

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Oct 17 12 16 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>National Restaurant Association PAC</i>		2. FEC IDENTIFICATION NUMBER <i>C 0000 3764</i>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>1200 17<sup>th</sup> Street, NW</i>		
CITY, STATE and ZIP CODE <i>Washington, DC 20036</i>		3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

## 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	<i>09/01/96</i> through <i>09/30/96</i>		
6. (a) Cash on Hand January 1, 19 <i>96</i>			<i>\$239,180.70</i>
(b) Cash on Hand at Beginning of Reporting Period		<i>\$ 93,720.30</i>	
(c) Total Receipts (from Line 19)		<i>\$ 130,793.02</i>	<i>\$ 400,402.31</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		<i>\$ 224,513.32</i>	<i>\$ 639,583.01</i>
7. Total Disbursements (from Line 30)		<i>\$ 202,559.05</i>	<i>\$ 617,628.74</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		<i>\$ 21,954.27</i>	<i>\$ 21,954.27</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		<i>\$ .00</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		<i>\$ .00</i>	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
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: *Elaine Z. Graham*

Signature of Treasurer: *Elaine Z. Graham* Date: *10-17-96*

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

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

revised 11/91

NAME OF COMMITTEE		REPORT COVERING PERIOD	
National Restaurant Association Pac		FROM 09/01/96	TO 09/30/96
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual Persons Other Than Political Committees			
i. Itemized (use Schedule A)		98,662.45	280,751.64
ii. Unitemized		15,432.50	70,787.16
iii. Total (add i and ii) >		114,094.95	351,538.80
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		16,381.67	41,891.67
d. Total Contributions (add a iii, b and c) >		130,476.62	393,420.47
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	65.43
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)		316.40	6,916.41
18. Transfers from Nonfederal Account for Joint Activity		.00	.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		130,793.02	400,402.31
20. Total Federal Receipts (subtract line 18 from line 19) >		130,793.02	400,402.31
<b>II. Disbursements</b>			
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		809.05	19,161.87
c. Total Operating Expenditures (add a i, a ii, and b) >		809.05	19,161.87
22. Transfers to Affiliated/Other Party Committees		.00	.00
23. Contributions to Federal Candidates, Committees and Other Political Committees		201,750.00	551,881.52
24. Independent Expenditures (use Schedule E)		.00	44,085.35
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. Individual Persons Other Than Political Committees		.00	2,500.00
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	2,500.00
29. Other Disbursements		.00	.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		202,559.05	617,628.74
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		202,559.05	617,628.74
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		130,476.62	393,420.47
33. Total Contribution Refunds (from line 28d)		.00	2,500.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		130,476.62	390,920.47
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		809.05	19,161.87
36. Offsets to Operating Expenditures (from line 15)		.00	65.43
37. Net Operating Expenditures (subtract line 36 from 35) >		809.05	19,096.44

**SCHEDULE A - ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 52
	For Line Number 11a(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 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
Wayne F Abele 2156 S. Sterling St. Worganton, NC 28655	Golden Corral Corp.	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 390.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert L Ansara 1863 S. Valley View Drive #2 Las Vegas, NV 89103	Ricardo's of Las Vegas	09/18/96	100.00
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
Robert L Ansara 1863 S. Valley View Drive #2 Las Vegas, NV 89103	Ricardo's of Las Vegas	09/30/96	100.00
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
James Armbrose 325 Hopkins Crise Rd. Minnetonka, MN 55343	AJ Indoor	09/09/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 800.00		

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 52
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Cathy & Robby 432 Shoreline Drive Decatur, IL 62521	Name of Employer Swartz Restaurant	Date (month, day, year) 09/18/96	Amount of Each Receipt This Period 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 T.M. Ashcraft PO Box 3615 Tupelo, MS 38803	Name of Employer The Fruit Patch	Date (month, day, year) 09/16/96	Amount of Each Receipt This Period 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 Bob Paced 491 Milwark Street Warwick, RI 02886	Name of Employer Gregg's	Date (month, day, year) 09/07/96	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 275.00	

Full Name, Mailing Address and Zip Code George Balaban 90 W. Oakley Las Vegas, NV 89102	Name of Employer Desert Cab Company	Date (month, day, year) 09/18/96	Amount of Each Receipt This Period 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**

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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
Jo Anna Berra 5110 Meadville Excelsior, MN 55331	Excelsior Park Tavern	03/09/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ronald Barbee 7801 North Ridge Road Raleigh, NC 27615	Golden Corral	05/12/96	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
Bob Barnes 2901 Bainbridge Odessa, TX 79762	Special	09/16/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     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
Borran Bann 77 Mt. Laurel Dr. Cranston, RI 02920	United Restaurant Equipment	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Salesman Aggregate Year To Date > \$ 275.00		

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
Myrrl H Bean 574 Greenbriar Columbus, NE 68701	University Management	03/16/96	500.00
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
Peter S Sedzyk 4321 Wayne Avenue South Minneapolis, MN 55416	Timberlodge Steakhouse, Inc.	09/09/96	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
Fred Boos 470 Waycliffe No Wayzata, MN 55391	Grand View Lodge	09/09/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Fred Boos 470 Waycliffe No Wayzata, MN 55391	Grand View Lodge	09/11/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 900.00		

