

Oct 20 1993

October 20, 1993

Ms. Terry Reynolds  
Reports Analyst  
Reports Analysis Division  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Identification # C00003764

Dear Ms. Reynolds:

The National Restaurant Association Political Action Committee has exercised our "best efforts" to obtain information for Schedule A supporting line 11(a)(i). A solicitation card requesting this information has been sent to each contributor in order to comply with Federal Election Commission rule 11CFR104.3a4i.

Sincerely,



Mark Gorman  
Treasurer

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# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (Full) <b>National Restaurant Association Political Action Committee</b>	2. FEC IDENTIFICATION NUMBER  <b>0000 3764</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported  1200 17th Street, NW CITY, STATE and ZIP CODE  Washington, DC 20036	3. <input type="checkbox"/> This committee qualified as a multicard date 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:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input checked="" type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31


Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>9/01/93</u> through <u>9/30/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 32,904.08
(b) Cash on Hand at Beginning of Reporting Period	\$ 124,557.59	
(c) Total Receipts (from Line 19)	\$ 66,373.03	\$ 245,322.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 190,930.62	\$ 278,226.62
7. Total Disbursements (from Line 30)	\$ 31,000.00	\$ 118,296.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 159,930.62	\$ 159,930.62
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 C and/or Schedule D)	\$ .00	

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

Type or Print Name of Treasurer <b>Mark Gorman</b>	
Signature of Treasurer 	Date <b>10/20/93</b>

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

**FEC FORM 3X**

(revised 1/1/91)

4 4 4 4 4 4 3 3 3 3 3 3 2

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

(revised 11-91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM 9/1/93 TO 9/30/93	
		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)	49,261.18	150,591.38
	ii. Unitemized	16,835.69	72,417.22
	iii. Total (add i and ii) >	66,096.87	223,008.60
b.	Political Party Committees	.00	.00
c.	Other Political Committees (such as PACs)	.00	20,750.00
d.	Total Contributions (add a, b and c) >	66,096.87	243,758.60
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.)	276.16	1,563.94
18.	Transfers from Nonfederal Account for Joint Activity	.00	.00
19.	Total Receipts (add line 11c, 12, 13, 14, 15, 16, 17, and 18) >	66,373.03	245,322.54
20.	Total Federal Receipts (subtract line 13 from line 19) >	66,373.03	245,322.54
<b>II. Disbursements</b>			
21	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4):		
	i. Federal Share	.00	1,296.00
	ii. Non-Federal Share	.00	.00
b.	Other Federal Operating Expenditures	.00	.00
c.	Total Operating Expenditures (add a i, a ii, and b) >	.00	1,296.00
22.	Transfers to Affiliated Other Party Committees	.00	.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	31,000.00	116,850.00
24.	Independent Expenditures (use Schedule E)	.00	.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	.00	.00
26.	Loan Repayments Made	.00	.00
27.	Loans Made	.00	.00
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees	.00	.00
b.	Political Party Committees	.00	.00
c.	Other Political Committees (such as PACs)	.00	.00
d.	Total Contribution Refunds (add a, b and c) >	.00	.00
29.	Other Disbursements	.00	150.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	31,000.00	118,296.00
31.	Total Federal Disbursements (subtract line 21 a, i from line 30) >	31,000.00	118,296.00
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans) (from line 11c)	66,096.87	243,758.60
33.	Total Contribution Refunds (from line 28d)	.00	.00
34.	Net Contributions (other than loans) (subtract line 33 from line 32)	66,096.87	243,758.60
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	.00	1,296.00
36.	Offsets to Operating Expenditures (from line 15)	.00	.00
37.	Net Operating Expenditures (subtract line 36 from line 35) >	.00	1,296.00

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	of 23
	[For Line Number 1(a)(1)]	

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

NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Jerry Abel 4200 Broadway  San Antonio, TX 78209	Name of Employer Earl Abel's Restaurant	Date (month, day, year)  09/20/93	Amount of Each Receipt This Period  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 Gene T Aman 7500 South Tanglewild Drive  Raleigh, NC 27612	Name of Employer Golden Corral Corp.	Date (month, day, year)  09/16/93	Amount of Each Receipt This Period  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 Keith Ashby 206 North 22nd Street  Deer Park, IL 62521	Name of Employer Swartz Restaurant	Date (month, day, year)  09/16/93	Amount of Each Receipt This Period  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 Al Babcock 6305 Falls of Neuse Road  Raleigh, NC 27615	Name of Employer Golden Corral Corp.	Date (month, day, year)  09/16/93	Amount of Each Receipt This Period  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) ..... 1500.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 2	Of 23
	For Line Number 11e(f)	

