

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Oct 27 5 15 PM '94

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association Political Action Committee		2. FEC IDENTIFICATION NUMBER C0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW		
CITY, STATE and ZIP CODE Washington, D.C. 20036		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

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

Monthly Report Due On:

- 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 general (Type of Election)
election on Nov 8 1994 in the State of U.S.
 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	10/1/94 through 10/19/94		
6. (a)	Cash on Hand January 1, 1994		\$ 173,545.10
(b)	Cash on Hand at Beginning of Reporting Period	\$ 27,585.25	
(c)	Total Receipts (from Line 19)	\$ 30,285.00	\$ 361,501.81
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 57,870.25	\$ 535,046.91
7.	Total Disbursements (from Line 30)	\$ 31,972.50	\$ 509,150.16
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 25,897.75	\$ 25,896.75
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule G and/or Schedule D)	\$.00	

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

Type or Print Name of Treasurer Don Thoren	Date 10/27/94
Signature of Treasurer 	

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

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FEC FORM 3X
(revised 9/93)

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

(Revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM 10/1/94 TO 10/19/94	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	19,380.00	736,610.00	
ii. Unitemized	10,905.00	103,650.57	
iii. Total (add i and ii) >	30,285.00	738,260.57	
b. Political Party Committees	.00	.00	
c. Other Political Committees (such as PACs)	.00	19,000.00	
d. Total Contributions (add a iii, b and c) >	30,285.00	757,260.57	
12. Transfers From Affiliated/Other Party Committees	.00	.00	
13. All Loans Received	.00	.00	
14. Loan Repayments Received	.00	.00	
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	.00	.00	
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	.00	.00	
17. Other Federal Receipts (Dividends, Interest, etc.)	.00	.00	
18. Transfers from Nonfederal Account for Joint Activity	.00	.00	
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	30,285.00	757,260.57	
20. Total Federal Receipts (subtract line 18 from line 19) >	30,285.00	757,260.57	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	.00	.00	
ii. Non-Federal Share	.00	.00	
b. Other Federal Operating Expenditures	.00	1,948.76	
c. Total Operating Expenditures (add a i, a ii, and b) >	.00	1,948.76	
22. Transfers to Affiliated/Other Party Committees	.00	.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees	31,972.50	470,131.67	
24. Independent Expenditures (use Schedule E)	.00	36,069.73	
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	.00	
b. Political Party Committees	.00	.00	
c. Other Political Committees (such as PACs)	.00	.00	
d. Total Contribution Refunds (add a, b and c) >	.00	.00	
29. Other Disbursements	.00	.00	
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	31,972.50	509,150.16	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	31,972.50	509,150.16	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	30,285.00	757,260.57	
33. Total Contribution Refunds (from line 28d)	.00	1,000.00	
34. Net Contributions (other than loans) (subtract line 33 from 32)	30,285.00	756,260.57	
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	.00	1,948.76	
36. Offsets to Operating Expenditures (from line 15)	.00	.00	
37. Net Operating Expenditures (subtract line 36 from 35) >	.00	1,948.76	

SECTION 4 - Itemized Receipts

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions 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
Richard J Allen 455 River Road Hudson, MA 01749 0039	Diversy Corp.	10/23/94	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	
Robert Bonar 225 Boston Turnpike Sherborn, MA 01545	Ground Round	10/17/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 400.00	
Robert Bonar 10 Hunting Ave Boston, MA 02116	WESTON - INC	10 13/94	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	
Richard Brown 1111 Cedar Swamp Road Old Brookville, NY 11545	Bart's Vintners	10/13/94	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 schedules:	Page	of
for each category of the	2	14
Detailed Summary Page		
	For Line Number	
	11a11	

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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
Vincent Catania 141 Fairmount Road Hyannis, MA 02601	Dwight Webster	10/23/94	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
Lawrence J. Cirina 902 North Briarcliff Circle Maryville, TN 37501	Open Hearth Restaurant	10/01/94	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
Walter Condi Route 501 & 310 Doylestown, PA 18041	Condi Cross Keys Inn	10/23/94	250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify):	Occupation Restaurateur Aggregate Year To Date: \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary B Costello 1235 Bedford Street North Abington, MA 02351	Barrett Family Restaurant	10/05/94	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Gerald J. Cunningham 967 Mountain Road Shelton, CT 06410	J. Cunningham Incorporated	10/11/94	100.00
Receipt for: <input checked="" type="checkbox"/> Primary ; <input type="checkbox"/> General <input type="checkbox"/> 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
Joseph Cuzzi, Jr. 87 Kingston Road Malden, MA 02154	Liner & Laundry Sales, Inc	10/13/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary ; <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Sales 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 J. Dorso One Gaffin Way Chelsea, MA 02150	James J. Dorso, Inc	10/13/94	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 W. Dewar 752 Beacon Street Newton Centre, MA 02159	John Dewar & Company Inc.	10/13/94	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 schedules for each category of the Detailed Summary Page For Line Number Page 4