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
Ralph Brennan 301 Royal Street New Orleans, LA 70130	Mr. B's	09/08/96	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
Elvin K Brewer 308 Pinewood Road Greenville, NC 27658	Kentucky Fried Chicken	09/26/96	500.00
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
James S BROADHURST 100 Park Manor Drive Pittsburgh, PA 15205	Ed's W Park Restaurant	09/18/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Brooks 4 NW, 2nd Street Evansville, IN 47708	Brooke Farm	09/13/96	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
Wayne M Bunting 117 Meadowood Drive Burlington, NC 27215	Cafe Concepts, Inc.	09/26/96	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
Craig Burstein 17260 31rd Avenue Minneapolis, MN 55447	Diners Club	09/09/96	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
Peter M Cafaro 2032 Plainfield Pike Cranston, RI 02921	Concerto Bhd.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anna Csizmadia 17022 Trenton Lane Eden Prairie, MN 55347	JP Foodservice	09/09/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 500.00		

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
Tola E Chin 2720 Le Solana Way Las Vegas, NV 89102	Chin's Drinking & Eating Place	09/18/96	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
Edward Christie 291 Fort Road #1207 St. Paul, MN 55102	Forebaugh's RESTAURANT	09/09/96	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
Allen Cicchitelli 2632 Plainfield Pike Cranston, RI 02921	Natura's Best Dairy	09/03/96	550.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 550.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles F Connor, Jr. PO Box 730 Claremont, NC 28610	Connor Management	09/26/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 250.00		

**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 8	OF 52
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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
Wayne M Consideira 45 Sharpe Drive Cranston, RI 02920	Wayne Distributing Co.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Sales Aggregate Year To Date \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter Conti Route 611 & 313 Doylestown, PA 18901	Conti Cross Keys Inn	09/18/96	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
Ellis Cornier Post Office Box 1267 Jennings, LA 70546	Bowdin King, Inc.	09/09/96	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
Herninio Correia 4 Blossom St West Warwick, RI 02893	West Valley Inn	09/08/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		

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

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SCHEDULE A IDENTIFIED RECEIPTS

Use separate schedule(s)	Page	Of
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Detailed Summary Page	-----	
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	[ 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
David Cortez 218 Produce Row San Antonio, TX 78207	MTC, Inc.	09/16/96	1500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 2500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Cortez 218 Produce Row San Antonio, TX 78207	MTC, Inc.	09/16/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 2500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ruben Cortez 218 Produce Row San Antonio, TX 78207	MTC, Inc.	09/16/96	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
Janie W Costello 4370 S. Valley View Las Vegas, NV 89103	JW Costello Beverage Co.	09/30/96	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 - RECEIVED 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
Richard D'Amico 1402 1st Avenue South Minneapolis, MN 55403	D'Amico & Partners Inc	09/09/96	900.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
Thomas Day 871 Jefferson Avenue St. Paul, MN 55103	Minnesota Restaurant Assn.	09/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Executive 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
Dennis Diaz 4395 Kirkwood Lane Plymouth, MN 55442	Commissaire Restaurant Management, Inc.	09/09/96	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 L Dixon Rwy 56, North Wilson, NC 27093	Silver Lake Oyster Bar	09/26/96	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 11	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Jim Dopranski 10201 Wayzata Blvd. #245 Minnetonka, MN 55343	Congisseur Restaurant Management, Inc.	09/09/96	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
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Doull Post Office Box 1171 West Monroe, LA 71294	Taco Rio, Inc.	09/09/96	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
David Duall 4000 Division Street Evansville, IN 47715	Market Real Estate	09/04/96	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 12	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions for such committee.

NAME OF CONTRIBUTOR (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
Charles Erwin PO Box 10386 Greensboro, NC 27404 0386	Golden Corral	09/26/96	\$800.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
Alice Eure PO Box 5357 Raleigh, NC 27638	The Angus Barn Limited	09/16/96	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sam J Paschini 4420 S. Arville Street, #8 Las Vegas, NV 89103	Metro Pizza	09/18/96	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
William Pant PO Box 2429 Starkville, MS 39759	Bulldog Deli	09/18/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 500.00		

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 52
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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
Rudy Fleischhacker 103 Rockmount Drive West Columbia, SC 29169	Western Steer	09/06/96	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
Julie Flik 10 Sound Rd. Rye, NY 10580	Flik International Corp.	09/18/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     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
Larry B Forehand 1135 Edgebrook Drive Houston, TX 77034	Casa Ole, INC.	09/16/96	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 5000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry B Forehand 1135 Edgebrook Drive Houston, TX 77034	Casa Ole, Inc.	09/16/96	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 5000.00		

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

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**SCHEDULE A ITEMIZED RECEIPTS**

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

**NAME OF CONTRIBUTOR (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
W B Fox 600 S. College Street Charlotte, NC 28202	Golden Corral	09/12/96	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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles Fries 5813 S. Valley View Boulevard Las Vegas, NV 89118	North Las Vegas Cabs Company	09/18/96	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
Frank T Gallieshaw, Jr. 24 Inman Road-Masonville Masonville, RI 02830	Night's Farm Restaurant	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date: \$ 275.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Gentry PO Box 2000 Newport, RI 02840	Eastern Resorts	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date: \$ 275.00

**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 15	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Charles Goodson 3809 Ambassador Caffery Hwy. Lafayette, LA 70503	Charley G's Seafood Grill	09/09/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 100.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward F Grace, III 1275 Waponaug Trail PO Box 276 East Providence, RI 02915	Bugahoo Creek Steak House, Inc.	09/03/96	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 2500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Gratziger 1640 Blackhawk Hills Road Zagun, NH 55122	Adams Outdoor	09/09/96	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
Brooks Gregg 703 W. Frien Lake Road Lake Charles, LA 70601	Wagon Wheel Barbecue & Catering	09/12/96	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 16	Of 52
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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
J. N Grimes Post Office Box 1550 Jacksonville, TX 75766	Dairy Queen	09/09/96	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
Glenn Gulsvig 5865 Hyland Courts Drive Bloomington, MN 55437	McGarvey Coffee Inc.	09/09/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 100.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Glenn Gulsvig 5865 Hyland Courts Drive Bloomington, MN 55437	McGarvey Coffee Inc.	09/09/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Glenn Gulsvig 5865 Hyland Courts Drive Bloomington, MN 55437	McGarvey Coffee Inc.	09/11/96	20.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 920.00		

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

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

SCHEDULE A - ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (Do Not)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tommy Haddock 1215 Franklin Rd., Ste. 102B Raleigh, NC 27606	Bojangles	09/25/96	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
Charlie Bahn 133 Douglas Avenue Providence, RI 02908	Sticky Fingers	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gregory Ramez 605 Pine Street Morgan City, LA 70380	Taco Bell	09/09/96	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
G. Hazzlecher 9520 Crownhill San Antonio, TX 78209	Frontier Enterprises	09/16/96	3000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 3000.00		

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

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

**SCHEDULE B ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 18	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions for such committee.

