

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Aug 18 3 26 PM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association		2. FEC IDENTIFICATION NUMBER C 0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th St. NW		
CITY, STATE and ZIP CODE Washington, DC 20036		
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 checked="" type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input 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 _____

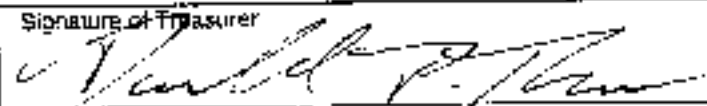
(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/95</u> through <u>7/31/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 42,802.05
(b) Cash on Hand at Beginning of Reporting Period	\$ 39,177.84	
(c) Total Receipts (from Line 19)	\$ 26,736.04	\$ 149,914.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 65,913.88	\$ 192,616.10
7. Total Disbursements (from Line 30)	\$ 3,494.48	\$ 130,196.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 62,419.40	\$ 62,419.40
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information contact:
Federal Election Commission
550 E Street, NW
Washington, DC 20463
Tel. Free 800-424-9530
Local 202-218-3420

Type or Print Name of Treasurer: Donald P. Thoren (Assistant Treasurer)

Signature of Treasurer:  Date: 8/12/95

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

FEC FORM 3X

(revised 8/93)

1 LEARN101

**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 7/1/95 TO: 7/31/95	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		21,411.98	107,150.80
i. Itemized (use Schedule A)		5,324.06	21,651.91
ii. Unitemized			
iii. Total	(add i and ii) >	26,736.04	128,802.71
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		.00	20,500.00
d. Total Contributions	(add a iii, b and c) >	26,736.04	149,302.71
12. Transfers From Affiliated/Other Party Committees		.00	.00
13. All Loans Received		.00	.00
14. Loan Repayments Received		.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)		.00	511.34
18. Transfers from Nonfederal Account for Joint Activity		.00	.00
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	26,736.04	149,814.05
20. Total Federal Receipts	(subtract line 18 from line 19) >	26,736.04	149,814.05
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		.00	.00
ii. Non-Federal Share		.00	.00
b. Other Federal Operating Expenditures		.00	459.86
c. Total Operating Expenditures	(add a i, a ii, and b) >	.00	459.86
22. Transfers to Affiliated/Other Party Committees		.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		3,494.48	129,736.84
24. Independent Expenditures (use Schedule E)		.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)		.00	.00
26. Loan Repayments Made		.00	.00
27. Loans Made		.00	.00
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		.00	.00
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		.00	.00
d. Total Contribution Refunds	(add a, b and c) >	.00	.00
29. Other Disbursements		.00	.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,494.48	130,196.70
31. Total Federal Disbursements	(subtract line 21 b ii from line 30) >	3,494.48	130,196.70
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		26,736.04	149,302.71
33. Total Contribution Refunds (from line 28d)		.00	.00
34. Net Contributions (other than loans) (subtract line 33 from line 32)		26,736.04	149,302.71
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	.00	459.86
36. Offsets to Operating Expenditures (from line 15)		.00	.00
37. Net Operating Expenditures	(subtract line 36 from line 35) >	.00	459.86

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1 of 3
	For Line Number 11a(1)

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Adams 1391 Chatterton Ragam, MN 55123	Reinhart Foods	07/28/95	700.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RESTAURATEUR	Aggregate Year To Date > \$ 700.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Arabatos 335 Hopkins Cross Rd. Minnetonka, MN 55343	AO Indoor	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RESTAURATEUR	Aggregate Year To Date > \$ 400.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kernan Cain 29140 West Dodge Road Omaha, NE 68114 3315	Godfather's Pizza, Inc.	07/14/95	1500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RESTAURATEUR	Aggregate Year To Date > \$ 1500.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Vincent Concansia 141 Palisouth Rd. Hyannis, MA 02601 3755	Dinner with family/Health to family	07/03/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation RESTAURATEUR	Aggregate Year To Date > \$ 200.00

SUBTOTAL of Receipts This Page (optional):

