

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 DEC 20 P 4 50

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC		2. FEC IDENTIFICATION NUMBER C 0000 3784
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. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

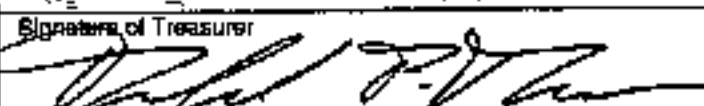
- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 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>11/01/99</u> through <u>11/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 184,443.63
(b) Cash on Hand at Beginning of Reporting Period	\$ 113,235.82	
(c) Total Receipts (from Line 19)	\$ 64,580.80	\$ 374,721.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 177,816.62	\$ 639,165.55
7. Total Disbursements (from Line 30)	\$ 21,700.00	\$ 383,048.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 156,116.62	\$ 156,116.62
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:
Federal Election Commission
888 E Street, NW
Washington, DC 20465
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer: Don Thoren, Assistant Treasurer
Signature of Treasurer: 
Date: 12/29/99

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 8/93)

**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 11/01/89	TO: 11/30/90
		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)	47,870.40	271,453.89
ii.	Unitemized	16,531.20	94,398.58
iii.	Total (add i and ii) >	64,401.60	365,852.47
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	7,000.00
d.	Total Contributions (add a iii, b and c) >	64,401.60	372,852.47
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	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	179.20	1,889.45
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	64,580.80	374,721.92
20.	Total Federal Receipts (subtract line 18 from line 19) >	64,580.80	374,721.92
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share	0.00	0.00
ii.	Non-Federal Share	0.00	0.00
b.	Other Federal Operating Expenditures	0.00	10,332.73
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	10,332.73
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	21,700.00	357,716.20
24.	Independent Expenditures (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees	0.00	0.00
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contribution Refunds (add a, b and c) >	0.00	0.00
29.	Other Disbursements	0.00	16,000.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	21,700.00	383,048.93
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	21,700.00	383,048.93
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	64,401.60	372,852.47
33.	Total Contribution Refunds (from line 28d)	0.00	0.00
34.	Net Contributions (other than loans)(subtract line 33 from 32)	64,401.60	372,852.47
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	10,332.73
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00
37.	Net Operating Expenditures (subtract line 36 from 35) >	0.00	10,332.73

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 12

FOR LINE NUMBER 11 a 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 from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Jack D Knox 300 Crescent Court #1630 Dallas, TX 75201-1891	Name of Employer Cafe Pacific, Inc.	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 425.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Jimmy W. Britt, FMP P.O. Box 803 Greenwood, SC 29648	Name of Employer Blazers Specialty Foods	Date (month, day, year) 11/02/99	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):			
C. Full Name, Mailing Address and ZIP Code Charles Pappas 15 South Broadway Rochester, MN 55904-3799	Name of Employer Michael's Restaurant	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 100.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Lynn Birleff 211 West 19th Suite 201 Cheyenne, WY 82001-4433	Name of Employer Wyoming Lodging & Restaurant Association	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 185.00
	Occupation Executive	Aggregate Year-to-Date > \$ 285.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Robert E. Williams Jr., 1036 Market Street Columbia, SC 29201-4741	Name of Employer Lizard Thicket's Restaurant	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 100.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Paul Smith 604 Highway 72 E Corinth, MS 38834-5441	Name of Employer RUSSELL'S BEEFHOUSE	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 300.00
	Occupation restaurateur	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Donald Tober 960 Third Ave New York, NY 10022-2705	Name of Employer Sugar Foods Corp.	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period 250.00
	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) 1,860.00

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 **2** OF **12**
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 Gryn Carlisle Jr. 1877 Center Street Portage, IN 46368-1644</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Kentucky Fried Chicken</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Stephen C. Johnson 3117 N. 15th Street Phoenix, AZ 85016</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Macayo Mexican Restaurants, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 3,100.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Richard Fontana 11 Meyer Drive Santa Cruz, CA 95060-1011</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ladyard Company</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code James S. Broadhurst 100 Park Manor Drive Pittsburgh, PA 15205-1099</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Eat'n Park Restaurants</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Donald H. Ellis 809 West Main Street Mesa, AZ 85201-7106</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Landmark Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 450.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ronnie Hart P.O. Box 681207 Franklin, TN 37088-1207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tennessee Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code John Johnstone 10566 Montgomery Blvd. NE Suite 90 Albuquerque, NM 87111-3857</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tortilla Inc. dba Gardunos of Mexico</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional) **3,300.00**