Any information excluded from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions to 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: Robert Fogelson, 80 Stockwell Drive, Avon, MA 02322
Name of Employer: Premium/Coastal Beverage Co.
Date (month, day, year): 10/13/94
Amount of Each Receipt This Period: 400.00
Occupation: Restaurateur
Aggregate Year To Date: \$ 500.00
Receipt for: Primary | General | Other (specify)

Full Name, Mailing Address and Zip Code: James R Flynn, 61 6 Cottage Grove Woods, Cedar Rapids, IA 52403
Name of Employer: Flynn Restaurants Limited
Date (month, day, year): 10/14/94
Amount of Each Receipt This Period: 200.00
Occupation: Restaurateur
Aggregate Year To Date: \$ 400.00
Receipt for: Primary | General | Other (specify)

Full Name, Mailing Address and Zip Code: Morris Esche, 8 Abbott Park Place, Providence, RI 02903
Name of Employer: Johnson and Wales University
Date (month, day, year): 10/11/94
Amount of Each Receipt This Period: 100.00
Occupation: Restaurateur
Aggregate Year To Date: \$ 200.00
Receipt for: Primary | General | Other (specify)

Full Name, Mailing Address and Zip Code: Cassandra Georgilakas, Unit 311 - 9 Broadway, Saugus, MA 01906
Name of Employer: Gold Star
Date (month, day, year): 10/13/94
Amount of Each Receipt This Period: 200.00
Occupation: Restaurateur
Aggregate Year To Date: \$ 200.00
Receipt for: Primary | General | Other (specify)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (Last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page
 Page 5
 Form Line Number 11a

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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
Connie Gibson 12 Howard Road Union, CT 06096	GEMINI FRUITS	10/11/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Staff	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
Michael Glover PO Box 123E Wilson, NC 27885	ARGUS BARS	10/06/94	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
Fred Glusman 355 Convention Center Drive Las Vegas, NV 89109	PIERRE Italian Cuisine	11/17/94	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
Larry Griewach 675 Kipling Lakewood, CO 80215	Jackson's Hole Sports Grill	10/11/94	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	

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 FAN

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wendine East 43 Stanton Drive Randolph, MA 02368	Lantana's	10/23/94	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Joseph Herbert 65-B Shawmut Road Shawmut Industrial Park Dartmouth, MA 02021	Taylor of New England	10/23/94	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Mark G. Caserio 436 Boston Post Rd Weston, MA 02185	RAI	10/23/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Roy Johnston 2722 Dartmouth Warren, OH 44483	Mary M's Restaurant	10/21/94	50.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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 'A' for each category of the Detailed Summary Page	Page 2	Of 2
		M
	For Line Number 17a11	

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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
Frederick C. Jones PO Box 146 Carrington, TN 37718	McDonald's Restaurant	11/23/94	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Wendy Keifer 5055 Annie Oakley Dr. Las Vegas, NV 89120	Play It Again Sam	10/17/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
William J Keller III PO Box 51950 Knoxville, TN 37950 1890	Open Hearth Restaurant	11/23/94	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Peter Kleiser PO Box 5567 Beverly Hills, CA 90209 5567	Rilton Hotel Corporation	10/21/94	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 200.00	

SUBTOTAL OF Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 8	of 11
	For Line Number	
	Start	

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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
Thomas Larsen 26 Quindocqua Road Newton, MA 02462	Miller House Inc	10/22/94	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 Lavate 21 Goulding St Sherborn, MA 01770	AAI	10/22/94	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
Emma Lloyd 28 Elm Hill Pt Boston, MA 02121	Boston White	10/17/94	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
Peter Marks PO Box 6308 Chelsea, MA 02150	Paul W. Marks Company, Inc.	10/19/94	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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NAME OF COMMITTEE (In Full)
National Restaurant Association

