

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

HAND DELIVERED

Dec 3 5 35 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
National Restaurant Association PAC

ADDRESS (number and street) Check if different than previously reported
1200 17th Street, NW

CITY, STATE and ZIP CODE
Washington, DC 20036

2. FEC IDENTIFICATION NUMBER
C 0000 3764

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

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

- Monthly Report Due On:
- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on
11/3/98 in the State of _____

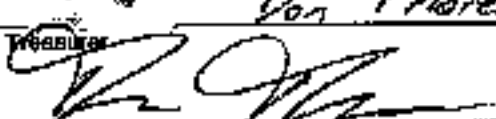
(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>10/15/98</u> through <u>11/23/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>			\$ 302,096.92
(b) Cash on Hand at Beginning of Reporting Period		\$ 97,729.63	
(c) Total Receipts (from Line 19)		\$ 139,707.28	\$ 540,095.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 237,436.91	\$ 842,192.64
7. Total Disbursements (from Line 30)		\$ 107,000.00	\$ 711,755.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))		\$ 130,436.91	\$ 130,436.91
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0.00	

For further information contact:
Federal Election Commission
499 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer: Don Thoren, Asst. Lt. Treasurer

Signature of Treasurer: 

Date: 12/3/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

--	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(revised 9/93)

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

[revised 1/1/81]

NAME OF COMMITTEE National Restaurant Association PAC	REPORT COVERING PERIOD		
	FROM 10/15/98	TO 11/23/98	
	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)	110,075.15	381,922.32	11(a)(i)
ii. Unitemized	28,186.32	104,441.52	11(a)(ii)
iii. Total (add i and ii) >	138,261.47	486,363.84	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	1,000.00	43,000.00	11(c)
d. Total Contributions (add a ii, b and c) >	139,261.47	529,363.84	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	0.00	4,148.80	16
17. Other Federal Receipts (Dividends, Interest, etc.)	445.81	6,584.88	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) >	139,707.28	540,095.62	19
20. Total Federal Receipts (subtract line 18 from line 19) >	139,707.28	540,095.62	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	8,554.78	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	8,554.78	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	34,500.00	630,700.85	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 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	0.00	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	0.00	28(d)
29. Other Disbursements	72,500.00	72,500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	107,000.00	711,755.63	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	107,000.00	711,755.63	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	139,261.47	529,363.84	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	139,261.47	529,363.84	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	8,554.78	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	8,554.78	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **11c**

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Coca Cola Co. Don Partisan Comm. for Post Office Drawer 1734 Good Government Atlanta, GA 30301	Name of Employer	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 1,000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

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

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

PAGE 1 OF 20

FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert K. Arnold 128 Airport Road Concord, NH 03301-5295	Capitol Cash Registers, Inc.	10/15/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 350.00	
John J Hebert P.O. Box 95 Portsmouth, NH 03802-0095	INFORMATION REQUESTED	10/15/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 350.00	
Stephen G. J. Henry 3 Dodler Ct Merrimack, NH 03054-2537	FASFAX	10/15/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 350.00	
James Ahearn 88 Laurel Ave. Bradford, MA 01836-7225	New England Coffee	10/16/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurant supplier	Aggregate Year-to-Date > \$ 350.00	
Patrick S Whitley 183 Greene Street North Andover, MA 01845-3934	Whits Media, Inc.	10/15/98	526.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurant Contractor	Aggregate Year-to-Date > \$ 525.00	
Jon Hildreth 43 Winnicoash Street Laconia, NH 03246-3040	J.A. Hildreth Co.	10/15/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 700.00	
Thomas M Moulton 179 Exeter Road Hampton, NH 03842-1913	DiNero Development	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 875.00	

BUBTOTAL of Receipts This Page (optional) 3,500.00

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 **28**

FOR LINE NUMBER **11 a j**

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K.J. Mullins 321 Lafayette Road Hampton, NH 03842-2108	Kenco Occupation Restaurateur	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 875.00		
B. Full Name, Mailing Address and ZIP Code Fred J Schaake 724 Lafayette Road PO Box 232 Hampton, NH 03842-1248	Hampton Beach Casino Occupation Restaurateur	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 875.00		
C. Full Name, Mailing Address and ZIP Code Joan H Perreault P.O. Box 435 Milton, NH 03851-0435	Miller Brewing Company Occupation Restaurant Contractor	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 875.00		
D. Full Name, Mailing Address and ZIP Code Anthony Scarponi 3370 Lafayette Rd. Portsmouth, NH 03801-6041	Beck's Beer Occupation Restaurateur	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 875.00		
E. Full Name, Mailing Address and ZIP Code William Burns P.O. Box 2405 Woburn, MA 01888-0705	Dale & Bailey, Inc. Occupation restaurant	10/15/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 700.00		
F. Full Name, Mailing Address and ZIP Code Douglas Stockbridge 2 Hearthstone Drive Kennebunk, ME 04043	INFORMATION REQUESTED Occupation Restaurateur	10/15/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code Richard Conlino 122 Birkdale Road Bedford, NH 03110	INFORMATION REQUESTED Occupation Restaurateur	10/15/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		