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 12
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 Ted Burke P.O. Box 65 Capitola, CA 95010</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Shadowbrook Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Roger Egan P.O. Box 1570 Tempe, AZ 85280-1670</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer McDuffy's Sportsbar, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Rolf Lewis 2108 Broadway San Francisco, CA 94115-1329</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Rolf's Restaurants Associates</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Einar W Bergetedt 199 First Street Suite 212 Los Altos, CA 94022-2708</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Harman Management Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Regynald Washington P.O. Box 10000 11610 N. Ave. of Stars #100 Lake Buena Vista, FL 32830</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Walt Disney World Co.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Benny LaRuea 133 W. Oxmoor Rd. Birmingham, AL 35209-6379</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jack's Family Restaurants, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Bob Lariva 601 Union Street San Francisco, CA 94133-2812</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Flor d' Italia Ristorante</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional) **6,000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **4** OF **12**
FOR LINE NUMBER **11 B 1**

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Matt McMahon 28804 N. 71 Place Cave Creek, AZ 85331-6830</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Outback Steakhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 1,500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Rex Griswold 2613 N. Thunderbird Cir Mesa, AZ 85215-2503</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Anzio Landing Italian Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Kelly Sample 18863 North 71st Lane Glendale, AZ 86308-5860</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Arrowhead Enterprises</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,080.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 2,080.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Don Burton 1121 E. Sheldon Ave. Prescott, AZ 85017</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer JB's Restaurants</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 650.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 650.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Scott Butler P.o. Box 27243 Tucson, AZ 86726</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer J.B.'s Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Jaymi Cameron 4413 East Roma Phoenix, AZ 85018</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bill Johnson's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Frank Fondriel 6620 East Lewis Avenue Scottsdale, AZ 85257-2007</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Arizona Beverage</p> <p>Occupation Restaurant Contractor</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 450.00</p>

SUBTOTAL of Receipts This Page (optional) **5,830.00**

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 5 OF 12
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Jim Fuller 10851 North Black Canyon Hwy Phoenix, AZ 85029	Name of Employer INFORMATION REQUESTED Occupation Restaurateur	Date (month, day, year) 11/15/99	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 325.00	
B. Full Name, Mailing Address and ZIP Code James Groff 11225 N. 28th Dr. Phoenix, AZ 85029	Name of Employer INFORMATION REQUESTED Occupation Restaurateur	Date (month, day, year) 11/16/99	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 Dale Loucks 7939 West Shangri La Peoria, AZ 85345	Name of Employer INFORMATION REQUESTED Occupation Restaurateur	Date (month, day, year) 11/16/99	Amount of Each Receipt this Period 389.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 389.00	
D. Full Name, Mailing Address and ZIP Code Doug Thompson 917 North Coronado Street Gilbert, AZ 85234	Name of Employer Carrabbas Italian Grill Occupation restaurateur	Date (month, day, year) 11/16/99	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Jeffrey Varacalli 1940 Stockton Street 102 San Francisco, CA 94133	Name of Employer Varacalli's Occupation Restaurateur	Date (month, day, year) 11/15/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Paul Westhoff 6827 East Nightgale Star Scottsdale, AZ 85262-7045	Name of Employer Westroc Contracting Occupation Restaurant Contractor	Date (month, day, year) 11/15/99	Amount of Each Receipt this Period 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code Joa Coray 4511 32nd Road, North Arlington, VA 22207-4418	Name of Employer Facia Luna Pizzeria Occupation Restaurateur	Date (month, day, year) 11/16/99	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 650.00	
SUBTOTAL of Receipts This Page (optional)			2,864.00
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 8 OF 12
FOR LINE NUMBER 11 a l

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Michael Sternberg 8240 Leesburg Pike Vianna, VA 22182</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sam & Harry's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,200.00</p>	<p>Date (month, day, year) 11/16/99</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Fred J Schaake 724 Lafayette Road PO Box 232 Hampton, NH 03842-1246</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hampton Beach Casino</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 555.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 555.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Joan H Perrault P.O. Box 436 Milton, NH 03051-0435</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Miller Brewing Company</p> <p>Occupation Restaurant Contractor</p> <p>Aggregate Year-to-Date > \$ 555.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 555.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jon Hildreth 43 Winnicoash Street Laconia, NH 03246-3040</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer J.A. Hildreth Co.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 740.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 740.00</p>
<p>E. Full Name, Mailing Address and ZIP Code John J Hebert P.O. Box 85 Portsmouth, NH 03802-0085</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Seaport Fish</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 370.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 370.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Thomas M Moulton 179 Exeter Road Hampton, NH 03842-1913</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer DiNero Development</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 740.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 740.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Stephen G. J. Henry 3 Dodier Ct Merrimack, NH 03054-2537</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FASFAX</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 370.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 370.00</p>