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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
Ronald Barbee 7001 North Ridge Road Raleigh, NC 27615	Golden Corral	09/16/93	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
George Bessley 2401 Wildburne Court Charlotte, NC 28213	Golden Corral	09/16/93	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
E. Lamar Bell 4009 Twinwood Court Raleigh, NC 27613	Golden Corral	09/16/93	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
Wayne M Bunting 117 Meadowood Drive Saurington, NC 27215	Cafe Concepts, Inc.	09/16/93	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) .....> 1000.00

TOTAL This Period(least page this line number only).....>

SCHEDULE A ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Elizabeth Burns PO Box 1979  Santa Monica, CA 90406	Name of Employer Bob Burns Restaurant  Occupation Restaurateur Aggregate Year To Date> \$ 500.00	Date(month, day, year)  09/16/93	Amount of Each Receipt This Period  500.00
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Receipt for:  Primary |  General  
 Other (specify)

Full Name, Mailing Address and Zip Code Daniel Cannizzo 40 Main Street  Millburn, NJ 07041	Name of Employer 40 Main Street  Occupation Restaurateur Aggregate Year To Date> \$ 300.00	Date(month, day, year)  09/16/93	Amount of Each Receipt This Period  300.00
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Receipt for:  Primary |  General  
 Other (specify)

Full Name, Mailing Address and Zip Code Vincent Catania 160 Falmouth Road  Hypolis, MA 02601	Name of Employer Daniel Webacer  Occupation Restaurateur Aggregate Year To Date> \$ 300.00	Date(month, day, year)  09/22/93	Amount of Each Receipt This Period  200.00
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Receipt for:  Primary |  General  
 Other (specify)

Full Name, Mailing Address and Zip Code Peter Cherland 7908 Tylerton Drive  Raleigh, NC 27613	Name of Employer Golden Corral  Occupation Restaurateur Aggregate Year To Date> \$ 300.00	Date(month, day, year)  09/16/93	Amount of Each Receipt This Period  300.00
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Receipt for:  Primary |  General  
 Other (specify)

SUBTOTAL of Receipts This Page (optional) ..... 1300.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 4	Of 23
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Edward Clark PO Box 31606 Raleigh, NC 27622	Name of Employer Golden Corral Corp.	Date(month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Larry Curtis 765 NW 170th Drive Beaverton, OR 97008	Name of Employer Sharif's Management Corporation	Date(month, day, year) 09/01/93	Amount of Each Receipt This Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code John Day 2767 Lochmore Drive Raleigh, NC 27608	Name of Employer Golden Corral	Date(month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Phillip A Deale PO Box 26056 Las Vegas, NV 89126	Name of Employer	Date(month, day, year) 09/16/93	Amount of Each Receipt This Period 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) .....> 1200.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 5	Of 23
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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
Andy Divine 7555 South Elkhorn Mountain Littleton, CO 80127 3822	University of Denver	09/01/93	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 Reg Downey 10801 The Old Place Raleigh, NC 27614	Golden Corral	09/16/93	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 Stephan Elmont 300 Antwerp Street Boston, MA 02135	Creative Gourmets	09/16/93	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 Van Eure PO Box 6357 Raleigh, NC 27628	The Angus Barn Ltd	09/16/93	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) ..... 1750.00

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



SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	Of
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NAME OF COMMITTEE (In Full) National Restaurant Association PAC			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alice Eure PO Box 6357  Raleigh, NC 27628	The Angus Barn Limited	09/23/93	35.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1035.00		
Full Name, Mailing Address and Zip Code Edward Fusulo PO Box 370  Las Vegas, NV 89125	Four Queens Motel & Casino	09/01/93	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 Frank J Fertitta III 2003 West Sahara Avenue  Las Vegas, NV 89102	Palace Station	09/16/93	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 Ted W Fowler PO Box 29502  Raleigh, NC 27626	Golden Corral Corporation	09/16/93	2000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 2100.00		

