

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 APR 20 P 4:32

USE FEC MAILING LABEL OR TYPE OR PRINT

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

4. TYPE OF REPORT

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

Monthly Report Due On:

- | | | |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input checked="" 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>03/01/00</u> through <u>03/31/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 224,537.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 149,035.20	
(c) Total Receipts (from Line 18)	\$ 31,297.19	\$ 31,794.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 180,332.39	\$ 266,332.39
7. Total Disbursements (from Line 30)	\$ 39,500.00	\$ 115,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 140,832.39	\$ 140,832.39
9. Debts and Obligations Owed TO the Committee (Normalize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Normalize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Lee Culpepper

Signature of Treasurer

Lee Culpepper / SPB

Date

April 20, 2000

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)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association Political Action Committee	REPORT COVERING PERIOD		
	FROM	TO:	
	03/01/00	03/31/00	
	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)	24,235.00	24,235.00	11(a)(1)
ii. Unitemized	5,815.19	5,842.59	11(a)(2)
iii. Total (add i and ii) >	30,050.19	30,077.59	11(a)(3)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) >	30,050.19	30,077.59	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	1,000.00	1,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	247.00	716.51	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	31,297.19	31,784.50	19
20. Total Federal Receipts (subtract line 18 from line 19) >	31,297.19	31,784.50	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	39,000.00	39,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (21 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	1,000.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	1,000.00	28(d)
29. Other Disbursements	500.00	15,500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	39,500.00	115,500.00	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	39,500.00	115,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	30,050.19	30,077.59	32
33. Total Contribution Refunds (from line 28d)	0.00	1,000.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	30,050.19	29,077.59	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ted Fowler Jr. P.O. Box 29502 Raleigh, NC 27626-0502	Golden Corral Corporation	03/03/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year-to-Date > \$ 5,000.00		
Carmen Vacalebri 378 Chase Avenue P.O. Box 4014 Waterbury, CT 06704-0014	CVAC Enterprises, Inc.	03/03/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year-to-Date > \$ 5,000.00		
Frank Cates Southern Wine & Spirits of NV 860 United Circle Sparks, NV 89431-6514	Southern Wine and Spirits of Nevada	03/03/00	250.00*
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sales Consultant Aggregate Year-to-Date > \$ 250.00		
Ronald N. Magruder 305 Hartman Drive North P.O. Box 787 Lebanon, TN 37088-0787	CBRL Group, Inc.	03/03/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year-to-Date > \$ 5,000.00		
Pano Karatassos 3060 Peachtree Tree Rd. NW #93 Atlanta, GA 30305-2234	Buckhead Life Restaurant	03/03/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year-to-Date > \$ 500.00		
Bob Ansara, FMP 3863 S. Valley View Suite 2 Las Vegas, NV 89103-2922	Ricardo's of Las Vegas, Inc.	03/03/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year-to-Date > \$ 1,000.00		
James F Sheppard N83 W13400 Leon Road Menomonee Falls, WI 53051-3306	Sandwich Properties	03/03/00	200.00
Receipt For: <input 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) **16,950.00**

TOTAL This Period (last page this line number only)

* Refund to be shown in May 20 report.

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Dipietro Boca West Club, Inc. P.O. Box 3070 Boca Raton, FL 33431-0070	Boca West Club, Inc.	03/03/00	1,610.00*
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 1,610.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arnold Isken 1811 Concord Pike Wilmington, DE 19803-2901	Howard Johnson's Restaurant	03/03/00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert St. John P.O. Box 17318 Hattiesburg, MS 39404	Purple Parrot/Crescent City Grill	03/03/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Williams, Jr., FMP 1036 Market Street Columbia, SC 29201-4741	Lizard's Thicket Restaurants	03/03/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Ann Johnston 815 Shoresbrook Dr. Spartanburg, SC 29301-6513	Fuddrucker's	03/03/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Ann Johnston 815 Shoresbrook Dr. Spartanburg, SC 29301-6513	Fuddrucker's	03/03/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Pizzo P.O. Box 801 Oneida & Milwaukee Streets Minocqua, WI 54548-0801	Polecat & Lace	03/03/00	200.00
Receipt For: <input 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) 3,210.00

TOTAL This Period (last page this line number only)

4-00173 *Refund to be shown in May 20 report.