SUBTOTAL of Receipts This Page (optional) 3,530.00

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 7 OF 12
FOR LINE NUMBER 11 a 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 from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Pete Mihajlov 3001 Hennepin Avenue Suite 301A Minneapolis, MN 55400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole Restaurant Holdings, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,750.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Pata Mihajlov 3001 Hennepin Avenue Suite 301A Minneapolis, MN 55400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole Restaurant Holdings, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 4,700.00</p>	<p>Date (month, day, year) 11/29/98</p>	<p>Amount of Each Receipt this Period 1,950.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Pete Mihajlov 3001 Hennepin Avenue Suite 301A Minneapolis, MN 55400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole Restaurant Holdings, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 4,950.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code K.J. Mullins 321 Lafayette Road Hampton, NH 03842-2108</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Kenco</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 740.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 740.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Tom Day 871 Jefferson Avenue Saint Paul, MN 55102-2601</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Minnesota Restaurant, Hotel & Resort Assn.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Luis Larrea 2864 Eagandale Boulevard Eagan, MN 55121</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alliant Foodservice</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Nancy Mueller 263 Cedar Street White Bear Lake, MN 55110-1809</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alliant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 300.00</p>

SUBTOTAL of Receipts This Page (optional) **3,990.00**

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 8 OF 12
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James G Palm 2727 Nicollet Ave. S. Minneapolis, MN 55408-1664	Palm Brothers	11/29/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
John Tinios 325 Lafayette Road Hampton, NH 03842	The Galley Hatch Restaurant	11/29/99	602.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 787.00	
John Tinios 325 Lafayette Road Hampton, NH 03842	The Galley Hatch Restaurant	11/29/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,787.00	
Patrick S Whitley 183 Greene Street North Andover, MA 01845-3934	Whits Media, Inc.	11/29/99	370.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Contractor	Aggregate Year-to-Date > \$ 370.00	
Glen Philbrook 38 Love Lane Kittery, ME 03904-1733	Philbrook's	11/29/99	370.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 370.00	
James Ahearn 88 Laurel Ave. Bradford, MA 01835-7225	New England Coffee	11/29/99	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurant supplier	Aggregate Year-to-Date > \$ 300.00	
James Ahearn 88 Laurel Ave. Bradford, MA 01835-7225	New England Coffee	11/29/99	375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurant supplier	Aggregate Year-to-Date > \$ 675.00	

SUBTOTAL of Receipts This Page (optional) **4,017.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **9** OF **12**
FOR LINE NUMBER **11 a I**

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code DJ Collyard 1250 Weirk Dr. Woodbury, MN	Name of Employer Keys Cafe Occupation Restaurateur	Date (month, day, year) 11/28/99	Amount of Each Receipt this Period 255.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 255.00		
B. Full Name, Mailing Address and ZIP Code DJ Collyard 1250 Weirk Dr. Woodbury, MN	Name of Employer Keys Cafe Occupation Restaurateur	Date (month, day, year) 11/29/99	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 455.00		
C. Full Name, Mailing Address and ZIP Code Tim Fahs 16270 S. Hillcrest Court Eden Prairie, MN 56346	Name of Employer INFORMATION REQUESTED Occupation Restaurateur	Date (month, day, year) 11/29/99	Amount of Each Receipt this Period 360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		
D. Full Name, Mailing Address and ZIP Code Thomas Fort 18420 31st Avenue, North Plymouth, MN 55447	Name of Employer INFORMATION REQUESTED Occupation Restaurateur	Date (month, day, year) 11/29/99	Amount of Each Receipt this Period 260.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 260.00		
E. Full Name, Mailing Address and ZIP Code Grag A. Gadel 14122 Westridge Drive Eden Prairie, MN 55347-1733	Name of Employer Buca Ventures Occupation restaurateur	Date (month, day, year) 11/29/99	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 Kathleen Gust 533 North State Street Concord, NH 03301	Name of Employer Pepsi Occupation Restaurateur	Date (month, day, year) 11/29/99	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
G. Full Name, Mailing Address and ZIP Code Michael Harstine 15009 Rushmore Ct Burnsville, MN 55306	Name of Employer Parasole Occupation Restaurateur	Date (month, day, year) 11/29/99	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)	3,325.00
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 **10** OF **12**
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 Brian Johnson P.O. Box 581 Ashland, NH 03217-0581</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Common Man</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 485.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 485.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ricky Kimmes 5553 25th Avenue South Minneapolis, MN 55417</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Old Fashioned Foods</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 640.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 540.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Leslie Lafond 53 Moulton Road Hampton, NH 03842</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Real Estate Paralegal</p> <p>Occupation Restaurant Consultant</p> <p>Aggregate Year-to-Date > \$ 555.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 555.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Michael Larson 1865 Wayzata Boulevard Minneapolis, MN 55436</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Benjamin's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 370.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 370.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Rich Madden Jr. 683 D.W. Highway Merrimack, NH 03054</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Madden's Restaurants</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Barbara G. Marshall 1001 Tiller Lane Shoreview, MN 55126-8148</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole Restaurant Holdings</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 260.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 260.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Jack Nicholas 16 Albin Road Bow, NH 03304</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Northeast Food Service</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 666.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt this Period 555.00</p>