SUBTOTAL of Receipts This Page (optional) .....> 2635.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 7	Of 23
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Ted M Fowler PO Box 29502  Raleigh, NC 27626	Name of Employer Golden Corral Corporation	Date(month, day, year)  09/23/93	Amount of Each Receipt This Period  100.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 2100.00		

Full Name, Mailing Address and Zip Code Vincent & Donna Frattura 10 Egg Rock Drive  Meburn, MA 01801	Name of Employer Hoff's Bakery	Date(month, day, year)  09/22/93	Amount of Each Receipt This Period  300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 600.00		

Full Name, Mailing Address and Zip Code Gary Gerard 540 North Street  Harmony, IN 47631	Name of Employer Red Geranium Enterprises Inc.	Date(month, day, year)  09/27/93	Amount of Each Receipt This Period  500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 1000.00		

Full Name, Mailing Address and Zip Code Fred Glusman 355 Convention Center Drive  Las Vegas, NV 89109	Name of Employer Piero's Italian Cuisine	Date(month, day, year)  09/01/93	Amount of Each Receipt This Period  200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 200.00		

SUBTOTAL of Receipts This Page (optional) .....> 1100.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 8	Of 23
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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
Byron Graper 3760A Old Palii Road Honolulu, HI 96817	Trans/Pacific Restaurants, Inc.	09/16/93	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
Gregory B Greenbaum 3611 Mayfair Place Atlanta, GA 30342		09/16/93	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
Guy Gregg 100 Main Street PO Box 729 Capeater, Md 07930	The Publick House	09/16/93	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
Michael Grisanti 9300 Shelbyville Road Louisville, KY 03402	Grisanti, Inc.	09/16/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional) .....> 1900.00

TOTAL This Period (Last page this line number only) .....>

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 9	Of 23
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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
Geo Hage Hwy 41 South		09/27/93	225.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year To Date >	\$	225.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Howard I Halpern 2926 Rivermeade Dr. NW Atlanta, GA 30327		09/16/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation		
	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
Betty A Handelman 628 East 190 North Jasper, IN 47546		09/27/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation		
	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
Gregory K Haycox 522 James Avenue Rockford, IL 61107	Golden Corral Corp.	09/16/93	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

SUBTOTAL of Receipts This Page (optional) .....> 2175.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	Of
	10	23
		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
Joseph Herbert 65-B Shawmut Road Shawmut Industrial Park Canton, MA 02021	Taylor of New England	09/22/93	400.00
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 400.00		
Jeffrey M Herah 4484 Glenbrook Drive Palm Harbor, FL 34683	Golden Corral	09/16/93	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		
Ronald F Higgins 10320 Red Hill Avenue Suite 150 Irvine, CA 92714	Trans/Pacific Restaurants, Inc.	09/16/93	2000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 2000.00		
Bradley C Hurley PO Box 25700 Raleigh, NC 27605	42nd Street Oyster Bar	09/16/93	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) .....> 2900.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas J Kopp 2245 East Flamingo Avenue Las Vegas, NV 89119	The Tillerman	09/01/93	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		
<input checked="" type="checkbox"/> Full Name, Mailing Address and Zip Code Papp & Georgia Karatzasos 3000 Peachtree Tree Rd. # 390 Atlanta, GA 30305	Buckhead Life Restaurant Grp.	09/16/93	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 Thomas A Kerahaw 500 Beacon Street Boston, MA 02108	Hamshire House Corporation	09/01/93	4000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 5000.00		
Full Name, Mailing Address and Zip Code Bob King 600 West Peachtree Street Suite 1500 Atlanta, GA 30308	Georgia Hospitality & Travel Assn.	09/16/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Executive Aggregate Year To Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) > 5000.00

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 William C Kozar 213 Loft Lane, Apt. 105 Raleigh, NC 27609	Name of Employer Golden Corral Corp.	Date (month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Michael J Kull 1809 Arbore Place Louisville, KY 40220	Name of Employer Druther's International Inc.	Date (month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Fred J Kunz 130 Fourth Avenue Louisville, KY 40202	Name of Employer Kunz-Fourth & Market	Date (month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Thomas Larsen 26 Quinobocuin Road Newton, MA 02162	Name of Employer Pillar House Inc.	Date (month, day, year) 09/24/93	Amount of Each Receipt This Period 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) .....> 900.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 13	Of 23
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer Home Specialties	Date (month, day, year)	Amount of Each Receipt This Period
William E Laswell P.O. Box 15007  Evansville, IN 47716		09/27/93	225.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 225.00		