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 13
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cal C Chandler PO Box 99010 Tarona, MA 99099	Ram International, Ltd.	07/18/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 200.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Synn Corrigan 2514 Emerson Ave. So. #7 Minneapolis, MN 55405	Boston Beer	07/28/95	1100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 1100.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard D'Amico 1402 1st Avenue South Minneapolis, MN 55403	D'Amico & Partners Inc	07/28/95	600.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 600.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas Day 7980 - 72nd St. South Cottage Grove, MN 55016	Minnesota Restaurant Assn.	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 200.00

REMOVAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A IDENTIFIED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 3	Of 3
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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen Dusek 2610 Holly Lane Plymouth, MN 55447	Challenge Printing	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 200.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Raul Dyke PO Box 446 Spring Park, MN 55384	Loyd Fletcher's of the Lake	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 200.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Garmuth 1915 West 35th St. Suite 208 St. Louis Park, MN 55416	TIPS	07/28/95	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 600.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rob Gensinger 4300 Baker Road Minnetonka, MN 55023	Adams Outdoor	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 200.00	

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Glenn Gulsvig 1608 New Brighton Blvd. NR Minneapolis, MN 55413	McSweeney Coffee Inc.	07/28/95	850.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 850.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arnold Hanes 871 Jefferson Avenue St. Paul, MN 55102	Minnesota Restaurant Assn.	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 400.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Holt 1926 Islandview Drive Mound, MN 55364	Juke Box Restaurant	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel Hubert 2447 Hennepin Avenue SOUTH Minneapolis, MN 55405	Chez Daniel	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 400.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ann Jennings 4915 West 35th Street St. Louis Park, MN 55416	T.I.P.S. / Best Steak	07/28/95	1100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 1100.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Connie Kirkland 734 Oak Hill Road Mobile, AL 36609	Kirk Kirkland's Bar BQ	07/03/95	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 500.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kevin Koenig 1500 Park Place Blvd St. Louis Park, MN 55416	Sheraton Park Plaza	07/28/95	800.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 800.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wayne Kosloski 808 Nicollet Mall Minneapolis, MN 55402	Routh Street Investments-North	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) >

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 13
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Kruse 2552 Lafayette Rd. Wayzata, MN 55391	Lord Fletcher's	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Kruse 2552 Lafayette Rd. Wayzata, MN 55391	Lord Fletcher's	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred J Kunz 115 Fourth Avenue Louisville, KY 40202	Kunz-Fourth & Market	07/24/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURANT Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Patrick Lewis 6821 Cheyenne Trail Edina, MN 55435	<i>Nikki's Inn</i>	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation <i>Restaurateur</i> Aggregate Year To Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule (a) for each category of the Detailed Summary Page	Page 7	Of 13
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ewart Maki 1313 Nicollet Minneapolis, MN 55402	Regal Minneapolis Hotel	07/28/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John C Metz RR #3 Box 236 Harvey's Lake, PA 18618	NASIER Country Restaurants	07/28/95	50.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1050.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pete Milojlov Suite 301A 3001 Hennepin Avenue South Minneapolis, MN 55408	Parasol Restaurant Holdings	07/28/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Moerissey 350 Market Street St. Paul, MN 55102	St. Paul Hotel	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Hotel Management Aggregate Year To Date > \$ 400.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A TRACKED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page * 13	Of -----
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Perry Moy 3917 West Main McHenry, IL 60050	Plus Garden	07/28/95	500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 3000.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Muchales 1005 Harker Lane North Minneapolis, MN 55447	JP Mulligan's Restaurant	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 400.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Naegle 4300 Baker Road Minnetonka, MN 55343	Jord Fletcher's/Flagship	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 2700.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike Nelson 5500 Wazata Boulevard, Ste 1053 St. Louis Park, MN 55416	Brackett Professional	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 9	Of 13
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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joan Orthoff 2550 Frances Ave S. Rising, MN 55435	Lord Fletcher's	07/28/95	200.00
Occupation Restaurateur			
Aggregate Year To Date: \$ 200.00			

Receipt for: Primary | | General
| | Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	07/28/95	300.00
Occupation Restaurateur			
Aggregate Year To Date: \$ 300.00			