SUBTOTAL of Receipts This Page (optional) **3,055.00**

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 11 OF 12
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Palm 8409 115 1 2 Avenue Champlin, MN 55316	The Palm Tree	11/29/98	260.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 260.00	
Joseph Rolly 11345 - 40th Avenue North Plymouth, MN 55441	INFORMATION REQUESTED	11/29/99	140.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 240.00	
Kenneth Schelper 14524 Woodhill Terrace Minnetonka, MN 55345	Davanni's inc.	11/29/98	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	
Karen Schultz 512 John St. Minneapolis, MN 55343	Parasole	11/29/99	270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 270.00	
Maria Severoni 28 Deerwood Drive Litchfield, NH 03052	INFORMATION REQUESTED	11/29/99	740.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 740.00	
Randy Stanley 279 South Lake Street Forest Lake, MN 55025	INFORMATION REQUESTED	11/29/99	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	
Kelly Tousley 3320 Grand #301 Minneapolis, MN 55408	INFORMATION REQUESTED	11/29/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional) 7,410.00

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 12 OF 12
FOR LINE NUMBER 11 of 11

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code William T. Wengler 1303 Eleanor Avenue Saint Paul, MN 55116-1709</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Restaurants No Limit, Inc.</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 11/29/99</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Don Thoren 20881 Great Falls Forest Dr. Sterling, VA 20165-2814</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 380.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt This Period 40.00 (\$20.00 Semimonthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code Christina Howard 9700 Chilcott Manor Way Vianna, VA 22181-5400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 423.28</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt This Period 38.48 (\$19.24 Semimonthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code Kathleen O'Leary 1200 Braddock Place, #201 Alexandria, VA 22314-1664</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 416.80</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt This Period 41.68 (\$20.84 Semimonthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code Joe Rachinsky 1201 Braddock Place Apt. 506 Alexandria, VA 22314</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 211.64</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt This Period 19.24 (\$0.00 Bimonthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code Jay Di Pietro P.O. Box 3070 Boca Raton, FL 33431-0970</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Boca West Club, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,300.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt This Period 1,300.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Thomas Strasburg 11059 Nassau Circle Blaine, MN 55449</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer INFORMATION REQUESTED</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt This Period 250.00</p>

SUBTOTAL of Receipts This Page (optional) 2,689.40

TOTAL This Period (last page this line number only) 47,870.40

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23280-8150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Earned Occupation Aggregate Year-to-Date > \$ 1,669.45	Date (month, day, year) 11/30/99	Amount of Each Receipt this Period 179.20
B. 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
C. 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
D. 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
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)	179.20
TOTAL This Period (last page this line number only)	179.20

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
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 Disbursement This Period
Heather Wilson for Congress 9220 Guadalupe Terrace, NW Albuquerque, NM 87191	Heather Wilson, U.S. HOUSE 1st NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/02/99	2,000.00
PEOPLE FOR PETE DOMENICI NM-S-R P.O. Box 2206 Albuquerque, NM 87103	Pete V. Domenici, U.S. SENATE NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	11/02/99	1,000.00
Don Sherwood for Congress Committee 10 Bridgeover Tunkhannock, PA 18667	Don Sherwood, U.S. HOUSE 10th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
George Nathercutt for Congress P.O. Box 1925 Spokane, WA 99201	George Nathercutt, U.S. HOUSE 5th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
JOE SKEEN FOR CONGRESS INC PO BOX 2446 ROSWELL, NM 87201	Joe Skeen, U.S. HOUSE 2nd NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
Richard H. Baker for Congress Committee P.O. Box 1694 Baton Rouge, LA 70811	Richard H. Baker, U.S. HOUSE 6th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
Thomas Gerard Tancredo for Congress Committee 5471 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	11/03/99	1,000.00
Shelley Moore Capito for Congress P.O. Box 11519 Charleston, WV 25339	Shelley Moore Capito, U.S. HOUSE 2nd WV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
People with Hart P.O. Box 435 Waxford, PA 15090	Melissa Hart, U.S. HOUSE 4th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00