Full Name, Mailing Address and Zip Code	Name of Employer Ox Yoke Inn, Inc.	Date (month, day, year)	Amount of Each Receipt This Period
Bill Leichenring, Jr. PO Box 230 Main Street Amara, IA 52203		09/16/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer Battista's Hole in the Wall	Date (month, day, year)	Amount of Each Receipt This Period
Battista Locatelli 4800 Audrie  Las Vegas, NV 89109		09/02/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer Golden Corral Corp.	Date (month, day, year)	Amount of Each Receipt This Period
Ronald S Marino 19859 NE 128th Court  Woodinville, WA 98072		09/16/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) .....> 1175.00

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
Gretchen Mathers 1333 Fifth Avenue Seattle, WA 98101	Gretchen's of Course	09/16/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		
James H Maynard PO Box 29502 Raleigh, NC 27626	Golden Corral Corporation	09/16/93	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 5000.00		
Daniel J McAnally PO Box 140 Bryn Mawr, PA 19008	Overbrook Golf Club	09/27/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		
Patrick McKinney 10529 Hickory Tree Road Fort Wayne, IN 46845	Pizza Hut	09/27/93	125.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) .....> \$825.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 15	Of 23
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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 A Milano, Jr. 41 Union Street Boston, MA 02108	Union Oyster House	09/22/93	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 Jimmy Moreland PO Box 2346 Anniston, AL 36202	Jimoco, Inc.	09/16/93	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 Perry Moy 3907 West Main Merrillville, IL 60050	Plum Garden	09/16/93	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 Biff Haylor 500 South Sepulveda Blvd. #101 Los Angeles, CA 90049 3544	American Restaurant Services, Inc.	09/16/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1000.00		
SUBTOTAL of Receipts This Page (optional)			3300.00
TOTAL This Period (last page this line number only)			

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 16 of 23
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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
Phil Moyes 4233 Kessler Ridge Drive Marietta, GA 30062	Food Service by NGR Inc.	09/27/93	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 Christopher J Pappas 662 Yale Street Houston, TX 77007	Peppasitos	09/22/93	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input checked="" type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 2500.00		
Full Name, Mailing Address and Zip Code Bess Peterson 1000 Highway 70 Bridgetown, NJ 08723	Peterson's Riviera Inn	09/16/93	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 T.C. Plain 10991 Old Lower Mt. Vernon Rd. Mt. Vernon, IN 47620	Executive Inn	09/27/93	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) .....> 3500.00

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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
Harold Pollin 3235 NE Airport Way Portland, OR 97220	Sheraton Inn Airport	09/01/93	250.00
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
Frank Pombo, Jr. 36 Lackawanna Avenue P.O. Box 303 Totowa, NJ 07511	Bethwood Restaurant	09/16/93	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
W. Howard Poole 260 West Saint Catherine Lexington, KY 40203	Dizzy Whizz Drive In	09/16/93	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
Gordon L. Paulsen 414 Forsyth Raleigh, NC 27609	Golden Corral	09/16/93	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) > 1250.00

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 Irwin C Roberts 1001 Harvey Street Raleigh, NC 27607	Name of Employer Golden Corral	Date (month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Ernie Royal 37 North Main Street Rutland, VT 05701	Name of Employer Ernie's Royal's Hearthside	Date (month, day, year) 09/22/93	Amount of Each Receipt This Period 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 Bob Russell 603 Whitlock Place, Suite F Marietta, GA 30064	Name of Employer Ernie's Restaurant Group	Date (month, day, year) 09/16/93	Amount of Each Receipt This Period 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 Pat Sauber 8434 Lavelle Road Athens, OH 45701	Name of Employer McDonalds	Date (month, day, year) 09/10/93	Amount of Each Receipt This Period 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) .....> 1100.00

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
Raymond D Schoenbaum 1480 Terrell Mill Road #1100 Marietta, GA 30067		09/16/93	250.00
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation 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
J.P. Sellers PO Box 14536 Oklahoma City, OK 73113 0536	The Catering Co.	09/03/93	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 Sorensen 1200 1/2 Geis Street Granger, WA 97020	La Ventura	09/17/93	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
Jeanine Stroth 8455 West Sahara, No. 270 Las Vegas, NV 89117		09/16/93	200.00
Receipt for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) .....> 750.00