SUBTOTAL of Receipts This Page (optional)	4,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 28

FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Nicholas 15 Albin Road Bow, NH 03304	INFORMATION REQUESTED	10/15/98	525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 525.00	
Patrick S Whitley 183 Greene Street North Andover, MA 01845-3934	White Media, Inc.	10/15/98	625.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Contractor	Aggregate Year-to-Date > \$ 1,050.00	
Stephen Enfield 241 Ipswich Road Boxford, MA 01921	Micro Systems	10/15/98	525.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 525.00	
Craig Hammond 471 High Street, A-4 Hampton, NH 03842	INFORMATION REQUESTED	10/15/98	810.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 810.00	
William Hefferich 916 Holt Ave. Manchester, NH 03109	Seagrams Americas	10/15/98	825.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Supplier	Aggregate Year-to-Date > \$ 825.00	
Rachel Schimoler 8 Merrill Lane Hampton, NH 03842	INFORMATION REQUESTED	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 875.00	
Rachel Schimoler 8 Merrill Lane Hampton, NH 03842	INFORMATION REQUESTED	10/15/98	875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,750.00	

SUBTOTAL of Receipts This Page (optional) 4,960.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Laurence Knowlton 74 South Road Rye Beach, NH 03871	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 875.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 875.00		
B. Full Name, Mailing Address and ZIP Code Holly Mush Manchester, NH	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 1,312.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,312.00		
C. Full Name, Mailing Address and ZIP Code William W Zechel 175 Harbor Road Rye, NH 03870-2707	Name of Employer Saunders at Rye Harbor Restaurant	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 175.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
D. Full Name, Mailing Address and ZIP Code William Burns P.O. Box 2405 Woburn, MA 01888-0705	Name of Employer Dale & Bailey, Inc.	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 700.00
	Occupation restaurant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,400.00		
E. Full Name, Mailing Address and ZIP Code Brian Johnson P.O. Box 581 Ashland, NH 03217-0581	Name of Employer The Common Man	Date (month, day, year) 10/16/98	Amount of Each Receipt this Period 475.00
	Occupation restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 475.00		
F. Full Name, Mailing Address and ZIP Code Mary Beth Hixon 1 Vitkin Hill Rd. Elliot, ME 03903-1509	Name of Employer American Express	Date (month, day, year) 10/19/98	Amount of Each Receipt this Period 350.00
	Occupation Restaurant Supplier		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
G. Full Name, Mailing Address and ZIP Code Charles Winston 806 Wellasley Drive NW Atlanta, GA 30305-3921	Name of Employer Winston Group	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)	4,387.00
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 28
FOR LINE NUMBER 11 a

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William F. Regas 318 North Gay Street Knoxville, TN 37917	Regas Restaurant Occupation Restaurateur	10/22/98	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 700.00		
Kenneth Moore P.O. Box 2376 Kinston, NC 28502-2376	Andy's Cheesesteaks & Cheeseburgers Occupation restaurateur	10/22/98	3,600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,600.00		
Jack Kroustalis 599 E. Stratford Winston Salem, NC 27103	Foodcraft Equipment Occupation Restaurateur	10/22/98	640.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 640.00		
Michael Kelly 225 E. 6th St. Dayton, OH 45402-2836	Jay's Restaurant Occupation Restaurateur	10/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Glenda Fowler P.O. Box 29502 Raleigh, NC 27626-0502	Golden Corral Corporation Occupation restaurateur	10/22/98	1,400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,400.00		
William R. Lackey 1523 Newtowne Plaza Statesville, NC 28677	Ray Lackey Enterprises Occupation Restaurateur	10/22/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Patrick L. O'Malley 155 North Michigan Avenue Suite 719 Chicago, IL 60601-7611	Doral Plaza Occupation Restaurateur	10/22/98	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