**NAME OF COMMITTEE (Do 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
Jim Hayes 1055 10th Ave S.E. Minneapolis, MN 55414 1379	Marigold Foods	09/09/96	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
Curt Bedeen 630 Brockton Lane North Plymouth, MN 55447	Intelligence Marketing	09/09/96	\$00.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 300.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Curt Bedeen 630 Brockton Lane North Plymouth, MN 55447	Intelligence Marketing	09/09/96	100.00
Receipt for: <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 900.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arnold Kewas 871 Jefferson Avenue St. Paul, MN 55103	Minnesota Restaurant Assn.	09/09/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Executive	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**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 19	Of 52
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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
Lynn B Hobgood P.O. Box 26 Cedar Grove, NC 27231	Golden Corral Corp.	09/26/96	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
Robert Bolt 4928 Islandview Drive Mound, MO 65364	Juke Box Restaurant	09/09/96	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
Linda Hoops P.O. Box 847 University, MS 38677 0847	University of Mississippi	09/16/96	100.00
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
Linda Hoops P.O. Box 847 University, MS 38677 0847	University of Mississippi	09/26/96	100.00
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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
	Occupation		
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hank Kales 4 Richmond Square Providence, RI 02906	The Catabase Grill	09/03/96	275.00
	Occupation Restaurateur		
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Kales 40 Ocean Road Narragansett, RI 02882	Coast Guard House Restaurant	09/03/96	275.00
	Occupation Restaurateur		
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date: \$ 275.00		

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
Ken Wilcoyne Post Office Box 1427 West Greenwich, RI 02817	Charles Fradin's	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob King 600 West Peachtree Street Suite 1500 Atlanta, GA 30308	Georgia Hospitality & Travel Assn.	09/23/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Executive 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
MARC Klauer 7096 Ramsey Road Bekron, IN 46344	Marti's Place at Ramsey's Landing	09/04/96	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
Jerry Knoblauch 2201 East 78th Street Bloomington, MN 55425	The Thunderbird Hotel & Convention Center	09/09/96	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
Roberta Knowles 11152 E. Harvard Drive Aurora, CO 80014	Knowles & Associates	09/30/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeffrey A Rosster 10810 Winery Road Warsawville, IN 47638 9417	ROOSTER & SON'S Enterprises	09/12/96	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
Bob Kruse 2552 Lafayette Rd. Wayzata, MN 55391	Swis Corp	09/09/96	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
Rob Kruse 2552 Lafayette Rd. Wayzata, MN 55391	Swis Corp	09/11/96	65.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 865.00		

TOTAL of Receipts This Page (optional) .....

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**SCHEDULE A - ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Michael J Kull 1803 Arboro Blade  Louisville, KY 40220	Orather's International Inc. DBA Oairy Queen	09/25/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
Fred J Kunz 115 Fourth Avenue  Louisville, KY 40202	Kunz-South E Market	09/16/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur		
	Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Willie R Lackey 1523 Newtowne Plaza  Statesville, NC 28677	Ray Lackey Enterprises	09/26/96	500.00
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
Jerry Long 18321 West Sioux Vista Drive  Jordan, MO 65352	Unibev LTD	09/09/96	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 IDENTIFIED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 24	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Wade Lew 11455 Viking Drive Eden Prairie, MN 55344	KILL Company	09/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurant 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
Jack Laughery 1730 Hunter Hill Road Rocky Mount, NC 27804	Hardee's Food Systems Inc.	09/16/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurant 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
Iris Leonard Route 2, Box 130-B Warsaw, NC 28398 9527	<i>The Country Squire</i>	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation <i>Restaurant</i> Aggregate Year To Date: \$ 390.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Leonard 2655 NE 189th Street N. Miami, FL 33180	International House of Pancakes Restaurant	09/09/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurant Aggregate Year To Date: \$ 500.00		

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 25	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Judy Landblad 8308 Shore breeze Las Vegas, NV 89128	Golden Eagle Bar + Grill	09/16/96	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
Doug Livingston 8500 Normandale Lakes BLVD #1200 Minneapolis, MN 55437	QAW Risk Services	09/09/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Account Manager 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
Shawn Love 118 Cecil Street, SE Minneapolis, MN 55414	Boston Beer	09/09/96	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
Tom Lowe 3630 West Lafayette Road Coonapier, MN 55331	Lynan Lumber	09/09/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 800.00		

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 26	Of 52
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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
Robert Luddy 112 Wheaton Drive Youngville, NC 27596	Captive-Aire Systems, Inc.	09/26/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurant Supplier 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
Raymond Mancini 119 Hopkins Hill Road West Greenwich, RI 02817	R.I. Distributing Company	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Don Martin 7408 East Olive Street Evansville, IN 47715	Centurion Store	09/04/96	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
AJ Martin 51 Graystone Street Warwick, RI 02806	A.J. Martin's	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

