **CA**

District: **49**

Date of Disbursement

03 / 10 / 2000

Amount of Each Disbursement this Period

500.00

24K  
Category/  
Type

Transaction ID: 100000242770011

SUBTOTAL of Disbursements This Page (optional) ▶

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

2,000.00

**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**

Full Name (Last, First, Middle Initial)

**A. Lee Terry for Congress**

Mailing Address

**1107 South 119th St.**

City

State

Zip Code

**Omaha**

**NE**

**68144**

Purpose of Disbursement

**YTD: \$500.00 Lee Terry, U.S. HOUSE 2nd NE**

Candidate Name

**Lee Terry**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **NE**

District: **2**

Date of Disbursement

**03** / **10** / **2000**

Amount of Each Disbursement this Period

**500.00**

**24K**  
Category/  
Type

Transaction ID: 100000242780012

Full Name (Last, First, Middle Initial)

**B. LAZIO FOR CONGRESS**

Mailing Address

**72 East Main St. Suite 4 c/o Piccirillo Rainfort & Lamont LLP**

City

State

Zip Code

**Babylon**

**NY**

**11702**

Purpose of Disbursement

**YTD: \$1000.00 Rick A. Lazio, U.S. HOUSE 2nd NY**

Candidate Name

**Rick A. Lazio**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **NY**

District: **2**

Date of Disbursement

**03** / **10** / **2000**

Amount of Each Disbursement this Period

**1,000.00**

**24K**  
Category/  
Type

Transaction ID: 100000242780013

Full Name (Last, First, Middle Initial)

**C. Friends for Slade Gorton**

Mailing Address

**P.O. Box 1627**

City

State

Zip Code

**N. Bend**

**WA**

**98045**

Purpose of Disbursement

**YTD: \$2000.00 Slade Gorton, U.S. SENATE WA**

Candidate Name

**Slade Gorton**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **WA**

District:

Date of Disbursement

**03** / **10** / **2000**

Amount of Each Disbursement this Period

**2,000.00**

**24K**  
Category/  
Type

Transaction ID: 100000242800014

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

**3,500.00**

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

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

**A. Condit for Congress**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement: 03 10 2000

Mailing Address: **Post Office Box 1710** State: CA Zip Code: 95353

Amount of Each Disbursement this Period: 500.00

City: \_\_\_\_\_

Purpose of Disbursement: **YTD: \$2500.00 Gary Condit, U.S. HOUSE 18th CA** Category/Type: 24K

Candidate Name: **Rep. Gary Condit**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: CA District: 10

Transaction ID: 1000002428100015

**B. PIONEER PAC**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement: 03 10 2000

Mailing Address: **3323 N. Washington Blvd.** State: VA Zip Code: 22201

Amount of Each Disbursement this Period: 3,000.00

City: **Arlington**

Purpose of Disbursement: **YTD: \$3000.00 Contribution** Category/Type: 24K

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID: 1000002428300016

**C. FRIENDS OF KENT CONRAD ND-D**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement: 03 10 2000

Mailing Address: **420 G Street NE Lower Level** State: DC Zip Code: 20002

Amount of Each Disbursement this Period: 2,500.00

City: **Washington**

Purpose of Disbursement: **YTD: \$3500.00 Kent Conrad, U.S. SENATE ND** Category/Type: 24K

Candidate Name: **Kent Conrad**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: ND District: \_\_\_\_\_

Transaction ID: 1000002429000017

GUSTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

Amount of Each Disbursement this Period: 8,000.00

**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**

Full Name (Last, First, Middle Initial) <b>A. Friends of Mark Foley</b>		Date of Disbursement 03 10 2000
Mailing Address <b>Post Office Box 30506</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Palm Beach Gardens</b>	State Zip Code <b>FL 33420</b>	
Purpose of Disbursement <b>YTD: \$1000.00 Mark Foley, U.S. HOUSE 16th FL</b>		Transaction ID: 1000002434900618
Candidate Name <b>Congressman Mark Foley</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>FL</b> District: <b>18</b>		