Receipt for: Primary | | General
| | Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	07/28/95	300.00
Occupation Restaurateur			
Aggregate Year To Date: \$ 300.00			

Receipt for: Primary | | General
| | Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeana Puccinelli 4102 Donald Road Yakima, WA 98908	Mels Diner Corp	07/17/95	500.00
Occupation Restaurateur			
Aggregate Year To Date: \$ 500.00			

Receipt for: Primary | | General
| | Other (specify)

SUBTOTAL of Receipts This Page (optional)

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 10	of 13
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NAME OF COMMITTEE (In Full)
 National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William R Roberts 5913 South Front Street New Orleans, LA 70115	Roberts Gumbo Shop	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 200.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Schiltz 3442 Lake Elm Avenue North Lake Elm, MN 55042	Lake Elm Inn Inc.	07/28/95	1600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 1600.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Silesky 7900 International Drive, No. 500 Minneapolis, MN 55425 1504	Sedgewick James	07/28/95	1100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 1100.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike Tawey 755 Prairie Center Drive Eden Prairie, MN 55344	Flagship/Scars	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date > \$ 400.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FINISHED RECEIPTS)

Use separate schedule(s) for each category of the Detailed Summary Page	Page 12	Of 13
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	For line Number	
	11a(i)	

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kevin E Tracy 3746 Sunset Drive Spring Park, MN 55384	Gord Fletcher's of the Lake	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian M Windachitl 755 Prairie Center Drive Eden Prairie, MN 55344	Restaurants No Limit	07/28/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General <input checked="" type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian M Windachitl 755 Prairie Center Drive Eden Prairie, MN 55344	Restaurants No Limit	07/28/95	600.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1600.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James M Hardsworth 9401 Lee Highway Fairfax, VA 22031	JR's Steak House	07/28/95	150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 650.00		

SUBTOTAL of Receipts This Page (optional)

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 12	Of 13
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
 National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kerry YOUNG 11990 Tapestry Lane Minnetonka, MN 55305	J.F. Mulligans	07/28/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify:		Occupation Restaurateur	Aggregate Year To Date: \$ 200.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marcus Zander 5525 South Okhelle Street Seattle, WA 98108	South Sound Red Robin Inc.	07/17/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify:		Occupation Restaurateur	Aggregate Year To Date: \$ 1000.00

SUBTOTAL of Receipts This Page (optional)>
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 13 OF 13
FOR LINE NUMBER 11063

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NAME OF COMMITTEE (In Full)

National Restaurant Association Political Action Committee C 0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Elaine Graham Route 2, Box 66D Lovettsville, VA 22080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Association Exec. Aggregate Year-to-Date > \$ 586.38	7/31/95	83.34
Don Thoren 5340 Holmes Run Parkway, #305 Alexandria, VA 22304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Association Exec. Aggregate Year-to-Date > \$ 270.92	7/31/95	41.60
Patti Stinger 115 South Patrick Street, #202 Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Association Exec. Aggregate Year-to-Date > \$	7/31/95	43.48
Lee Culpepper 341 South Pickett Street Alexandria, VA 22304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Association Exec. Aggregate Year-to-Date > \$	7/31/95	43.48
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) 21,411.98

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SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	OF 1
	For Line Number	
	33	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Kasich 666 Mason Alley Columbus, OH 43205-	Cont. to John Kasich (OH-13)		1200.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify)	07/05/95	

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michael Z. Grunbaum 1800 17th St., NW Washington, D.C. 20036.	Cont. for Mike Parker (MS-4)		2794.48
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)	07/18/95	(In-kind)

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Greg Laughlin Victory Campaign P.O. Box 2484 Victoria, TX 77902-	Cont. to Greg Laughlin (TX-14)		500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify)	07/11/95	

SUBTOTAL of Disbursements This Page (optional)>
TOTAL This Period (last page this line number only)> 3,494.48

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

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DATE OF RECEIPT

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Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JMH
PREPARER

8-21-95
DATE PREPARED

95039450203