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

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**SCHEDULE A ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 27	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
John Mayfield 250 Main St.  Montpelier, VT 05602	New England Culinary Institute	09/09/96	25.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 35.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Mayfield 250 Main St.  Montpelier, VT 05602	New England Culinary Institute	09/16/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John McCalla 550 Poydras Street, Ste 2800  New Orleans, LA 70130	McCalla, Thompson, Rybron, Kynowitz & Shapiro	09/25/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary McCannet 6799 Miller Lane  Newburgh, IN 47630	The Mac Group Agency, Inc.	09/10/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

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
Terry McCormick P.O. Box 37108  Milwaukee, WI 53237	Superior Coffee	09/11/96	410.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 410.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen J McGarry 77 Homestead Avenue  Warwick, NJ 02889	Paramount Restaurant Supply	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 275.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard McLaughlin PO Box 118  Lincolnville, ME 04849	Lobster Pound Restaurant Inc.	09/16/96	750.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 750.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Maria J Malidis 104 - 39th Street, West  Western Springs, IL 60558	<i>Pegasus Restaurant</i>	09/16/96	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) .....

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**SCHEDULE A - ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 29	Of 52
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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
Lee Merkel 89 W29398 Thomas Road Waukesha, WI 53188	Willow Run Golf Club	09/12/96	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
Pete Mihajlov Suite 301A 3001 Hennepin Avenue South Minneapolis, MN 55408	Parson Restaurant Holdings	09/09/96	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
L. Dent Miller PO Box 730 Claremont, NC 28610	Conor Management Co.	09/26/96	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
Balour T Miller 430 S. Santa Rosa San Antonio, TX 78207	Brazos de Santos	09/16/96	175.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 175.00		

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 30	Of 57
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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
John E Miller 430 S. Santa Rosa  San Antonio, TX 78207	Brason de Santos	09/16/96	375.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 375.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas W Miller 430 S. Santa Rosa  San Antonio, TX 78207	BRASON DE SANTOS	09/16/96	375.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 375.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward B Monacur 613 Longview Street  Vicksburg, MS 39180	Maxwell's Restaurant & Lounge	09/16/96	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
Terrance Moran 40 Slater Road  Cranston, RI 02920	McLaughlin & Moran Inc.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		

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
Paul Moran 48 Slater Road Cranston, RI 02920	McLaughlin & Moran Inc.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Morrissey 350 Market Street St. Paul, MN 55102	St. Paul Hotel	09/09/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Hotel Management 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
Bill Morrissey 350 Market Street St. Paul, MN 55102	St. Paul Hotel	09/11/96	45.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Hotel Management Aggregate Year To Date > \$ 445.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John MCHMULAN 3005 Harbor Lane North Minneapolis, MN 55417	JP Mulligan's Restaurant	09/09/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 400.00		

TOTAL of Receipts This Page (optional) >

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 32	Of 52
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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
Nancy Mueller 263 Cedar Street White Bear Lake, MN 55110	Alliant Foodservice	09/09/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURANTOUR 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
Libby Murray 3380 Tates Creek Road Lexington, KY 40502	Merrick Inn	09/23/96	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
William Naegle 4300 Baker Road Minnetonka, MN 55343	Lord Fletcher's/Flagship	09/09/96	4800.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 4800.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephanie Naegle 4300 Baker Road Minnetonka, MN 55343	Lord Fletcher's / Flagship	09/09/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 5000.00		

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 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Mike Nelson 5500 Maymont Boulevard, Ste 1050 St. Louis Park, MN 55418	Drankett Professional	09/09/96	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
Julie Ness 7625 Desert Largo Avenue Las Vegas, NV 89128	Freeman Company	09/18/96	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
Leonard V Martin 3372 Legendangino Court Sparks, NV 89431	Melli's	09/18/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURANT 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
Thomas Newcom 2374 Joy Avenue White Bear Lake, MN 55110	BHJ	09/19/96	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**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 34	Of 52
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
James L O'Hara 3 Kicker Drive East Greenwich, RI 02818	Felvey Linen Supply, Inc.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Sales	Aggregate Year To Date > \$ 275.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Patrick L O'Malley 203 North LaSalle Street #2100 Chicago, IL 60601	Canteen Corporation	09/09/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 100.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Patrick L O'Malley 203 North LaSalle Street #2100 Chicago, IL 60601	Canteen Corporation	09/27/96	300.00
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
Wijhain B O'Meal 221 Millstone Drive Raleigh, NC 27615	Golden Corral	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 390.00	

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

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**SCHEDULE A ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Tim O'Reilly P.O. Box 549  Newport, RI 02840	Newport Yachting Center	09/03/96	275.00
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Houston Odum Jr. 1436 Kenneville Road  Virginia Beach, VA 23464	Golden Corral Corp.	09/16/96	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
Michael Glendon 4409 Dewees Court  Raleigh, NC 27612	XIM Restaurants, Inc.	09/26/96	500.00
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
Douglas A Fadgett 10077 Duter Lincoln  Newburgh, IN 47630	WRNT-TV 25	09/30/96	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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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
Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	09/09/96	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
Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	09/11/96	10.00
Receipt for: <input type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 210.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jesse Q Dale 2727 Nicollet Ave. S. Minneapolis, MN 55408	Palm Brothers	09/09/96	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
Ronald Palmer 801 Marquette Avenue Minneapolis, MN 55403	TCP Bank	09/11/96	2070.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 2070.00	

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SCHEDULE A FINISHED RECEIPTS

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NAME OF CONTRIBUTOR (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
Leonard Panaggo Bayer's Wharf  Newport, RI 02840	The Mooring Restaurant	09/19/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 375.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Papineau 2 Ursula Road  Smithfield, RI 02917	Autocrat Coffee	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation PAC-PAC Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chris Pappas Post Office Box 3141  Houston, TX 77253	Pappas Restaurants, Inc.	09/09/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 5000.00		