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Allen E Maxwell One Corporate Place 55 Vermont Road SARASOTA, MA 01923 4061	DRA Restaurants	10/13/94	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
For McMillan 4642 Antelope Wells Drive Las Vegas, NV 89129	McDonalds	10/11/94	100.00
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
Joseph A Milano, Jr. 41 Union Street Boston, MA 02106	Union Oyster House	10/13/94	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
Joseph A Milano, Jr. 41 Union Street Boston, MA 02108	Union Oyster House	10/13/94	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Restaurateur Aggregate Year To Date: \$ 1000.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 10	of 14
	Full Line Number (11a)	

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Name of Contributor (do not):
National Restaurant Association Inc

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward Moore 411 West Ridge Pike Limerick, PA 19460	Limerick Diner	10/12/94	100.00
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
Kathleen M Murphy 74 Lagalle Avenue Framingham, MA 01702	Massachusetts Rest. A Inc.	10/13/94	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
Sp: Brian 1540 North Center Lincoln, NE 68515	The Embassy Faculty	10/16/94	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RESTAURANT	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
Mary Puzos 6 1/2 Polger Ave. Beverly, MA 01915	Ipswich Snellfish	10/15/94	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 schedules for each category of the Detailed Summary Page	Page 12	of 17
	For Line Number	

Any information required from such Requests 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
Sharon Baccal 6850 Shelter Bay Ave. Mill Valley, CA 94901	Young's Market	10/11/94	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
James K Regan 8732 Metcalf Overland Park, KS 66209	Regan's Restaurant	10/13/94	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 Regan 744 Wellington Drive Knoxville, TN 37619	Regan's Embark, Inc.	10/11/94	50.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 1250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ted Rhodes PO Box 158 Blm City, NC 27822	Angus Barr	10/05/94	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		

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
 (For Line Number 11a)

Any information reported from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for political 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
Burton M. Sack 13 Riverside Office Park Suite 200 Weston, MA 02189 2299	Applebee's Neighborhood Grill	12/11/94	500.00
Occupation Restaurateur			
Aggregate Year To Date \$ 579.00			

Receipt for: Primary | General
 Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wesley Salvas 6770 Lake Eleanor Dr. Orlando, FL 32809	General Mills Restaurants, Inc.	10/07/94	5000.00
Occupation Restaurateur			
Aggregate Year To Date \$ 5000.00			

Receipt for: Primary | General
 Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Santoluppo 5761 Sentinel Drive Raleigh, NC 27609	Golden Corral Corp	10/03/94	100.00
Occupation Restaurateur			
Aggregate Year To Date \$ 100.00			

Receipt for: Primary | General
 Other (specify)

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James E. Schreiberhorst 5 Squires Lane St. Louis, MO 63131	Schreiberhorst Restaurant	12/11/94	200.00
Occupation Restaurateur			
Aggregate Year To Date \$ 200.00			

Receipt for: Primary | General
 Other (specify)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page
 Page 15
 For Line Number 11a

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 F&C

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Andrew C Scroggs 406 Shelbyville Road Knoxville, TN 37922	Open Hearth Restaurant	10/03/94	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
Richard T Shupburn 3500 East Lee Street Greensboro, NC 27405	Jackie's Diner & Smoke House	10/04/94	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 150.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sydney Small 2 Kiser Way Holbrook, MA 02343	Sidhar Enterprises	10/13/94	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
Guy J Thomas 3446 Navigator Pointe Knoxville, TN 37921	Open Hearth Rest.	10/03/94	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		

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
Anthony T Venturo 51 53 Church Street New Brunswick, NJ 08901	The Old Key Restaurant	10/05/94	330.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year To Date: \$ 330.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ernie Perna 15 Lakeside Office Park Wakefield, MA 01880	Sovereign Hotels, Inc.	10/13/94	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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 Nolas 12836 East Vassar Drive Aurora, CO 80014	Trinity Grill	10/13/94	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
Ng Elyx Wang 1401 Rushmore St. Durham, NC 27705	Solder Corral	10/07/94	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) _____ 1930.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

