

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC	RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	SEP 20 11 12 PM '99
CITY, STATE and ZIP CODE Washington, DC 20036	2. FEC IDENTIFICATION NUMBER C 0000 3754
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

4. TYPE OF REPORT

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

- Monthly Report Due On:
- | | | |
|--------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input checked="" type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>08/01/99</u> through <u>08/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 164,443.63
(b) Cash on Hand at Beginning of Reporting Period	\$ 112,039.18	
(c) Total Receipts (from Line 19)	\$ 65,020.07	\$ 254,614.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 177,059.25	\$ 419,058.18
7. Total Disbursements (from Line 30)	\$ 33,350.00	\$ 275,348.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 143,709.25	\$ 143,709.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 998 E Street, NW Washington, DC 20463 Toll Free 800-424-9550 Local 202-218-9420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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 Elaine Z. Graham	
Signature of Treasurer _____ Assistant Treasurer	Date 9/20/99

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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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD	
		FROM 08/01/99	TO 08/31/99
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	32,382.16	194,818.09	11(a)(i)
ii. Unitemized	32,473.44	68,203.70	11(a)(ii)
iii. Total (add i and ii) >	64,855.60	253,021.87	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a, b and c) >	64,855.60	253,021.87	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	164.47	1,592.88	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	65,020.07	254,614.65	19
20. Total Federal Receipts (subtract line 16 from line 19) >	65,020.07	254,614.55	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	10,332.73	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	10,332.73	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	33,350.00	250,016.20	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	16,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	33,350.00	276,348.93	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	33,350.00	275,348.93	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	64,855.60	253,021.87	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	64,855.60	253,021.87	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	10,332.73	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	10,332.73	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 10
FOR LINE NUMBER 11a1

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 PAC

<p>A. Full Name, Mailing Address and ZIP Code Ruth Fertel 711 North Broad New Orleans, LA 70119-4294</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ruth Chris Steak House</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Diana Atwood P.O. Box 787 Old Lyme, CT 06371-0787</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Old Lyme Inn</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Richard T Chase 2633 Ridgewell Court Raleigh, NC 27613-1612</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 08/06/99</p>	<p>Amount of Each Receipt this Period 450.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Ronald Barbee 305 Glen Abbey Drive Cary, NC 27613-6007</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Doug R Higdon 2309 Windy Woods Drive Raleigh, NC 27607-6357</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Dale Whitworth 10221 Bushveld Lane Raleigh, NC 27613-6149</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Manny Lopez 207 Southwest Blvd. Kansas City, MO 64108-2018</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Manny's</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional)

2,400.00

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 **11 a**

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Joe Corey 4511 32nd Road, North Arlington, VA 22207-4418	Name of Employer Facia Luna Pizzeria	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral Corp.	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 400.00
B. Full Name, Mailing Address and ZIP Code Robert McDevitt P.O. 29502 Raleigh, NC 27626	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral Corp.	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 400.00
C. Full Name, Mailing Address and ZIP Code Peter Charland 9305 Hometown Dr. Raleigh, NC 27615-2102	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 400.00
D. Full Name, Mailing Address and ZIP Code Lamar Bell 9905 Mathias Court Raleigh, NC 27615-1621	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral Corp.	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 400.00
E. Full Name, Mailing Address and ZIP Code John E Bishop 117 N. Circle Drive Rocky Mount, NC 27804-2402	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral Corp.	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 500.00
F. Full Name, Mailing Address and ZIP Code Eric Holm 1235 E. Lake Colony Drive Maitland, FL 32751-6124	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Golden Corral Corp.	Date (month, day, year) 08/05/99	Amount of Each Receipt This Period 250.00
G. Full Name, Mailing Address and ZIP Code Paul V. Severin 1504 Queens Point Drive Richmond, VA 23233-3967	Occupation restaurateur	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

2,860.00

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**
FOR LINE NUMBER **11 a 1**

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code John Currence 152 Courthouse Square Oxford, MS 38655-3914</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer City Grocery</p> <p>Occupation restauranteur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Deborah Fratrik 212 Scenic Ridge Ct. Old Hickory, TN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral</p> <p>Occupation Restauranter</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Thomas Pannullo 115 Carriage Hill Way Neshanic Station, NJ 08853</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Total Food Service</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Irwin Roberts 4813 Creedmoor Rd. Raleigh, NC 27612-3811</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/06/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Gene T Aman 7500 South Tanglewild Drive Raleigh, NC 27613-1414</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 08/06/99</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Michael L. McGovern 100 State Street Harrisburg, PA 17101-1024</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pennsylvania Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/06/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Allen Bernstein 3333 New Hyde Park Rd New Hyde Park, NY 11042-1205</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Morton's Restaurant Group, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/05/99</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional)