Full Name (Last, First, Middle Initial) <b>B. John Ensign for US Senate</b>		Date of Disbursement 03 14 2000
Mailing Address <b>425 Second Street, NE</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Washington</b>	State Zip Code <b>DC 20002</b>	
Purpose of Disbursement <b>YTD: \$6000.00 John Ensign, U.S. SENATE NV</b>		Transaction ID: 1000002428700019
Candidate Name <b>Congressman John Ensign</b>		
Office Sought: <input type="checkbox"/> House <input checked="" 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>NV</b> District:		

Full Name (Last, First, Middle Initial) <b>C. Roth Senate Committee</b>		Date of Disbursement 03 14 2000
Mailing Address <b>P.O. Box 105</b>		Amount of Each Disbursement this Period <b>2,000.00</b>
City <b>Wilmington</b>	State Zip Code <b>DE 19806</b>	
Purpose of Disbursement <b>YTD: \$2000.00 William V. Roth, U.S. SENATE DE</b>		Transaction ID: 1000002443850026
Candidate Name <b>William V. Roth</b>		
Office Sought: <input type="checkbox"/> House <input checked="" 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>DE</b> District:		

SUBTOTAL of Disbursements This Page (optional)	<b>4,000.00</b>
TOTAL This Period (last page this line number only)	

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

FOR LINE NUMBER: PAGE 7 OF 18  
 Use separate schedule(s) for each category of the Detailed Summary Page  
 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**

<p><b>A. Roth Senate Committee</b></p> <p>Full Name (Last, First, Middle Initial)                  Mailing Address  <b>P.O. Box 105</b>                  City State Zip Code  <b>Wilmington DE 19859</b></p> <p>Purpose of Disbursement  <b>YTD: \$2000.00 Voted 2/14/00 Contribution</b></p> <p>Candidate Name  <b>William V. Roth</b></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <b>DE</b> District: _____</p>	<p>Date of Disbursement  <b>03 16 2000</b></p> <p>Amount of Each Disbursement this Period  <b>5,000.00</b></p> <p>Category/Type  <b>24K</b></p> <p>Transaction ID: 1000000243050021</p>
<p><b>B. Hulshof for Congress</b></p> <p>Full Name (Last, First, Middle Initial)                  Mailing Address  <b>Post Office Box 1621</b>                  City State Zip Code  <b>Columbia MO 65205</b></p> <p>Purpose of Disbursement  <b>YTD: \$2000.00 Kerry Hulshof, U.S. HOUSE 9th MO</b></p> <p>Candidate Name  <b>Congressman Kerry Hulshof</b></p> <p>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) ▼</p> <p>State: <b>MO</b> District: <b>9</b></p>	<p>Date of Disbursement  <b>03 17 2000</b></p> <p>Amount of Each Disbursement this Period  <b>1,000.00</b></p> <p>Category/Type  <b>24K</b></p> <p>Transaction ID: 1000000242800022</p>
<p><b>C. Committee to Re-Elect J.D. Hayworth</b></p> <p>Full Name (Last, First, Middle Initial)                  Mailing Address  <b>Post Office Box 14273</b>                  City State Zip Code  <b>Scottsdale AZ 85287</b></p> <p>Purpose of Disbursement  <b>YTD: \$1000.00 J. D. Hayworth, U.S. HOUSE 6th AZ</b></p> <p>Candidate Name  <b>Congressman J. D. Hayworth</b></p> <p>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) ▼</p> <p>State: <b>AZ</b> District: <b>6</b></p>	<p>Date of Disbursement  <b>03 17 2000</b></p> <p>Amount of Each Disbursement this Period  <b>1,000.00</b></p> <p>Category/Type  <b>24K</b></p> <p>Transaction ID: 1000000242390023</p>
<p>SUBTOTAL of Disbursements This Page (optional) ..... ▶</p> <p>TOTAL This Period (last page this line number only) ..... ▶</p>	