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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
Donald Parker 5220 Highway 66 Poseyville, IN 47833	D.K. Parker, Inc.	09/04/96	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
Linda V ParDue 2830 Montclair Road Winston-Salem, NC 27106	Golden Corral	09/26/96	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
Patricia Plumb 96 Diana Ave. Portsmouth, RI 02871	Brick Alley Pub	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR	Aggregate Year To Date: \$ 275.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jason Prodzinski 1610 Broadway Street, MB Minneapolis, MN 55413	Robert Corporation	09/09/96	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
Jasno Prodzinski 1610 Broadway Street, NE Minneapolis, MN 55413	Robart Corporation	09/11/96	50.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
Denise Reeb 521 South Main Street Woonsocket, RI 02895	Ocean Express Seafood	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert RAY 3415 Old Wake Forest Road Raleigh, NC 27609	North Raleigh Hilton	09/26/96	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
John Radey 1500 Oaklawn Avenue Cranston, RI 02825	Mustang Sally's	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 275.00		

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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
James W Reynolds II 7121 E. Sycamore Evansville, IN 47715	Barden's Restaurants	09/30/96	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
Louie L Richards PO Box 5666 Alexandria, LA 71307	Alexandria Golf & Country Club	09/09/96	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
Jack C Richmond 6610 San Pedro San Antonio, TX 78216	Pizza Hut	09/16/96	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
Mike Riley 701 Forest Park Drive Newburgh, IN 47630	WBNT-TV	09/04/96	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 UNRECORDED 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
ROBERT ROSS 2604 LYNDWOOD CIR NORMAN, OK 73069	Interurban Restaurants, Inc.	09/12/96	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
RODA ROUSS 4321 WILLISTON ROAD MINNETONKA, MN 55345	Sedgwick	09/09/96	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
JIM K SABISTON PO Box 2856 Rocky Mount, NC 27801	Golden Corral Corp.	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 390.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN SCHILTZ 3442 LAKE ELMO AVENUE NORTH LAKE ELMO, MN 55042	Lake Elmo Inn Inc.	09/09/96	2400.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 2400.00		

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

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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
Eric Schlenker 276 So. Exchange  St. Paul, MN 55102	Fore Pugh's	09/09/96	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
Robert W Schwab 900 York Road  Evansville, IN 47718	Schroeder's Wholesale	09/06/96	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
Paul Schroeder 2400 Co. Rd. J  Moundview, MN 55112	Byco Minnesota	09/09/96	700.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     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
Paul Schroeder 2400 Co. Rd. J  Moundview, MN 55112	Byco Minnesota	09/11/96	45.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 745.00		

**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
P. M Schwebach 100 Union Plaza 333 Washington Avenue, N. Minneapolis, MN 55401	Sixty Architects	09/09/96	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
C. Marshall Scott 382 East Avenue St. Louis, MO 63119	Marshall Scott Est., Inc.	09/19/96	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
Alan Seidenfeld 6650 E. Euclid Place Englewood, CO 80111	<i>Data Host Corp.</i>	09/18/96	250.00
Receipt For: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation <i>Restaurateur</i>	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
David Silvers 9257 Pitching Wedge Drive Las Vegas, NV 89134	<i>Alias Smith + Jones</i>	09/18/96	200.00
Receipt For: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation <i>Restaurateur</i>	Aggregate Year To Date: \$ 200.00	

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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
Harris Smith 6212 Trevor Ct. Raleigh, NC 27613	KS Cafeteria	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 390.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Calvin C Smith 301 Serpents St. Raleigh, NC 27609	Park Central Limited	09/11/96	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
Steven B Smith 130 W. Vintage Dr. Menomonee, WI 53092	Golden Corral Corp.	09/12/96	500.00
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
Ken Speagle 402 Colonial Dr. Burlington, NC 27215	Cobb Sign Company	09/25/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		

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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
Julie P Strub 6498 Neatchester Circle Golden Valley, MN 55427	Rubin, Karol & BREMER	09/09/96	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
Thomas J Sullivan 1610 Broadway Street NE Minneapolis, MN 55413	Hobart Corporation	09/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Sales Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas J Sullivan 1610 Broadway Street NE Minneapolis, MN 55413	Hobart Corporation	09/09/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Sales Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Summers 5901 Wayzata Boulevard St. Louis Park, MN 55416	Rykoff-Sexton	09/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 200.00		

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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
Barry S Swartz EXOLAB Center 1500 Providence Hwy. Suite 32 Norwood, MA 02062	EXOLAB, Inc.	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurant Sales Aggregate Year To Date: \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Roger W Szymczak 456 Douglas Avenue  Elgin, IL 60120	R.W. Szymczak & Associates	09/16/96	500.00
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
C. Milton Towner PO Box 760  East Greenwich, RI 02818	Twenty Water Street Restaurant	09/03/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike Tawny 755 Prairie Center Drive  Eden Prairie, MN 55344	Flagship/Stars	09/09/96	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		

**TOTAL 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 Flagship/Stars	Date (month, day, year)	Amount of Each Receipt This Period
Mike Teway 755 Prairie Center Drive Eden Prairie, MN 55344		09/11/96	45.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1245.00		

Full Name, Mailing Address and Zip Code	Name of Employer <i>Pion + Eddy's Restaurant</i>	Date (month, day, year)	Amount of Each Receipt This Period
Edward C Thompson 146 Main Street Forest City, NC 28043		09/26/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation <i>Restaurateur</i> Aggregate Year To Date: \$ 400.00		