2,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 10
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Richard W. Kubach Jr., FMP 1501 Snyder Avenue Philadelphia, PA 19145	Name of Employer Melrose Diner, Inc. Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code James Duke 4508 Bethlehem Pike Center Valley, PA 18034-9424	Name of Employer Manor House Inn Occupation Restaurateur	Date (month, day, year) 08/05/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Michael Scarozzi 4 Manor Road Paoli, PA 19301-1708	Name of Employer Willistown Grille Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Gerald Estes 13636 Northwich Drive Midlothian, VA 23112-4932	Name of Employer Golden Corral Corp. Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Michael Hays 133 Huron Drive Carnegie, PA 15108-1826	Name of Employer Golden Corral Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Thomas Kaene 5210 White Oak Drive Verona, PA 15147	Name of Employer Golden Corral Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Bruce McGough 4914 Fifth Ave. Pittsburgh, PA 15213	Name of Employer Golden Corral Occupation Restaurateur	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) 2,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 10
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Ryan 20 - 4th Street Pittsburgh, PA 15215	Golden Corral Occupation: Restaurateur	08/06/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doug Fontaine, FMP P.O. Box 2288 Hwy. 90 East Pascagoula, MS 39568-1028	La Font Inn Occupation: Restaurateur	08/09/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	350.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert B Hayward 905 Darfield Drive Raleigh, NC 27615-1112	Golden Corral Corp. Occupation: Restaurateur	08/08/99	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Bean, FMP P.O. Box 708 104 1/2-3rd St., South Columbus, MS 39703	University Management/Harveys Restaurants Occupation: Restaurateur	08/09/99	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,800.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M Day 608 Marlowe Road Raleigh, NC 27609	Golden Corral Corp. Occupation: Restaurateur	08/09/99	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Houston Odom 1453 Kempsville Rd. Suite 107 Virginia Beach, VA 23464-7319	Both, Inc. dba Golden Corral Occupation: Restaurateur	08/09/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Tate 8501 Caldbeck Dr. Raleigh, NC 27615-2658	Golden Corral Corp. Occupation: Restaurateur	08/09/99	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	400.00	

SUBTOTAL of Receipts This Page (optional) 3,050.00

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**
FOR LINE NUMBER **11 a**

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Richard A Urquhart 412 Oakwood Ave. Raleigh, NC 27601-1156</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ollie G. Wilkes P.O. Box 6 Meridian, MS 39302-0006</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hotel & Restaurant Supply</p> <p>Occupation Restaurant Supplier</p> <p>Aggregate Year-to-Date > \$ 335.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 336.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Bill Wolfe 4251 Industrial Drive Jackson, MS 39209-2748</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hotel & Restaurant Supply</p> <p>Occupation Restaurant Supplier</p> <p>Aggregate Year-to-Date > \$ 333.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 333.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jerry R Greene P.O. Box 6 Meridian, MS 39302-0006</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hotel & Restaurant Services</p> <p>Occupation Restaurant Supplier</p> <p>Aggregate Year-to-Date > \$ 334.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 334.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Myrl H Bean 574 Greenbriar Columbus, MS 39701-1455</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Harvey's Rest.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Nancy Muenzmay 109 Badin Lake Court Morrisville, NC 27560</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/09/99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Jere Heinze P.O. Box 7 Boiling Springs, PA 17007-0007</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Allenberry Resort Inn & Playhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/10/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional) **3,402.00**

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

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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 PAC

<p>A. Full Name, Mailing Address and ZIP Code Paul A Weber 7504 Wingfoot Dr. Raleigh, NC 27615-5476</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/10/99</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Douglas Danner 9515 Bay Vista Estates Blvd. Orlando, FL 32836-6311</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Corral Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/10/99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Jerome Friedlander 1010 Wayne Avenue #460 Silver Spring, MD 20910-5600</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Janjer Enterprises</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/11/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Dick R. Stubbs, FMP 4403 SW 3rd. Street Oklahoma City, OK 73108-1019</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Applewoods, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,100.00</p>	<p>Date (month, day, year) 08/11/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Manny Lopez 207 Southwest Blvd. Kansas City, MO 64108-2018</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Manny's</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 08/11/99</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Bob Vasilyev P.O. Box 1610 Oxford, MS 38655-1610</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Vasco Properties, Inc.</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/11/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mike Kull 9656 Bluegrass Pkwy. Suite 200 Louisville, KY 40299</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Dairy Queen Corporate Stores</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,100.00</p>	<p>Date (month, day, year) 08/19/99</p>	<p>Amount of Each Receipt this Period 100.00</p>