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **4**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code John R. Farquharson, FMP 8 Belmont Boulevard Bewell, NJ 08080</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer International Food Safety Council</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ardith Daffinson 400 Lang Drive LaCrosse, WI 54603</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ardie's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Gustavo Gutierrez 6150 W. O'Bannon Las Vegas, NV 89146</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information requested</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Winston Parker Owens Drive P.O. Box 4817 Spartanburg, SC 29303</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information requested</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 275.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 275.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Donna Rocker 4001 S. Decatur Blvd. #217 Las Vegas, NV 89103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tommy Rocker's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Kerry Sobocinski 72 Westview Ave. Greenville, SC 29609</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer information requested</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 03/03/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Cynthia Palm 6409 115 12 Avenue N. Chaplin, MN 55316</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Palm Tree</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 03/14/00</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional) **2,725.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Sacco, FMP #1 Wood Street Pittsburgh, PA 15222-1903	Piccolo- Piccola Restaurante	03/14/00	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restauranteur	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code John Byrne 312 Kresson Road Cherry Hill, NJ 08034-3366	Name of Employer La Campagne	Date (month, day, year) 03/14/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code David Craig 801 Washington St. Cape May, NJ 08204-1651	Name of Employer The Washington Inn	Date (month, day, year) 03/14/00	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code Bryan Littleton, Jr. 2415 Arkansas Blvd. Texarkana, AR 71854-2017	Name of Employer Little B's Mexican Food	Date (month, day, year) 03/14/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restauranteur	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)			1,350.00
TOTAL This Period (last page this line number only)			24,235.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANONYMOUS Englewood, CO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	03/03/00	320.00*
Aggregate Year-to-Date		\$ 320.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date		\$ 0	

SUBTOTAL of Receipts This Page (optional) 320.00

TOTAL This Period (last page this line number only) 320.00

4-00173 * Disposal of funds to be shown in May 20 report.

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Ensign for Senate P.O. Box 26568 Las Vegas, NV 89126	Name of Employer refund of 3/14/00 contribution	Date (month, day, year) 03/31/00	Amount of Each Receipt this Period 1,000.00
	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150	Interest Earned	03/31/00	247.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 716.91	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	247.00
TOTAL This Period (last page this line number only)	247.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ryan for Congress P.O. Box 1919 Jamesville, WI 53547	Paul Ryan, U.S. HOUSE 1st WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/08/00	500.00
B. Full Name, Mailing Address and ZIP Code Barrett for Congress 7720 Rogers Avenue Wauwatosa, WI 53213	Thomas M. Barrett, U.S. HOUSE 5th WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/08/00	500.00
C. Full Name, Mailing Address and ZIP Code Coble for Congress Post Office Box 1177 Greensboro, NC 27402	Howard Coble, U.S. HOUSE 6th NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00
D. Full Name, Mailing Address and ZIP Code Bob Ney for Congress P.O. Box 490 St. Clairsville, OH 43950	Bob Ney, U.S. HOUSE 18th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	1,000.00
E. Full Name, Mailing Address and ZIP Code Ken Calvert for Congress PO Box 1414 Riverside, CA 92502	Ken Calvert, U.S. HOUSE 43rd CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00
F. Full Name, Mailing Address and ZIP Code Tom DeLay Congressional Committee 10707 Corporate Drive Suite 130 Stafford, TX 77477	Tom DeLay, U.S. HOUSE 22nd TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	1,000.00
G. Full Name, Mailing Address and ZIP Code Gallegly for Congress P.O. Box 3789 Simi Valley, CA 93083	Elton Gallegly, U.S. HOUSE 23rd CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00
H. Full Name, Mailing Address and ZIP Code Friends of John Boehner 7908 Cincinnati - Dayton Road, #1 West Chester, OH 45089	John A. Boehner, U.S. HOUSE 8th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	1,000.00
I. Full Name, Mailing Address and ZIP Code Re-Elect Brian Bilbray for Congress 12780 High Bluff Drive #270 San Diego, CA 92130	Brian P. Bilbray, U.S. HOUSE 49th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00