**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 8 OF 18

<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"/> 29

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

**A. Boyd for Congress**

Full Name (Last, First, Middle Initial)  
A. Boyd for Congress

Date of Disbursement  
03 17 2000

Mailing Address  
Post Office Box 15703  
City State Zip Code  
Tallahassee FL 32317

Amount of Each Disbursement this Period  
500.00

Purpose of Disbursement  
YTD: \$500.00 Allan Boyd, U.S. HOUSE 2nd FL  
Candidate Name  
Allan Boyd

24K  
Category/Type

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

State: FL District: 2  
Transaction ID: 100000242650024

**B. Friends of Bud Cramer**

Full Name (Last, First, Middle Initial)  
Friends of Bud Cramer

Date of Disbursement  
03 17 2000

Mailing Address  
223 East Side Square  
City State Zip Code  
Montville AL 36801

Amount of Each Disbursement this Period  
1,000.00

Purpose of Disbursement  
YTD: \$1000.00 Bud Cramer, U.S. HOUSE 5th AL  
Candidate Name  
Bud Cramer

24K  
Category/Type

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

State: AL District: 5  
Transaction ID: 100000242660025

**C. Pickering for Congress**

Full Name (Last, First, Middle Initial)  
Pickering for Congress

Date of Disbursement  
03 17 2000

Mailing Address  
Post Office Box 6440  
City State Zip Code  
Lumbard MS 39441

Amount of Each Disbursement this Period  
500.00

Purpose of Disbursement  
YTD: \$500.00 Chip Pickering, U.S. HOUSE 3rd MS  
Candidate Name  
Congressman Chip Pickering

24K  
Category/Type

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

State: MS District: 3  
Transaction ID: 100000242670026

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

TOTAL This Period (last page write 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 9 OF 18	
<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"/> 28	<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. Mark Nielson for Congress</b>		Date of Disbursement 03 30 2000
Mailing Address <b>2 Stony Hill Road</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Bethel</b>	State Zip Code <b>CT 06801</b>	
Purpose of Disbursement <b>YTD: \$1,000.00 Mark Nielson, U.S. HOUSE 6th CT</b>		24K Category/Type
Candidate Name <b>Hon. Mark Nielson</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) ▼	Transaction ID: 1000000242360027
State: <b>CT</b> District: <b>5</b>		

Full Name (Last, First, Middle Initial) <b>B. Chat Edwards for Congress</b>		Date of Disbursement 03 30 2000
Mailing Address <b>Post Office Box 192</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Waco</b>	State Zip Code <b>TX 76703</b>	
Purpose of Disbursement <b>YTD: \$500.00 Chat Edwards, U.S. HOUSE 11th TX</b>		24K Category/Type
Candidate Name <b>Chat Edwards</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) ▼	Transaction ID: 1000000242370028
State: <b>TX</b> District: <b>11</b>		

Full Name (Last, First, Middle Initial) <b>C. Cook for Congress Campaign</b>		Date of Disbursement 03 30 2000
Mailing Address <b>1800 Beneficial Life Tower</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Salt Lake City</b>	State Zip Code <b>UT 84111</b>	
Purpose of Disbursement <b>YTD: \$1,000.00 Merrill Cook, U.S. HOUSE 2nd UT</b>		24K Category/Type
Candidate Name <b>Merrill Cook</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) ▼	Transaction ID: 1000000242400029
State: <b>UT</b> District: <b>2</b>		

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)

<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**

Full Name (Last, First, Middle Initial)