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
Kavler Teixido 2020 Newman's Road Wilmington, DE 19810	Columbus Inn	09/16/93	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 William H Thomas Route 2, Box 639 Lake Park, GA 31636	The Tavern and Stone Creek Snack Bar	09/16/93	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 Stephen B Thompson PO Box 4599 ANNAr, OH 44310	Stephen B Thompson Inc.	09/16/93	3500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 3500.00		
Full Name, Mailing Address and Zip Code Richard A Urquhart, III 412 Oakwood Avenue Raleigh, NC 27601	Golden Corral	09/16/93	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) .....> 4250.00

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 & Sybil Vince 75 Lakeside Office Park Wakefield, MA 01880	Sovereign Hotels, Inc.	09/22/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation President 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
Tom Wells 1801 Broadway Denver, CO 80202	Trinity Grille	09/16/93	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
Edmund Mary 1089 South Beretania Street Honolulu, HI 96813	Auntie Pesto's	09/01/93	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
Raymond Washington 506 Fair Street, SW Atlanta, GA 30313	Concessions International, Inc.	09/16/93	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) .....> 2700.00

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 Weber 7504 Wingfoot Drive Raleigh, NC 27615	Golden Corral	09/16/93	325.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 325.00		
Full Name, Mailing Address and Zip Code Shearon White 1321 English Avenue Columbia, MD 21043	Golden Corral Corp.	09/16/93	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 T. Jerry Williams PO Box 6528 Raleigh, NC 27628	North Carolina Restaurant Assn.	09/22/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Association Exec. Aggregate Year To Date \$ 200.00		
Full Name, Mailing Address and Zip Code Bridie Wolf 1951 Bond Green Bay, WI 54302	Rock Garden Supper Club	09/02/93	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) ..... 1025.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee C8000 3764

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A. Full Name, Mailing Address and ZIP Code Mark Gorman 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) semi-monthly payroll deduction	Amount of Each Receipt this Period \$50.00 (\$25.00 per pay period)
B. Full Name, Mailing Address and ZIP Code Don Thoren 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$374.94	Date (month, day, year) semi-monthly payroll deduction	Amount of Each Receipt this Period \$41.66 (\$20.83 per pay period)
C. Full Name, Mailing Address and ZIP Code Elaine Graham 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$357.00	Date (month, day, year) semi-monthly payroll deduction	Amount of Each Receipt this Period \$47.60 (\$23.80 per pay period)
D. Full Name, Mailing Address and ZIP Code Lee Culpepper 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$369.41	Date (month, day, year) semi-monthly payroll deduction	Amount of Each Receipt this Period \$43.46 (\$21.73 per pay period)
E. Full Name, Mailing Address and ZIP Code JoAnn Emerson 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$369.41	Date (month, day, year) semi-monthly payroll deduction	Amount of Each Receipt this Period \$43.46 (\$21.73 per pay period)
F. Full Name, Mailing Address and ZIP Code  Receipt For: <input type="checkbox"/> Primary <input checked="" 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 checked="" 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)	\$ 226.18
TOTAL This Period (last page this line number only)	\$49,261.18

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE in Full

National Restaurant Association Political Action Committee

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A. Full Name, Mailing Address and ZIP Code 1st American Bank 740 15th Street, NW Washington, DC 20036	Name of Employer interest received on investment-money market checking account Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 9/30/93	Amount of Each Receipt this Period \$114.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer interest received on cash equivalent fund Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 9/30/93	Amount of Each Receipt this Period \$161.30
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
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
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
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
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) ..... \$276.16

TOTAL This Period (last page this line number only) ..... \$276.16

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 4
	For Line Number 23	

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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barrett Committee PO Box 176 Grand Island, NE 68802-	Cont. to Bill Barrett (NE-3) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   Other (specify)	09/29/93	500.00
Callahan for Congress Cate. PO Box 7641 Mobile, AL 36607-	Cont. to Sonny Callahan (AL-1) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   Other (specify)	09/29/93	500.00
Cass Ballenger for Congress Committee 301 10th Avenue Drive, NE Highery, NC 28601-	Cont. to Cass Ballenger (NC-10) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   Other (specify)	09/28/93	500.00
CIMZan's for Tom Patri PO Box 270 Fond du Lac, WI 54935-	Cont. to Tom Patri (WI-6) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   Other (specify)	09/09/93	500.00
Citizens for Welch PO Box 472 Madison, WI 53701-	Cont. to Robert Welch (WI) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General   Other (specify)	09/29/93	1000.00