SUBTOTAL of Disbursements This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lee Terry for Congress 1107 South 119th St. Omaha, NE 68144	Lee Terry, U.S. HOUSE 2nd NE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00
B. Full Name, Mailing Address and ZIP Code Lazio for Congress 72 East Main St. Suite 4 c/o Piccirillo Rainfurt & Lamont LLP Babylon, NY 11702	Rick A. Lazio, U.S. HOUSE 2nd NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends for Slade Gorton P.O. Box 1627 N. Bend, WA 98045	Slade Gorton, U.S. SENATE WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	2,000.00
D. Full Name, Mailing Address and ZIP Code Condit for Congress Post Office Box 1710 Medeato, CA 95353	Gary Condit, U.S. HOUSE 18th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	500.00
E. Full Name, Mailing Address and ZIP Code PIONEER PAC 499 South Capital Street Suite 2000A Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	3,000.00
F. Full Name, Mailing Address and ZIP Code Friends of Kent Conrad 420 C Street NE Lower Level Washington, DC 20002	Kent Conrad, U.S. SENATE ND Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	2,500.00
G. Full Name, Mailing Address and ZIP Code Friends of Mark Foley Post Office Box 30505 Palm Beach Gardens, FL 33420	Mark Foley, U.S. HOUSE 16th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/10/00	1,000.00
H. Full Name, Mailing Address and ZIP Code John Ensign for US Senate 425 Second Street, NE Washington, DC 20002	John Ensign, U.S. SENATE NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/14/00	1,000.00
I. Full Name, Mailing Address and ZIP Code Roth Senate Committee P.O. Box 105 Wilmington, DE 19899	Voided 2/14/00 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/15/00	-5,000.00

SUBTOTAL of Disbursements This Page (optional)

6,500.00

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 3 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kulshof for Congress Post Office Box 1621 Columbia, MO 65205	Kenny Kulshof, U.S. HOUSE 9th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/17/00	1,000.00
B. Full Name, Mailing Address and ZIP Code Committee to Re-Elect J.D. Hayworth Post Office Box 14273 Scottsdale, AZ 85287	J. D. Hayworth, U.S. HOUSE 6th AZ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/17/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Boyd for Congress Post Office Box 15703 Tallahassee, FL 32317	Allen Boyd, U.S. HOUSE 2nd FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/17/00	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Bud Cramer 223 East Side Square Huntsville, AL 35801	Bud Cramer, U.S. HOUSE 6th AL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/17/00	1,000.00
E. Full Name, Mailing Address and ZIP Code Pickering for Congress Post Office Box 6440 Laurel, MS 39441	Chip Pickering, U.S. HOUSE 3rd MS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/17/00	500.00
F. Full Name, Mailing Address and ZIP Code Mark Nielsen for Congress 2 Stony Hill Road Bethel, CT 06801	Mark Nielsen, U.S. HOUSE 6th CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
G. Full Name, Mailing Address and ZIP Code Chat Edwards for Congress Post Office Box 182 Waco, TX 76703	Chat Edwards, U.S. HOUSE 11th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
H. Full Name, Mailing Address and ZIP Code Cook for Congress Campaign 1800 Beneficial Life Tower Salt Lake City, UT 84111	Merrill Cook, U.S. HOUSE 2nd UT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
I. Full Name, Mailing Address and ZIP Code Tibiani 2000 865 Macon Alley Columbus, OH 43206	Pat Tibiani, U.S. HOUSE 12th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