**A. TIBERI 2000**

Mailing Address

**2021 E. Dublin Granville Road #200**

City State Zip Code  
**Columbus OH 43228**

Purpose of Disbursement

**YTD: \$3000.00 Pat Tiberi, U.S. HOUSE 12th OH**

Candidate Name

**Pat Tiberi**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **OH** District: **12**

Date of Disbursement

**03 30 2000**

Amount of Each Disbursement this Period

**1,000.00**

**24K**  
Category/Type

Transaction ID: 1000002424100030

Full Name (Last, First, Middle Initial)

**B. Nethercutt for Congress**

Mailing Address

**P.O. Box 1925**

City State Zip Code  
**Spokane WA 99201**

Purpose of Disbursement

**YTD: \$1000.00 George Nethercutt, U.S. HOUSE 5th WA**

Candidate Name

**George Nethercutt**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **WA** District: **5**

Date of Disbursement

**03 30 2000**

Amount of Each Disbursement this Period

**1,000.00**

**24K**  
Category/Type

Transaction ID: 1000002424200031

Full Name (Last, First, Middle Initial)

**C. Hulshof for Congress**

Mailing Address

**Post Office Box 1824**

City State Zip Code  
**Columbia MO 65206**

Purpose of Disbursement

**YTD: \$2000.00 Kenny Hulshof, U.S. HOUSE 9th MO**

Candidate Name

**Congressman Kenny Hulshof**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **MO** District: **9**

Date of Disbursement

**03 30 2000**

Amount of Each Disbursement this Period

**1,000.00**

**24K**  
Category/Type

Transaction ID: 1000002424300032

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

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

**3,000.00**

**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 11 OF 18

<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"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<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. Nathan Deal for Congress</b>		Date of Disbursement 03 30 2000
Mailing Address <b>Post Office Box 902</b>		Amount of Each Disbursement this Period 500.00
City <b>GA</b>	State Zip Code <b>GA 30503</b>	
Purpose of Disbursement <b>YTD: \$500.00 Nathan Deal, U.S. HOUSE 9th GA</b>		Transaction ID: 1000000242400033
Candidate Name <b>Nathan Deal</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>GA</b> District: <b>9</b>		

Full Name (Last, First, Middle Initial) <b>B. Texans for Henry Bonilla</b>		Date of Disbursement 03 30 2000
Mailing Address <b>3906 Tattall</b>		Amount of Each Disbursement this Period 500.00
City <b>TX</b>	State Zip Code <b>TX 78164</b>	
Purpose of Disbursement <b>YTD: \$500.00 Henry Bonilla, U.S. HOUSE 23rd TX</b>		Transaction ID: 1000000242400034
Candidate Name <b>Henry Bonilla</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>TX</b> District: <b>23</b>		

Full Name (Last, First, Middle Initial) <b>C. Chris John for Congress, Inc.</b>		Date of Disbursement 03 30 2000
Mailing Address <b>PO Drawer 307</b>		Amount of Each Disbursement this Period 600.00
City <b>LA</b>	State Zip Code <b>LA 70627</b>	
Purpose of Disbursement <b>YTD: \$600.00 Chris John, U.S. HOUSE 7th LA</b>		Transaction ID: 1000000242400035
Candidate Name <b>Congressman Chris John</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>LA</b> District: <b>7</b>		

BUSITOTAL of Disbursements This Page (optional)	1,500.00
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 12 OF 18	
<input type="checkbox"/> 21b 26	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 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. Wally Harger for Congress</b>		Date of Disbursement 03 30 2000
Mailing Address <b>P.O. Box 1600</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Chico</b>	State Zip Code <b>CA 95927</b>	
Purpose of Disbursement <b>YTD: \$1000.00 Wally Harger, U.S. HOUSE 2nd CA</b>		Transaction ID: 1000002424800036
Candidate Name <b>Wally Harger</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>CA</b> District: <b>2</b>		