Full Name, Mailing Address and Zip Code	Name of Employer Brazos de Santos	Date (month, day, year)	Amount of Each Receipt This Period
Vivian M Vance 430 E. Santa Rosa San Antonio, TX 78207		09/16/96	375.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 375.00		

Full Name, Mailing Address and Zip Code	Name of Employer Blanks USA	Date (month, day, year)	Amount of Each Receipt This Period
Gil Vander Bam 2722 44th Avenue North Minneapolis, MN 55447		09/09/96	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		

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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
Joseph J Vessdon, Jr. 20 Walnut Street Evansville, IN 47708	The Riverhouse	09/03/96	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
Everett Weber 818 Waltham COURT Evansville, IN 47713	Weber Equipment Company, Inc.	09/10/96	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
Khye Meng Ng 3800 NC. 96 South Hillsborough, NC 27278	Golden Corral Corp.	09/26/96	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
Shel Wert 11455 Viking Drive Eden Prairie, MN 55344	Century Bank, MN	09/09/96	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 B 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
Janis Wiegand 1 Watertower Place 4300 Baker Road Minnetonka, MN 55343	Restaurants No Limit	09/09/96	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
T. Jerry Williams PO Box 6528 Raleigh, NC 27628	North Carolina Restaurant Assn.	09/26/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Exec. 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 B Williams Sr. 1036 Market St. Columbia, SC 29201	Lizard's Thicket	09/05/96	350.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barbara S Williams 6708 Kaintner Drive Columbia, SC 29204	Lizard's Thicket	09/05/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 500.00		

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 50	of 52
	For Line Number 118(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
Brian M Windschitl 755 Prairie Center Drive Wagon Prairie, MN 55344	Restaurants No Limit	09/10/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
D. Alled Wint PO Box 1411 Andover, OK 73401	D. Allen Wints Catering	09/11/96	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
Johnny W Nooten 107 4th Avenue, South Columbus, MS 39701	Portobello's Italian Restaurant	09/16/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> 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
Sharon Working 1520 Oriole Drive Evansville, IN 47715	Working Properties	09/30/96	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 51	Of 52
	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
Peggy Wyatt 2204 Landings Way Raleigh, NC 27615	National Scale & Equipment Company, Inc.	09/26/96	390.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 390.00		
HARRY Younce 11990 Tapestry Lane Minnetonka, MN 55305	J.P. Mulligans	09/11/96	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		
ALFRED Samella Jr. 119 Hopkins Hill Rd. West Greenwich, RI 02817	RF Distributing	09/03/96	275.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 275.00		

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 52 OF 52  
FOR LINE NUMBER 11a(i)

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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
Elaine Z. Graham Rt 2, Box 66D Lovettsville, VA 22080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Assn. Executive	09/30/96	76.92
Aggregate Year-to-Date > \$		17461.48	
B. Full Name, Mailing Address and ZIP Code Donald P. 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 Occupation: Assn. Executive	09/30/96	19.23
Aggregate Year-to-Date > \$		365.37	
C. Full Name, Mailing Address and ZIP Code Lee Culpepper 341 S. Pickett Street Alexandria, VA 22304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Assn. Executive	09/30/96	20.84
Aggregate Year-to-Date > \$		354.28	
D. Full Name, Mailing Address and ZIP Code Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Assn. Executive	09/30/96	22.73
Aggregate Year-to-Date > \$		340.95	
E. Full Name, Mailing Address and ZIP Code Larry E. Farth, Jr. 1616 W. Abingdon Drive #202 Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Assn. Executive	09/30/96	22.73
Aggregate Year-to-Date > \$		340.95	
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	Date (month, day, year) Aggregate Year-to-Date > \$	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)

162.45

TOTAL This Period (last page this line number only)

98,662.45

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Texas Restaurant Association PAC P.O. Box 1429 Austin, TX 78767 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 09/16/96	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Outback Steakhouse PAC 550 N. Reo Street, Ste. 204 Tampa, FL 33609 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 09/09/96	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and ZIP Code TGI Friday's, Inc. PAC 7540 CBS Freeway, Ste 100 Dallas, TX 75251 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 09/19/96	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Unigate Restaurants Good Gov't PAC 8115 Preston Road LB7 Dallas, TX 75225 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 09/20/96	Amount of Each Receipt this Period 1,381.67
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)

16,381.67

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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Crestar NA P.O. Box 26150 Richmond, VA 23260	interest earned on cash equivalent fund	09/30/96	251.02
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,897.93	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Crestar Securities - Dreyfus P.O. Box 498 Richmond, VA 23204	interest earned on money market asset	09/30/96	65.38
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,018.48	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	

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

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

316.40



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 216

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**NAME OF COMMITTEE (in Full)**

*National Restaurant Association PAC*

A. 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>American Express 200 Vesey Street New York, NY 10285</i>	<i>Credit card fees</i>	<i>09/30/96</i>	<i>809.05</i>
B. 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
C. 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
D. 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
E. 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
F. 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
G. 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
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) .....