National Restaurant Association PAC

9 4 0 5 7 0 9 3 5 0 1

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nathan Deal for Congress P.O. Box 902 Gainesville, GA 30503	Cont. to Nathan Deal (GA-9) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500.00
B. Full Name, Mailing Address and ZIP Code Friends of Kent Conrad P.O. Box 812 Bismark, ND 58502	Purpose of Disbursement <i>ND-504</i> Cont. to Kent Conrad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
C. Full Name, Mailing Address and ZIP Code Committee to Elect McHugh P.O. Box 6161 Watertown, NY 13601	Purpose of Disbursement <i>NY-24</i> Cont. to John McHugh Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
D. Full Name, Mailing Address and ZIP Code Mike Crapo for Congress Committee P.O. Box 1013 Boise, ID 83701	Purpose of Disbursement <i>ID-2</i> Cont. to Mike Crapo Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
E. Full Name, Mailing Address and ZIP Code Omnin for Congress Committee P.O. Box 1022 St. Cloud, MN 56302	Purpose of Disbursement <i>MN-7</i> Cont. to Bernie Omann Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
F. Full Name, Mailing Address and ZIP Code Royce Campaign Committee 125 North Roosevelt Fullerton, CA 92632	Purpose of Disbursement <i>CA-39</i> Cont. to Ed Royce Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
G. Full Name, Mailing Address and ZIP Code Pete King for Congress Committee P.O. Box 1421 Seaford, NY 11783	Purpose of Disbursement <i>NY-3</i> Cont. to Pete King Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
H. Full Name, Mailing Address and ZIP Code A Lot of Folks for Pat Williams P.O. Box 1994 Helena, MT 59624	Purpose of Disbursement <i>MT-AL</i> Cont. to Pat Williams Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
I. Full Name, Mailing Address and ZIP Code Bryan for Congress 101 Laurens Street Lauren, SC 29360	Purpose of Disbursement <i>SC-3</i> Cont. to James Bryan Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000

SUBTOTAL of Disbursements This Page (optional) \$7,000

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **3** OF **3**
FOR LINE NUMBER

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

NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

24037095303

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ron Freeman for Congress Committee P.O. Box 5555 Kansas City, MO 64134	MO-5 Cont. to Ron Freeman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$2,000
Bass Victory '94 Committee 136 North Main Street, Suite 3 Concord, NH 03301	NH-2 Cont. to Charlie Bass Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
Radanovich for Congress 612 E. Shields Fresno, CA 93704	CA-9 Cont. to G. Radanovich Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$5,000
Cuhin for Congress 2241 Belmont Road Casper, WY 82604	WY-AL Cont. to Barbara Cuhin Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$3,000
Longley for Congress P.O. Box 7770 DTS Portland, ME 04112	ME-1 Cont. to Jim Longley Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
Capitol Catering 2316 Jefferson Davis Highway Alexandria, VA 22301	Reception for Gil Gutknecht (MN-1) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$972.50 (In Kind)
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)

\$12,972.50

TOTAL This Period (last page this line number only)

\$31,972.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Carroll for Congress Committee 79 River Street Montpelier, VT 05601	<i>VT-AL</i> Cont. to John Carroll Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$2,000
Moynihan Committee Inc. 29 East 40th Street New York, NY 10016	<i>NY-Sen.</i> Cont. to D. Moynihan Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
Friends of Bud Cramer 223 East Side Square Huntsville, AL 35801	<i>AL-S</i> Cont. to Bud Cramer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
People for English 1038 West 9th Street Erie, PA 16502	<i>PA-21</i> Cont. to Phil English Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
Citizens for Welch 3015 North 114th Street Milwaukee, WI 53222	<i>WI-Sen.</i> Cont. to Bob Welch Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$5,000
Citizens for Neumann 1 Parker Place Juneauville, WI 53545	<i>WI-1</i> Cont. to Mark Neumann Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$1,000
Rostenkowski for Congress Committee 1349 North Noble Street Chicago, IL 60622	<i>IL-S</i> Cont. to D. Rostenkowski Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
Sue Kelly for Congress 1212 N. Vernon Street Arlington, VA 22201	<i>VA-19</i> Cont. to Sue Kelly Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500
Lazio for Congress '94 70 Buyway Avenue Bridgewater, NY 11718	<i>NY-2</i> Cont. to Rick Lazio Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/94	\$500

SUBTOTAL of Disbursements This Page (optional)	\$12,000
TOTAL This Period (last page this line number only)	

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

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

Hand Delivered

DATE OF RECEIPT

10/27/94

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JiF.

PREPARER

10/28/94

DATE PREPARED

94037095309