7,500.00

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 4 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Geithercutt for Congress P.O. Box 1925 Spokane, WA 99201	George Geithercutt, U.S. HOUSE 5th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Hulshof for Congress Post Office Box 1621 Columbia, MO 65206	Kenny Hulshof, U.S. HOUSE 9th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Nathan Deal for Congress Post Office Box 902 Gainesville, GA 30603	Nathan Deal, U.S. HOUSE 9th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Texans for Henry Bonilla 3905 Tattnell Schertz, TX 78154	Henry Bonilla, U.S. HOUSE 23rd TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Chris John for Congress, Inc. Post Office Box 971 Crowley, LA 70527-0971	Chris John, U.S. HOUSE 7th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Wally Herger for Congress P.O. Box 1500 Chico, CA 95927	Wally Herger, U.S. HOUSE 2nd CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Congressman Bart Gordon Cmte. P.O. Box 2008 Memphis, TN 37133	Bart Gordon, U.S. HOUSE 6th TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Marion Berry for Congress Committee P.O. Box 8084 Jonesboro, AR 72403	Marion Berry, U.S. HOUSE 1st AR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Anne Northup for Congress Post Office Box 7313 Louisville, KY 40257	Anne Northup, U.S. HOUSE 3rd KY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

6,600.00

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 6 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Conrad Burns Post Office Box 1532 Billings, MT 58103	Conrad Burns, U.S. SENATE MT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Ken Lucas for Congress Committee 8100 Burlington Pike Suite 334 Florence, KY 41042	Ken Lucas, U.S. HOUSE 4th KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Judy Biggart for Congress P.O. Box 637 Hinsdale, IL 60522	Judy Biggart, U.S. HOUSE 13th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Chambliss for Congress Post Office Box 4084 Macon, GA 31208	Saxby Chambliss, U.S. HOUSE 8th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Bishop for Congress 421 Nw Jersey Ave., S.E. Washington, DC 20003	Sanford D. Bishop, U.S. HOUSE 2nd GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Dave Camp for Congress Post Office Box 423 Midland, MI 48640	Dave Camp, U.S. HOUSE 4th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Hastings for Congress Committee Post Office Box 2926 Pasco, WA 99302	Richard "Doc" Hastings, U.S. HOUSE 4th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Friends of Sam Johnson P.O. Box 880096 Plano, TX 75086	Sam Johnson, U.S. HOUSE 3rd TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Mike Skelton for Congress Committee Post Office Box A 3001 North 291 Highway Harrisonville, MO 64701	Mike Skelton, U.S. HOUSE 4th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

6,500.00

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 6 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Team Emerson 2210 Lakewood Dr Cape Girardeau, MO 63701	Jo Ann Emerson, U.S. HOUSE 8th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Hobson for Congress Committee 2825 North Limestone Springfield, OH 45503	David L. Hobson, U.S. HOUSE 7th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
Friends of Kent Conrad 420 C Street NE Lower Level Washington, DC 20002	Kent Conrad, U.S. SENATE ND Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Mark Baker for Congress Post Office Box 5284 Quincy, IL 62305	Mark Baker, U.S. HOUSE 17th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Ed Shrock for Congress P.O. Box 61480 Virginia Beach, VA 23456	Shrock, U.S. HOUSE 2nd VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Porter for Congress 1111 Maycrest Avenue Suite G Henderson, NV 89014	Porter, U.S. HOUSE 1st NV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
Kuykendall Congressional Committee 1379 Park Western Drive #300 San Pedro, CA 90732	Steve Kuykendall, U.S. HOUSE 36th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/31/00	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 6,000.00

TOTAL This Period (last page this line number only) 39,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Missourians for Matt Blunt PO Box 695 Jefferson City, MO 65102	Blunt, SECRETARY OF STATE MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 500.00

TOTAL This Period (last page this line number only) 500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 4-20-00
<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 and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>Y.C.</i> PREPARER	 4-20-00 DATE PREPARED