6,590.00

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 6 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Julie Flik ,FMP 3 International Drive Rye Brook, NY 10573-1058	Name of Employer FLIK International Corporation Occupation Executive	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,500.00			
B. Full Name, Mailing Address and ZIP Code Ruben Villavicencio ,FMP 480 Apollo Street Suite A Brea, CA 92821	Name of Employer R & M Food Services, Inc. Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code Arline T Harman 199 First Street, Suite 212 Los Altos, CA 94022-2708	Name of Employer Harman Management Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 2,200.00			
D. Full Name, Mailing Address and ZIP Code Lynn Hobgood 636 North Churchton Street Hillsborough, NC 27278	Name of Employer Hobgood's BBQ Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 400.00			
E. Full Name, Mailing Address and ZIP Code Michael Glover P.O. Box 7238 Wilson, NC 27896-7238	Name of Employer Angus Barn Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 400.00			
F. Full Name, Mailing Address and ZIP Code Charles Erwin P.O. Box 10386 Greensboro, NC 27404-0386	Name of Employer Harn's Restaurants Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 800.00			
G. Full Name, Mailing Address and ZIP Code Tommy L. Haddock 901 Jones Franklin Rd. Raleigh, NC 27606-3374	Name of Employer Bojangles/Tri-Arc Foods, Inc. Occupation Restaurateur	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 400.00			

SUBTOTAL of Receipts This Page (optional) 4,700.00

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 28
FOR LINE NUMBER 11 of 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Gary T. Allred P.O. Box 25048 Winston Salem, NC 27114-5048</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer K & W Cafeterias, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Kenneth Moore P.O. Box 2375 Kinston, NC 28502-2375</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Andy's Cheesesteaks & Cheeseburgers</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 4,000.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Steve Thanhauser P.O. Box 6357 Raleigh, NC 27628-6357</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Angus Barn</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Douglas T Pearce 101 Northway Court Raleigh, NC 27615-4817</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Chain Market</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>E. Full Name, Mailing Address and ZIP Code William L. Hyde Jr. 3321 Hesser Ave. Metairie, LA 70002-4726</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ruth's Chris Steak House</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code James M. Wordsworth, FMP 8130 Watson Street McLean, VA 22102-4405</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer J.R's Goodtimes, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 3,178.10</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code H.M. Poythress P.O. Box 7238 Wilson, NC 27895-7238</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer GGP COMPANY INC</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 400.00</p>

SUBTOTAL of Receipts This Page (optional)

2,950.00

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 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Thomas Moore 3008 Grand Ave. Coconut Grove, FL 33133-5102	Name of Employer Sanor Frog's	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Wayne F. Abele 2156 S. Sterling St. Morganton, NC 28655-4049	Name of Employer Shoney's of Morganton	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Donna Loughry 510 Front Street Beaufort, NC 28516-2208	Name of Employer Loughry's Landing	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Iris Lennon 748 NC 25 & 50 Warsaw, NC 28398 9527	Name of Employer The Country Store	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Robert Luddy 112 Wheaton Drive Youngsville, NC 27596-9414	Name of Employer Captive-Aira Systems	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 2,000.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 2,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code William J Maynard 506 N. Harrington Street Raleigh, NC 27603-1396	Name of Employer Century Data Systems	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 450.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Thomas C Blechler 12555 Dorchester Trail Apple Valley, MN 55124-8634	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Aggregate Year-to-Date $\$$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	4,450.00
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 28
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 eliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marty Mihajlov 3001 Hennapin Avenue Suite 301A Minneapolis, MN 55408-2647	Parasole Restaurant Holdings, Inc.	10/22/98	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 600.00	
Pete Mihajlov 3001 Hennapin Avenue Suite 301A Minneapolis, MN 55400	Parasole Restaurant Holdings, Inc.	10/22/98	2,425.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 4,425.00	
William T. Wengler 1303 Eleanor Avenue Saint Paul, MN 55116-1709	Restaurants No Limit, Inc.	10/22/98	900.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurateur	Aggregate Year-to-Date > \$ 900.00	
Ken Schelper 3601 Wooddale Ave. S. Minneapolis, MN 55416-5191	Davanni's Inc.	10/22/98	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 225.00	
Rick Casper 886 Smith Avenue South West Saint Paul, MN 55118-1127	Cherokee Sirloin Room	10/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Wayne M. Bunting, FMP 3402 S. Church Street Burlington, NC 27215-9151	Cafe Concepts, Inc.	10/22/98	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	
Eileen Bennett 118 East Ostand Street Baltimore, MD 21230	American Express	10/22/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 700.00	

SUBTOTAL of Receipts This Page (optional) 6,725.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **10** OF **28**
FOR LINE NUMBER **11 a i**