SUBTOTAL of Disbursements This Page (optional) 10,000.00

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 4
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 Disbursement This Period
Rohberg for Congress P.O. Box 1597 Helena, MT 59624	Dennis Rohberg, U.S. HOUSE AL MT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/03/99	1,000.00
Bob Kerrey for U.S. Senate Committee 3412 P Street, N.W. Washington, DC 20007	Bob Kerrey, U.S. SENATE NE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/05/99	1,000.00
Wally Herger for Congress P.O. Box 1500 Chico, CA 95827	Wally Herger, U.S. HOUSE 2nd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	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	11/29/99	1,000.00
Castle for Congress Fund Post Office Box 133 Wilmington, DE 19899	Michael N. Castle, U.S. HOUSE AL DE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Re-Elect Brian Bilbray for Congress 12780 High Bluff Drive #270 San Diego, CA 92130	Brian P. Bilbray, U.S. HOUSE 49th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Istook for Congress Committee 5400 N. Grand Boulevard Suite 100 Oklahoma City, OK 73112	Ernest Jim Istook, U.S. HOUSE 5th OK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Andrews for Congress Committee Post Office Box 2314 Washington, DC 20013	Robert E. Andrews, U.S. HOUSE 1st NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	1,000.00
Ryan for Congress P.O. Box 1919 Jamesville, WI 53547	Paul Ryan, U.S. HOUSE 1st WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00

SUBTOTAL of Disbursements This Page (optional)

7,000.00

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 4
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 Disbursement This Period
Whitfield for Congress Committee 1611 South Main Street Hopkinsville, KY 42240	Edward Whitfield, U.S. HOUSE 1st KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Ed Bryant for Congress Post Office Box 1951 Cordova, TN 38088	Ed Bryant, U.S. HOUSE 7th TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Gene Taylor for US Congress Post Office Box 38 Bay Saint Louis, MS 38520	Gene Taylor, U.S. HOUSE 5th MS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Dick Arney Campaign Post Office Box 85 Lewisville, TX 75067	Dick Arney, U.S. HOUSE 26th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	1,000.00
Kenny Hulshof for Congress Post Office Box 1621 Columbia, MO 65205	Kenny Hulshof, U.S. HOUSE 9th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Friends of Houghton P.O. Box 1107 Corning, NY 14830	Anio Houghton, U.S. HOUSE 31st NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	1,000.00
Buck McKeon for Congress Post Office Box 2071 Santa Clara, CA 91386	Howard P. "Buck" McKeon, U.S. HOUSE 25th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Friends of Max Cleland for the US Senate, Inc. 3146 Northeast Expressway Post Office Box 7843 Atlanta, GA 30357	Max Cleland, U.S. SENATE GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	11/29/99	200.00
MENENDEZ FOR CONGRESS P.O. Box 848 Union City, NJ 07087	Robert Menendez, U.S. HOUSE 13th NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00

SUBTOTAL of Disbursements This Page (optional)

5,200.00

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 4 OF 4
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 Disbursement This Period
SISKY FOR CONGRESS P.O. Box 2062 Petersburg, VA 23804	Norman Sisky, U.S. HOUSE 4th VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Stenholm for Congress Committee Post Office Box 1032 Stamford, TX 79653	Charles W. Stenholm, U.S. HOUSE 17th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	1,000.00
Friends Of Bennie Thompson Po Box 100 Bolton, MS 39041	Bennie G. Thompson, U.S. HOUSE 2nd MS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Cubin For Congress P.O. Box 4667 Casper, WY 82604	Barbara Cubin, U.S. HOUSE AL WY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Ehrlich for Congress Cmte 1301 York Road Suite 705 Lutherville, MD 21093	Robert Ehrlich, U.S. HOUSE 2nd MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/29/99	500.00
Fitzgerald for Senate Inc. 60 North Brockway Street Suite 4-5 Palatine, IL 60067	Voided 8/18/98 check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	11/30/99	-1,000.00
Fox for Congress Committee Post Office Box 632 Jenkintown, PA 19046	Voided 8/22/98 Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	11/30/99	-2,500.00
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)

-500.00

TOTAL This Period (last page this line number only)

21,700.00

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 <i>12-21-99</i>
<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 <hr/> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jm 10</i> PREPARER	<i>12-21-99</i> DATE PREPARED