Full Name (Last, First, Middle Initial) <b>B. Congressman Bart Gordon Cmte.</b>		Date of Disbursement 03 30 2000
Mailing Address <b>P.O. Box 2008</b>		Amount of Each Disbursement this Period <b>600.00</b>
City <b>Murfreesboro</b>	State Zip Code <b>TN 37133</b>	
Purpose of Disbursement <b>YTD: \$600.00 Bart Gordon, U.S. HOUSE 6th TN</b>		Transaction ID: 1000002424900037
Candidate Name <b>Bart Gordon</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>TN</b> District: <b>6</b>		

Full Name (Last, First, Middle Initial) <b>C. Marlon Berry for Congress Committee</b>		Date of Disbursement 03 30 2000
Mailing Address <b>P.O. Box 8084</b>		Amount of Each Disbursement this Period <b>600.00</b>
City <b>Jonesboro</b>	State Zip Code <b>AR 72403</b>	
Purpose of Disbursement <b>YTD: \$600.00 Marlon Berry, U.S. HOUSE 1st AR</b>		Transaction ID: 1000002425000038
Candidate Name <b>Rep. Marlon Berry</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>AR</b> District: <b>1</b>		

SUBTOTAL of Disbursements This Page (optional)	<b>2,000.00</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 13 OF 18

<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. Anne Northup for Congress</b>		Date of Disbursement 03 30 2000
Mailing Address <b>Post Office Box 7313</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Louisville</b>	State Zip Code <b>KY 40257</b>	
Purpose of Disbursement <b>YTD: \$2500.00 Anne Northup, U.S. HOUSE 3rd KY</b>		Transaction ID: 1000002425100039
Candidate Name <b>Rep. Anne Northup</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>KY</b> District: <b>3</b>		

Full Name (Last, First, Middle Initial) <b>B. Friends of Conrad Burns</b>		Date of Disbursement 03 30 2000
Mailing Address <b>Post Office Box 1532</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Billings</b>	State Zip Code <b>MT 69103</b>	
Purpose of Disbursement <b>YTD: \$1000.00 Conrad Burns, U.S. SENATE MT</b>		Transaction ID: 1000002425200048
Candidate Name <b>Conrad Burns</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>MT</b> District:		

Full Name (Last, First, Middle Initial) <b>C. Ken Lucas for Congress Committee</b>		Date of Disbursement 03 30 2000
Mailing Address <b>1100 Burlington Pike Suite 324</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Florence</b>	State Zip Code <b>KY 41042</b>	
Purpose of Disbursement <b>YTD: \$500.00 Ken Lucas, U.S. HOUSE 4th KY</b>		Transaction ID: 1000002425300041
Candidate Name <b>Ken Lucas</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>KY</b> District: <b>4</b>		

SUBTOTAL of Disbursements This Page (optional) **2,500.00**

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 14 OF 18

<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**

Full Name (Last, First, Middle Initial)

**A. Judy Biggert for Congress**

Date of Disbursement

03 30 2000

Mailing Address

**P.O. Box 637**

City

**Hinsdale**

Purpose of Disbursement

**YTD: \$600.00 Judy Biggert, U.S. HOUSE 13th IL**

Candidate Name

**Judy Biggert**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **IL**

District: **13**

Amount of Each Disbursement this Period

500.00

24K  
Category/  
Type

Transaction ID: 100000242540042

Full Name (Last, First, Middle Initial)

**B. Chambliss for Congress**

Date of Disbursement

03 30 2000

Mailing Address

**Post Office Box 4084**

City

**Macon**

Purpose of Disbursement

**YTD: \$1000.00 Saxby Chambliss, U.S. HOUSE 8th GA**

Candidate Name

**Saxby Chambliss**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **GA**

District: **8**

Amount of Each Disbursement this Period

1,000.00

24K  
Category/  
Type

Transaction ID: 100000242550043

Full Name (Last, First, Middle Initial)