SUBTOTAL of Receipts This Page (optional)

3,450.00

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

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Harry Knowlas 111 Prospect Avenue West Orange, NJ 07052-4202</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Manor</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/19/99</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Dante Stephansen 3380 Peachtree Road, NE Atlanta, GA 30328-1021</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Dante's Down the Hatch</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/19/99</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Craig Nickoloff 26442 Houston Trail Laguna Hills, CA 92653-8334</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Clain Jumper Restaurants</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 08/19/99</p>	<p>Amount of Each Receipt This Period 5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Shapple Harris 107 Kathryn Dr Brandon, MS 39042</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Emp. Fire Casualty & Benefit Consultants</p> <p>Occupation Restaurant Consultant</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/19/99</p>	<p>Amount of Each Receipt This Period 300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Bob Rice 8850 SW Gable Pkwy. Portland, OR 97226-2614</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goforth and Rice Restaurants</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/26/99</p>	<p>Amount of Each Receipt This Period 400.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Wayne Reeves 121 E. 19th Street Anniston, AL 38201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Manna Enterprises, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 08/28/99</p>	<p>Amount of Each Receipt This Period 1,500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Kirk Kirkland 732 Oak Hill Rd. Mobile, AL 38609-5941</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Kirk Kirkland's Barbecue, Inc.</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/28/99</p>	<p>Amount of Each Receipt This Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)

8,700.00

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

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Danna 9800 SE Stark Street Portland, OR 97216-2408	Danna Brothers Properties	08/26/99	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 300.00	
Xavier Toledo, FNP 2020 Naaman's Road Wilmington, DE 19810-2665	Harry's Savoy Grill	08/26/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 250.00	
Harold Pollin 8235 N.E. Airport Way Portland, OR 97220-1353	Restaurants-Canyon Inc.	08/26/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 300.00	
Gregory Masterson 5205 Shadow Wood Lane Prospect, KY 40059-9119	Mastoras, Inc.	08/26/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 600.00	
James E Schnellthorst 1600 S. Lindbergh Blvd. Saint Louis, MO 63131-3599	Schnellthorst Restaurant	08/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 600.00	
Mike McCallum 8585 SW Salish Lane Suite 120 Wilsonville, OR 97070	Oregon Restaurant Association	08/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 500.00	
Ray Keith 17 Autumn Hill Prospect, KY 40059-9459	Golden Corral	08/26/99	400.00
Receipt For: <input 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) 2,250.00

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

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Landeros 93090 Ewing Road Springfield, OR 97478	Landeros, Inc.	08/26/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tony May Ste. 5M, 240 Central Park, S. New York, NY 10019-1413	Tony May Group/San Domenico	08/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurateur	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald P. Moore 1453 County Road 187 Lanett, AL 36863-5717	Tenda Chick, Inc.	08/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurateur	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry Owen 835 Mallard Creek Road Louisville, KY 40207	Golden Corral	08/26/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elaine Graham 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	Payroll Deduction	200.00 (\$100.00 Semimonthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 1,400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christina Howard 8700 Chilcott Manor Way Vienna, VA 22181-5400	National Restaurant Association	Payroll Deduction	38.48 (\$19.24 Semimonthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 288.60	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen O'Leary 1200 Braddock Place, #201 Alexandria, VA 22314-1664	National Restaurant Association	Payroll Deduction	41.88 (\$20.84 Semimonthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 270.82	