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

*809.05*

**SCHEDULE B ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 13
	For Line Number 23	

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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
Al Salvi for Senate Committee 800 East Northwest Highway Suite 220 Palatine, IL 60067-	cont. to Al Salvi (IL-8)	09/25/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ara Hutchinson for US Congress Post Office Box 2322 Fort Smith, AR 72902-	cont. to Ara Hutchinson (AR-3)	09/27/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Jenkins for Congress 207 East Main Street Rogersville, TN 37837-	cont. to Bill Jenkins (TN-1)	09/20/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Riley for Congress Post Office Box 700 Ashland, AL 36251-	cont. to Bob Riley (AL-3)	09/27/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Coburn For Congress Committee Post Office Box 504 Muskogee, OK 74402-	cont. to Tom Coburn (OK-2)	09/19/96	1000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

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

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 13
	For Line Number 23	

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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
Collins for Senate Post Office Box 1096 Bangor, ME 04402-	cont. to Susan Collins (ME-S)	09/27/96	4000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Danovan for Congress 75 Essex Street Hackensack, NJ 07601-	cont. to Kathleen Danovan (NJ-9)	09/25/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dupwe for Congress Post Office Box 9364 Jonesboro, AR 72403-	cont. to Warren Dupwe (AR-1)	09/27/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Enzi for US Senate 431 Circle Drive Gillette, WY 82716-	cont. to Mike Enzi (WY-S)	09/27/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frank Riggs For Congress PO Box 590 Windsor, CA 95492-	cont. to Frank Riggs (CA-1)	09/25/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

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

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 13
	For Line Number 23	

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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
Friends of Dan Miller 1111 Third Ave., Ste. 200 Bradenton, FL 34205-	cont. to Dan Miller (FL-13)	09/25/96	2000.00
	Disbursement for:   Primary   G   General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Inhofe 3035 NW 53rd #201N Oklahoma City, OK 73116-	cont. to Jim Inhofe (OK-8)	09/25/96	2000.00
	Disbursement for:   Primary   G   General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Harsdorf for Congress Post Office Box 1387 Esp. Claire, MI 48702-	cont. to Jim Harsdorf (MI-3)	09/25/96	5000.00
	Disbursement for:   Primary   G   General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Joe Pitts 305 Mitchell Farm Lane Kennett Square, PA 19348-	cont. to Joe Pitts (PA-16)	09/25/96	4500.00
	Disbursement for:   Primary   G   General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Peterson 119 W. State Street Pleasantville, PA 16341-	cont. to John Peterson (PA-5)	09/25/96	4500.00
	Disbursement for:   Primary   G   General		
	Other (specify)		

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

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 13
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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
Friends of John Warner '96 Committee 2111 Eisenhower Avenue Ste 402 Alexandria, VA 22314-	cont. to John Warner (VA-S)	09/24/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Larry Pressler P.O. Box 77186 Washington, DC 20013-	cont. to Larry Pressler (SD-S)	09/27/96	3000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mark Sharpe P.O. Box 26333 Tampa, FL 33623-	cont. to Mark Sharpe (FL-11)	09/24/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Newt Gingrich 1085 Malcolm Bridge Road Suite 190A Roswell, GA 30076-	cont. to Newt Gingrich (GA-6)	09/25/96	5000.00
	Disbursement for:   Primary   G General		
	Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Roy Blunt Post Office Box 278 Strafford, MD 20757-	cont. to Roy Blunt (MO-7)	09/27/96	2500.00
	Disbursement for:   Primary   G General		
	Other (specify)		

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

**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 5	of 13
	For Line Number 23	

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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
Gibbons for Congress 4655 Rivercenter Circle Reno, NV 89502-	cont. to Jim Gibbons (NV-2) Disbursement for:   Primary   G   General   Other (specify)	09/24/96	5000.00
Gill for Congress Committee 416 Wilson Pike Circle Suite 210 Brentwood, TN 37027-	cont. to Steve Gill (TN-6) Disbursement for:   Primary   G   General   Other (specify)	09/25/96	2500.00
Hamilton for Congress Post Office Box 99 Jeffersonville, IN 47150-	cont. to Lee Hamilton (IN-9) Disbursement for:   Primary   G   General   Other (specify)	09/25/96	2000.00
Hampton Roads Congressional Club & Friends of Owen Pickett Post Office Box 2137 Virginia Beach, VA 23452-	cont. to Owen Pickett (VA-2) Disbursement for:   Primary   G   General   Other (specify)	09/27/96	2300.00
Hastert for Congress Cate. P.O. Box 625 Metavia, IL 60510-	cont. to Denny Hastert (IL-14) Disbursement for:   Primary   G   General   Other (specify)	09/24/96	1250.00

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

**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 6	Of 13
	Box Line Number 23	

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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
Helms for Senate 4505 Falls of House Rd. Raleigh, NC 27609-	cont. to Jesse Helms (NC-8) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	3000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kandaris for Tim Roemer PO Box 4400 South Bend, IN 46634-	cont. to Tim Roemer (IN-3) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jane Swift for Congress 28 Beacon St. North Adams, MA 01247-	cont. to Jane Swift (MA-1) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jess Brown for US Congress P.O. Box 2246 Santa Cruz, CA 95061-	cont. to Jess Brown (CA-17) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Ryan for Congress Post Office Box 62B Lawrence, KS 66007-	cont. to Jim Ryan (KS-2) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/27/96	5000.00

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

**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 7	Of 13
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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
Joe Rogers for Congress Date. PO Box 17287 Denver, CO 80217-	cont. to Joe Rogers (CO-1) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/27/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Ensign for Congress 601 Barrow Court Henderson, NV 89015-	cont. to John Ensign (NV-1) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/26/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lipinski for Congress Committee 6242 W. 59th Street Chicago, IL 60638-	cont. to Bill Lipinski (IL-3) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McConnell Senate Cmte. '96 P.O. Box 1496 Louisville, KY 40201-	cont. to Mitch McConnell (KY-6) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/25/96	4000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Minge for Congress 360 10th Avenue Granite Falls, MN 56341-	cont. to David Minge (MN-2) Disbursement for:   Primary   <input checked="" type="checkbox"/> General   Other (specify)	09/27/96	2000.00