**C. Bishop for Congress**

Date of Disbursement

03 30 2000

Mailing Address

**421 NW Jersey Ave., S.E.**

City

**Washington**

Purpose of Disbursement

**YTD: \$500.00 Sanford D. Bishop, U.S. HOUSE 2nd GA**

Candidate Name

**Rep. Sanford D. Bishop Jr.**

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: **GA**

District: **2**

Amount of Each Disbursement this Period

500.00

24K  
Category/  
Type

Transaction ID: 100000242560044

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2,000.00

**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 18 OF 18

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**

**A. Dave Camp for Congress**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
**Post Office Box 423**  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
**Midland**  
 Purpose of Disbursement \_\_\_\_\_  
**YTD: \$500.00 Dave Camp, U.S. HOUSE 4th MI**  
 Candidate Name \_\_\_\_\_  
**Dave Camp**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **MI** District: **4**

Date of Disbursement: 03 30 2000  
 Amount of Each Disbursement this Period: 500.00  
 Category/Type: 24K  
 Transaction ID: 100000243570045

**B. Hastings for Congress Committee**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
**Post Office Box 2026**  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
**Pasco**  
 Purpose of Disbursement \_\_\_\_\_  
**YTD: \$500.00 Richard "Doc" Hastings, U.S. HOUSE 4th WA**  
 Candidate Name \_\_\_\_\_  
**Richard "Doc" Hastings**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **WA** District: **4**

Date of Disbursement: 03 30 2000  
 Amount of Each Disbursement this Period: 500.00  
 Category/Type: 24K  
 Transaction ID: 100000243580046

**C. Friends of Sam Johnson**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
**P.O. Box 860086**  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
**Pleas**  
 Purpose of Disbursement \_\_\_\_\_  
**YTD: \$1,000.00 Sam Johnson, U.S. HOUSE 3rd TX**  
 Candidate Name \_\_\_\_\_  
**Sam Johnson**  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: **TX** District: **3**

Date of Disbursement: 03 30 2000  
 Amount of Each Disbursement this Period: 1,000.00  
 Category/Type: 24K  
 Transaction ID: 100000243580047

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)

<input type="checkbox"/> 21b 26	<input type="checkbox"/> 22 27	<input checked="" type="checkbox"/> 23 28a	<input type="checkbox"/> 24 28b	<input type="checkbox"/> 25 28c	<input type="checkbox"/> 29
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NAME OF COMMITTEE (In Full)  
**National Restaurant Association Political Action Committee**

**A. Ike Skelton for Congress Committee**

Full Name (Last, First, Middle Initial)  
**Ike Skelton for Congress Committee**

Date of Disbursement  
**03 30 2000**

Mailing Address  
**Post Office Box A 3001 North 291 Highway**

City **Harrisonville** State **MO** Zip Code **64701**

Purpose of Disbursement  
**YTD: \$1000.00 Ike Skelton, U.S. HOUSE 4th MO**

Candidate Name  
**Ike Skelton**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **MO** District: **4**

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

Category/Type  
**24K**

Transaction ID: 100000242600048

**B. Team Emerson**

Full Name (Last, First, Middle Initial)  
**Team Emerson**

Date of Disbursement  
**03 30 2000**

Mailing Address  
**2210 Lakewood Dr**

City **Cape Girardeau** State **MO** Zip Code **63701**

Purpose of Disbursement  
**YTD: \$600.00 Jo Ann Emerson, U.S. HOUSE 8th MO**

Candidate Name  
**Congresswoman Jo Ann Emerson**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **MO** District: **8**

Amount of Each Disbursement this Period  
**600.00**

Category/Type  
**24K**

Transaction ID: 1000002426100048

**C. Hobson for Congress Committee**

Full Name (Last, First, Middle Initial)  
**Hobson for Congress Committee**

Date of Disbursement  
**03 30 2000**

Mailing Address  
**2525 North Limestone**

City **Springfield** State **OH** Zip Code **45503**

Purpose of Disbursement  
**YTD: \$500.00 David L. Hobson, U.S. HOUSE 7th OH**

Candidate Name  
**David L. Hobson**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **OH** District: **7**

