

**HAND DELIVERED**

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COMMISSION  
REPORTS ANALYSIS  
DIVISION

MAR 21 9 33 AM '97

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC		2. FEC IDENTIFICATION NUMBER  C 0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported  1200 17th Street, NW		
CITY, STATE and ZIP CODE  Washington, DC 20036		

3.  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:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     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>02/01/97</u> through <u>02/28/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 57,468.56
(b) Cash on Hand at Beginning of Reporting Period	\$ 80,616.14	
(c) Total Receipts (from Line 19)	\$ 5,974.98	\$ 29,155.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 86,616.12	\$ 86,616.12
7. Total Disbursements (from Line 30)	\$ 21,325.00	\$ 21,325.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 65,291.12	\$ 65,291.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 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

Date

3-20-97

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 (1/1/81)

NAME OF COMMITTEE National Restaurant Association PAC	REPORT COVERING PERIOD	
	FROM: 02/01/97	TO: 02/28/97
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees	5,100.00	24,811.60
i. Itemized (Use Schedule A)	874.98	4,234.98
ii. Unitemized		
iii. Total (add i and ii)	5,974.98	29,046.58
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add all, b and c)	5,974.98	29,046.58
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.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	108.98
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	5,974.98	29,155.56
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	5,974.98	29,155.56
20. Total Federal Receipts (subtract line 18 from line 19)		
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	0.00	0.00
c. Total Operating Expenditures (Add a, ii, and b)	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	21,000.00	21,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441ald) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made		
28. Refunds of Contributions To:	325.00	325.00
a. Individuals/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (Such As PACs)	325.00	325.00
d. Total Contribution Refunds (Add a, b, and c)	0.00	0.00
29. Other Disbursements	21,325.00	21,325.00
30. Total Disbursements (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	21,325.00	21,325.00
31. Total Federal Disbursements (Subtract line 21 aii from line 30)		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (Other than loans) (from line 11d)	5,974.98	29,046.58
33. Total Contribution Refunds (from line 28d)	325.00	325.00
34. Net Contributions (Other than loans) (subtract line 33 from 32)	5,649.98	28,721.58
35. Total Federal Operating Expenditures (add 21 ai and 21 b)	0.00	0.00
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35)	0.00	0.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 <b>William P McCormick</b> <b>720 SW Washington #550</b> <b>Portland, OR 97205</b>	Name of Employer <b>McCormick &amp; Schmick</b>  Occupation <b>Restaurateur</b>	Date (Month day, Year) <b>02/10/97</b>	Amount of Each Receipt this Period  <b>5,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>5,000.00</b>		
B. Full Name, Mailing Address and Zip Code <b>Elaine Grabau</b> <b>Route 2, Box 66D</b> <b>Lovettsville, VA 22094</b>	Name of Employer <b>National Restaurant Association</b>  Occupation <b>Association Executive</b>	Date (Month day, Year)  <b>Payroll Deduction</b>	Amount of Each Receipt this Period  <b>100.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		(\$100.00 Semimonth)
C. Full Name, Mailing Address and Zip Code	Name of Employer   Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer   Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer   Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer   Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer   Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		5,100.00

SUB TOTAL of Receipts This Page (Optional).....>	5,100.00
TOTAL this Period (Last page this line number only).....>	5,100.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE	OF
1	2
FOR LINE NUMBER	
23	

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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 Disb. this Period
Chris Cannon for Congress, Inc. 42 North University Avenue Suite 207 Provo, UT 84601	Chris Cannon, U.S. HOUSE 3rd UT Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	02/01/97	2,000.00
Friends of Bud Cramer AL-05-D 223 East Side Square Huntsville, AL 35801	Bud Cramer, U.S. HOUSE 5th AL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	02/01/97	2,000.00
Tom DeLay Congressional Committee 10707 Corporate Drive Suite 130 Stafford, TX 77477	Tom DeLay, U.S. HOUSE 22nd TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/04/97	2,000.00
Chet Edwards for Congress Post Office Box 182 Waco, TX 76703	Chet Edwards, U.S. HOUSE 11th TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	02/01/97	2,000.00
Nebraskans for Hagel 1125 South 103 Street Post Office Box 241497 Omaha, NE 68124	Chuck Hagel, U.S. SENATE NE Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	02/01/97	2,500.00
Friends of Jane Harman 5200 West Century Blvd., #370 Los Angeles, CA 90045	Jane Harman, U.S. HOUSE 36th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/01/97	2,000.00
Helms for Senate NC-S-R 3901 Barrett Drive, Suite 300 Post Office Box 20699 Raleigh, NC 27609	Jesse Helms, U.S. SENATE NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	02/07/97	1,000.00
Hobson for Congress Committee OH-07-R 2525 North Limestone Springfield, OH 45503	David L. Hobson, U.S. HOUSE 7th OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/07/97	1,000.00
Friends of Congressman Tim Holden 302 Mahantongo Street Pottsville, PA 17901	Tim Holden, U.S. HOUSE 6th PA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/01/97	2,000.00

SUB TOTAL of Disbursements this page (Optional).....> 16,500.00

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

PAGE **2** OF **2**  
FOR LINE NUMBER **23**

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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and Zip Code Chris John for Congress, Inc. Post Office Box 971 Crowley, LA 70527-0971</p>	<p>Purpose of Disbursement Chris John, U.S. HOUSE 7th LA</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 02/01/97</p>	<p>Amount of Each Disb. this Period 2,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Friends of Sessions Senate Committee, Inc. Post Office Box 4278 Montgomery, AL 36103</p>	<p>Purpose of Disbursement Jeff Sessions, U.S. SENATE AL</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement</p>	<p>Date (Month day, Year) 02/07/97</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Jim Turner for Congress Committee 603 East Gollad Crockett, TX 75835</p>	<p>Purpose of Disbursement Jim Turner, U.S. HOUSE 2nd TX</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement</p>	<p>Date (Month day, Year) 02/01/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code WISH LIST 3205 N Street, NW Washington, DC 20007</p>	<p>Purpose of Disbursement Contribution</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997</p>	<p>Date (Month day, Year) 02/01/97</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>
<p>F. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>
<p>H. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>
<p>I. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>

<p>SUB TOTAL of Disbursements this page (Optional).....&gt;</p>	<p>4,500.00</p>
<p>TOTAL this Period (Last page this line number only).....&gt;</p>	<p>21,000.00</p>

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS

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

Hand Delivered

DATE OF RECEIPT

3-21-97

First Class Mail

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DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*SES*  
PREPARER

3-24-97  
DATE PREPARED