SUBTOTAL of Disbursements This Page (optional)..... 3000.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	of
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	For Line Number	
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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
Dan Burton for Congress Cmte. PO Box 50593 Indianapolis, IN 46250-	Cont. to Dan Burton (IN-6)	09/09/93	500.00
	Disbursement for:   P   Primary     General     Other (specify)		
Friends for Slade Gorton 16610 21st Avenue, SW Seattle, WA 98166-	Cont. to Slade Gorton (WA)	09/29/93	5000.00
	Disbursement for:   P   Primary     General     Other (specify)		
Friends of Bryan '96 308 1/2 South 4th Street #1400 Las Vegas, NV 89101-	Cont. to Richard Bryan (NV)	09/29/93	2500.00
	Disbursement for:   P   Primary     General     Other (specify)		
Friends of Dick Zimmer PO Box 469 Flemington, NJ 08822-	Cont. to Dick Zimmer (NJ-12)	09/29/93	2500.00
	Disbursement for:   P   Primary     General     Other (specify)		
Friends of Frank Wolf PO Box 6546 McLean, VA 22106-	Cont. to Frank Wolf (VA-10)	09/29/93	1000.00
	Disbursement for:   P   Primary     General     Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ..... \$ 500.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

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

Full Name, Mailing Address and Zip Code Friends of Jennifer B Dunn PO Box 40170 Bellevue, WA 98004-	Purpose of Disbursement Cont. to Jennifer Dunn (WA-8) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/29/93	Amount of Each Disbursement This Period 2000.00
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Full Name, Mailing Address and Zip Code Jon Kyl U.S. Senate PO Box 10246 Phoenix, AZ 85016-	Purpose of Disbursement Cont. to Jon Kyl (AZ) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/29/93	Amount of Each Disbursement This Period 2000.00
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Full Name, Mailing Address and Zip Code Kay Bailey Hutchison for U.S. Senate Committee 800 Brazos, Suite 1200 Austin, TX 78701-	Purpose of Disbursement Cont. to Kay Hutchison (TX) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/29/93	Amount of Each Disbursement This Period 5000.00
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Full Name, Mailing Address and Zip Code Russell For Congress PO Box 326 Manchester, IA 52057-	Purpose of Disbursement Cont. to Jim Russell (IA-2) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/29/93	Amount of Each Disbursement This Period 2500.00
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Full Name, Mailing Address and Zip Code Pryce for Congress 200 North High Street #400 Columbus, OH 43215-	Purpose of Disbursement Cont. to Deborah Pryce (OH-15) Disbursement for: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/29/93	Amount of Each Disbursement This Period 1000.00
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SUBTOTAL of Disbursements This Page (optional).....> 2500.00

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

SCHEDULE B ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Senator John Chafee Committee PO Box 623  Providence, RI 02901-	Purpose of Disbursement Cont. to John Chafee (RI)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for:   P   Primary     General   --   -   -     -     Other (specify)	09/29/93	1500.00

Full Name, Mailing Address and Zip Code Trent Lott for Mississippi PO Box 22824 / Jackson, MS 39225- 3	Purpose of Disbursement Cont. to Trent Lott (MS)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for:   P   Primary     General   --   -   -     -     Other (specify)	09/29/93	1000.00

Full Name, Mailing Address and Zip Code Vucanovich for Congress P.O. Box 21435 9 Reno, NV 89515-	Purpose of Disbursement Cont. to E. Vucanovich (NV-1)	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for:   P   Primary     General   --   -   -     -     Other (specify)	09/29/93	1500.00

SUBTOTAL of Disbursements This Page (optional).....> 4000.00

TOTAL This Period (last page this line number only).....> 3,000.00

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

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

2  
3  
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<input checked="" type="checkbox"/> Hand Delivered	DATE OF RECEIPT <i>10-20-93</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	_____ DATE OF RECEIPT
<i>SLB.</i> PREPARER	<i>10-21-93</i> DATE PREPARED