Amount of Each Disbursement this Period  
**600.00**

Category/Type  
**24K**

Transaction ID: 1000002426200050

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(a)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF KENT CONRAD</b>		Date of Disbursement <b>03 30 2000</b>
Mailing Address <b>420 C Street NE Lower Level</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Washington</b>	State Zip Code <b>DC 20002</b>	
Purpose of Disbursement <b>YTD: \$3500.00 Kent Conrad, U.S. SENATE ND</b>		Category/Type <b>24K</b>
Candidate Name <b>Kent Conrad</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) ▼	Transaction ID: 1000002426300061
State: <b>ND</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. Mark Baker for Congress</b>		Date of Disbursement <b>03 30 2000</b>
Mailing Address <b>Post Office Box 5284</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Quincy</b>	State Zip Code <b>IL 62305</b>	
Purpose of Disbursement <b>YTD: \$1000.00 Mark Baker, U.S. HOUSE 17th IL</b>		Category/Type <b>24K</b>
Candidate Name <b>Mark Baker</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) ▼	Transaction ID: 1000002428400052
State: <b>IL</b>	District: <b>17</b>	

Full Name (Last, First, Middle Initial) <b>C. Ed Shrock for Congress</b>		Date of Disbursement <b>03 30 2000</b>
Mailing Address <b>P.O. Box 61480</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>Virginia Beach</b>	State Zip Code <b>VA 23456</b>	
Purpose of Disbursement <b>YTD: \$1000.00 Shrock, U.S. HOUSE 2nd VA</b>		Category/Type <b>24K</b>
Candidate Name <b>Ed Shrock</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) ▼	Transaction ID: 1000002428900063
State: <b>VA</b>	District: <b>2</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>3,000.00</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 18 OF 18

<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. Porter for Congress**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement: 03 30 2000

Mailing Address: 1111 Maycrest Avenue Suite G  
City: Henderson State: NV Zip Code: 89014

Purpose of Disbursement: YTD: \$1000.00 Porter, U.S. HOUSE 1st NV  
Candidate Name: Jon Porter  
Category/Type: 24K

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

State: NV District: 1  
Transaction ID: 1000002428000054

**B. Kuykendall Congressional Committee**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement: 03 31 2000

Mailing Address: 1378 Park Western Drive #300  
City: San Pedro State: CA Zip Code: 90732

Purpose of Disbursement: YTD: \$1000.00 Steve Kuykendall, U.S. HOUSE 36th CA  
Candidate Name: Steve Kuykendall  
Category/Type: 24K

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

State: CA District: 36  
Transaction ID: 1000002428000055

**C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement: 03 31 2000

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: \_\_\_\_\_  
Transaction ID: \_\_\_\_\_

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

TOTAL This Period (last page this line number only) ..... 41,000.00

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b

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

Full Name (Last, First, Middle Initial) <b>A. Missourians for Matt Blunt</b>		Date of Disbursement 03 30 2000
Mailing Address <b>P.O. Box 885</b>		Amount of Each Disbursement This Period <b>500.00</b>
City <b>Jefferson City</b>	State Zip Code <b>MO 65102</b>	
Purpose of Disbursement <b>Blunt, SECRETARY OF STATE MO</b>		Transaction ID: 1000002429100086
Candidate Name <b>Blunt, SECRETARY OF STATE MO</b>		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State Zip Code	
Purpose of Disbursement		Transaction ID:
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		
Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State Zip Code	
Purpose of Disbursement		Transaction ID:
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		
SUBTOTAL of Disbursements This Page (optional)		<b>500.00</b>
TOTAL This Period (last page this line number only)		<b>500.00</b>

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/>	Hand Delivered	Date of Receipt 1/31/02
<input type="checkbox"/>	First Class Mail	POSTMARKED
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
 <i>SR</i>	PREPARER	 1/31/02 DATE PREPARED