SUBTOTAL of Receipts This Page (optional) 1,580.16

TOTAL This Period (last page this line number only) 32,382.16

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Interest Earned</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$ 1,592.68</p>	<p>Date (month, day, year) 08/31/99</p>	<p>Amount of Each Receipt this Period 164.47</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$ 6</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date $\\$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>164.47</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>164.47</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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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
Pryce for Congress 340 East Gay Street Columbus, OH 43215	Deborah Pryce, U.S. HOUSE 15th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
B. Full Name, Mailing Address and ZIP Code SAM FARR FOR CONGRESS PO BOX 7548 CARMEL, CA 93920	Sam Farr, U.S. HOUSE 17th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
C. Full Name, Mailing Address and ZIP Code VITTER FOR CONGRESS 2520 Metairie Road Metairie, LA 70001	David Vitter, U.S. House 1st LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
D. Full Name, Mailing Address and ZIP Code Tancredo for Congress Committee 6471 South Estes St. Littleton, CO 80123	Thomas Gerard Tancredo, U.S. HOUSE 6th CO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	2,500.00
E. Full Name, Mailing Address and ZIP Code Pickering for Congress Post Office Box 6440 Laurel, MS 39441	Chip Pickering, U.S. HOUSE 3rd MS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	500.00
F. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Nydia Velazquez 146 North Carolina Ave., SE Washington, DC 20003	Nydia M. Velazquez, U.S. HOUSE 12th NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	500.00
G. Full Name, Mailing Address and ZIP Code Common Sense Leadership PAC P.O. Box 15206 Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	08/18/99	1,000.00
H. Full Name, Mailing Address and ZIP Code Mary Bono Campaign Committee 36-810 Palm Court Rancho Mirage, CA 92270	Mary Bono, U.S. HOUSE 44th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	500.00
I. Full Name, Mailing Address and ZIP Code Dan Burton for Congress Cmte. P.O. Box 46250 Indianapolis, IN 46250	Dan Burton, U.S. HOUSE 8th IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	500.00

SUBTOTAL of Disbursements This Page (optional)

8,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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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
Walden for Congress Post Office Box 1091 Hood River, OR 97031	Greg Walden, U.S. HOUSE 2nd OR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
Dave Camp for Congress Post Office Box 423 Midland, MI 48640	Dave Camp, U.S. HOUSE 4th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	600.00
People for English P.O. Box 1940 Erie, PA 16507	Phil English, U.S. HOUSE 21st PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
Pease for Congress Committee Post Office Box 511 Seelyville, IN 47878	Ed Pease, U.S. HOUSE 7th IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/99	1,000.00
Blue Dog PAC 442 New Jersey Ave., SE Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	08/24/99	4,587.50
Les Culpepper 1200 17th Street Washington, DC 20036	In-kind catering costs. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	08/24/99	412.50 (In-Kind)
Blue Dog PAC 442 New Jersey Ave., SE Washington, DC 20003	In-kind catering costs. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	08/24/99	412.50 (Memo In-Kind)
Bishop for Congress 421 Nw Jersey Ave., S.E. Washington, DC 20003	Sanford D. Bishop, U.S. HOUSE 2nd GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/24/99	1,000.00
Hastert for Congress Committee Post Office Box 625 Batavia, IL 60510	Dennis Hastert, U.S. HOUSE 14th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/24/99	1,250.00

SUBTOTAL of Disbursements This Page (optional)

10,850.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
FOR LINE NUMBER 23

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

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
Gallegly for Congress P.O. Box 3789 Simi Valley, CA 93093	Elton Gallegly, U.S. HOUSE 23rd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/24/99	1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Jennifer B Dunn Post Office Box 40110 Bellevue, WA 98015	Jennifer Dunn, U.S. HOUSE 8th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/24/99	2,000.00
C. Full Name, Mailing Address and ZIP Code Walden for Congress Post Office Box 1091 Hood River, OR 97031	Greg Walden, U.S. HOUSE 2nd OR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/24/99	2,000.00
D. Full Name, Mailing Address and ZIP Code Fossella for Congress Post Office Box 060248 New Dorp Station Staten Island, NY 10306	Vito Fossella, U.S. HOUSE 13th NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/27/99	4,000.00
E. Full Name, Mailing Address and ZIP Code Fossella for Congress Post Office Box 060248 New Dorp Station Staten Island, NY 10306	Vito Fossella, U.S. HOUSE 13th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/27/99	1,000.00
F. Full Name, Mailing Address and ZIP Code Friends of Mark Foley Post Office Box 30505 Palm Beach Gardens, FL 33420	Mark Foley, U.S. HOUSE 16th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/27/99	2,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Mark Foley Post Office Box 30605 Palm Beach Gardens, FL 33420	Mark Foley, U.S. HOUSE 16th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/27/99	2,000.00
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)	14,000.00
TOTAL This Period (last page this line number only)	33,350.00

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-20-99
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>ses</i> PREPARER	9-21-99 DATE PREPARED