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

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



SCHEDULE B - PERMITTED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 8	Of 13
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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
Moran for Congress P.O. Box 2518 Alexandria, VA 22301-	cont. to Jim MORAN (VA-8) Disbursement for:   Primary   G General   Other (specify)	09/27/96	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Moran for Congress Post Office BOX 128 Hays, KS 67601-	cont. to Jerry Moran (KS-1) Disbursement for:   Primary   G General   Other (specify)	09/27/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Orton for Congress P.O. Box 1997 Provo, UT 84603-	cont. to Bill Orton (UT-3) Disbursement for:   Primary   G General   Other (specify)	09/25/96	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pat Roberts for Senate Post Office Box 15 Dodge City, KS 67801-	cont. to Pat Roberts (KS-8) Disbursement for:   Primary   G General   Other (specify)	09/27/96	5000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ferry for Congress 3139 Holcombe Box 405 Houston, TX 77025-	cont. to Brent Perry (TX-25) Disbursement for:   Primary   G General   Other (specify)	09/27/96	5000.00

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

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 9	Of 13
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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
Pickering for Congress Post Office Box 5440 Laurel, MS 39441-	cont. to Chip Pickering (MS-3)	09/25/96	2500.00
	Disbursement for:   Primary   General     Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Prosser for Congress P.O. Box 276 Appleton, WI 54912-	cont. to David Prosser (WI-8)	09/25/96	5000.00
	Disbursement for:   Primary   General     Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-Elect Congressman Joe Moakley Committee 99 Summer Street, Suite 1250 Boston, MA 02110-	cont. to Joe Moakley (MA-9)	09/25/96	1000.00
	Disbursement for:   Primary   General     Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Thurmond Campaign PO BOX 11691 Columbia, SC 29211-	cont. to Stroh Thurmond (SC-S)	09/24/96	2000.00
	Disbursement for:   Primary   General     Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rich Sybert for Congress Committee 21550 Oxnard Street Woodland Hills, CA 91367-	cont. to Rich Sybert (CA-24)	09/25/96	2500.00
	Disbursement for:   Primary   General     Other (specify)		

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

**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 10	Of 13
	For Line Number 23	

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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
Rick Hill for Congress Committee 2105 Crystal Drive Bellevue, MT 59601-	cont. to Rick Hill (MT-AL) Disbursement for:   Primary   <input checked="" type="checkbox"/> General     Other (specify)	09/27/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Weiler for Congress Committee 2500 N. Military Terr, SCS 382 Boca Raton, FL 33431-	cont. to Robert Weiler (FL-19) Disbursement for:   Primary   <input type="checkbox"/> General     Other (specify)	09/24/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ronny Romney for Senate Committee '96 Post Office Box 324 Southfield, MI 48037-	cont. to Ronny Romney (MI-5) Disbursement for:   Primary   <input checked="" type="checkbox"/> General     Other (specify)	09/25/96	5000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ruben Rizo Jones for Congress P.O. Box 1375 Marcelles, TX 78570-	cont. to Ruben Rizo Jones (TX-15) Disbursement for:   Primary   <input checked="" type="checkbox"/> General     Other (specify)	09/27/96	2500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sam Brownback for Senate 2605 West 21st Topeka, KS 66601-	cont. to Sam Brownback (AR-6) Disbursement for:   Primary   <input checked="" type="checkbox"/> General     Other (specify)	09/27/96	5000.00

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

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SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 11	Of 13
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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
Snowberger for Congress 110 S. Cherry Street, Ste. 103 Olathe, KS 66061-	cont. to Vince Snowberger (KS-3) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/27/96	4000.00
Stevens for Senate Committee P.O. Box 100879 Anchorage, AK 99510-	cont. to Ted Stevens (AK-8) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/96	1500.00
Teague for Congress Post Office Box 1888 Blynnis, MA 02601-	cont. to Ed Teague (MA-10) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/96	5000.00
Team Emerson '96 1244 Pinchill Road McLean, VA 22101-	cont. to Jo Ann Emerson (MO-8) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/96	5000.00
Team Emerson '96 1244 Pinchill Road McLean, VA 22101-	cont. to Jo Ann Emerson (MO-8) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Special General</i>	09/11/96	5000.00

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

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

**SCHEDULE B ITEMIZED DISBURSEMENTS**

Use separate schedule(a)	Page	of
for each category of the	12	13
Detailed Summary Page		
	Page Line Number	
	23	

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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
Tejeda for Congress 1313 SE Military Drive San Antonio, TX 78214-	cont. to Frank Tejeda (TX-28)	09/19/96	1000.00
	Disbursement for:   Primary   <input checked="" type="checkbox"/> General		
	Other (specify)		
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tim LeFever for Congress Post Office Box 1343 Dixon, CA 95620-	cont. to Tim LeFever (CA-3)	09/25/96	2500.00
	Disbursement for:   Primary   <input checked="" type="checkbox"/> General		
	Other (specify)		
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Davis for Congress 6429 Downing Court Annandale, VA 22003-	cont. to Tom Davis (VA-11)	09/10/96	1500.00
	Disbursement for:   Primary   <input checked="" type="checkbox"/> General		
	Other (specify)		
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wayne Allard for Congress P.O. Box #32 Lowland, CO 80539-	cont. to Wayne Allard (CO-5)	09/25/96	5000.00
	Disbursement for:   Primary   <input checked="" type="checkbox"/> General		
	Other (specify)		
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Weld for Senate 90 Canal Street Boston, MA 02114-	cont. to Bill Weld (MA-5)	09/25/96	5000.00
	Disbursement for:   Primary   <input checked="" type="checkbox"/> General		
	Other (specify)		

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

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**SCHEDULE B FINANCED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	Page 13	Of 13
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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
Whitfield for Congress Committee Post Office Box 391 Hopkinsville, KY 42341	cont. to Ed Whitfield (KY-1)	09/25/96	2500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zimmer for Senate, Inc. P.O. Box 782 Morristown, NJ 07963	cont. to Dick Zimmer (NJ-9)	09/25/96	5000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

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

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Federal Election Commission  
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