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Dietz 3801 Kennett Pike Wilmington, DE 19807-2321	Brandywine Brewing Co.	10/22/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur	Aggregate Year-to-Date > \$ 700.00	
Steve Torpey 2038 Fouk Rd Wilmington, DE 19810-3885	Stanley's Tavern & Restaurant	10/22/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur	Aggregate Year-to-Date > \$ 1,300.00	
Richard W. Kubach Jr., FMP 1501 Snyder Avenue Philadelphia, PA 19145	Melrose Diner, Inc.	10/22/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 3,700.00	
Robert Martinelli P.O. Box 2800 Wilmington, DE 19806-0800	Delaware Today	10/22/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 350.00	
John Delcampo 2006 Rodman Road Wilmington, DE 19805	Delcampo Bakery	10/22/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 350.00	
Gerald Gallucio 1709 Lovering Ave. Wilmington, DE 19806-2196	Gallucio's Restaurant	10/22/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur	Aggregate Year-to-Date > \$ 350.00	
Pat Monlle 104 West Shetland Court Newark, DE 19711	Alliant FoodService, Inc.	10/22/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 350.00	

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Xavier Tehido, FMP 2020 Naaman's Road Wilmington, DE 19810-2655	Harry's Savoy Grill Occupation: Restaurateur	10/22/98	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,350.00		
B. Full Name, Mailing Address and ZIP Code Robert Ashby 273 Polly Drummond Road Newark, DE 19711-4833	Ashby Management Co. Occupation: Restaurateur	10/22/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Jonathan Gersh 16740 Rogers Road Eden Prairie, MN 55347	U.S. Bank Occupation: Restaurant Marketing	10/22/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
D. Full Name, Mailing Address and ZIP Code William Stengler 857 Grand Ave. St. Paul, MN 55105	Billy's on Grand Occupation: Restaurateur	10/22/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code G. "Jim" Hasslocher 8520 Crownhill Blvd. San Antonio, TX 78209-1199	Frontier Enterprises Occupation: Restaurateur	10/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
F. Full Name, Mailing Address and ZIP Code Edward Starro 5089 Green Grove Lane Roseville, CA 95747	INFORMATION REQUESTED Occupation: Restaurateur	10/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code April Dennis Route 1 Box 240 State Road 1432 Hookerton, NC 28538	Andy's Cheesesteaks & Cheeseburgers Occupation: Restaurateur	10/22/98	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		

SUBTOTAL of Receipts This Page (optional) 2,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Barry Sandman 8500 Old Station Drive Raleigh, NC 27615	Name of Employer Vinnie's Steakhouse & Tavern	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Tim Greene 2504 Westham Place Raleigh, NC 27604	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Sharon Szafranski 7700 Heather Ridge Court Irving, TX 75063	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Gerald Douglas 120 Edgewater Drive Broadway, NC 27505	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Frank M. Freeman 712 Leewood Dr. Greensboro, NC 27410-4225	Name of Employer Freeway Foods, Inc.	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code George Richards 9824 Koupela Drive Raleigh, NC 27614	Name of Employer Mr. Dunderbak	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Brian Walker 1011 Glenangus Drive Bel Air, MD 21015	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	2,800.00
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 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Hays 3001 Hennepin Ave Ste 301A Minneapolis, MN 55408-2847	Parasole Restaurant Holdings	10/22/98	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	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Ellis 657 Bridle Ridge Road Eagan, MN 55121	INFORMATION REQUESTED	10/22/98	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	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michelle Armstrong 1117 Marquette Ave. #908 Minneapolis, MN 55403	Buca	10/22/98	210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 210.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Motschenbacher 8743 Valley View Place Chanhassen, MN 55317	Northwestern	10/22/98	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 225.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James G Palm 2727 Nicollet Ave. S. Minneapolis, MN 55408-1664	Palm Brothers	10/22/98	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 225.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Ruff 46 Fox Ridge Road Fletcher, NC 28732	The Biltmore Company	10/22/98	460.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 460.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Douglas 120 Edgewater Drive Broadway, NC 27605	INFORMATION REQUESTED	10/22/98	700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 1,100.00	

SUBTOTAL of Receipts This Page (optional) 2,420.00

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 14 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Libby Eaton P.O. Box 1040 Atlantic Beach, NC 28512-1573</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bistro-By-The-Sea</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,100.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 1,100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Libby Eaton P.O. Box 1040 Atlantic Beach, NC 28512-1573</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bistro-By-The-Sea</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Van Eure, FMP P.O. Box 6357 Raleigh, NC 27628</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Angus Barn Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 6,000.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 43.67</p>
<p>D. Full Name, Mailing Address and ZIP Code Steve Thanhauser P.O. Box 6357 Raleigh, NC 27628-6367</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Angus Barn</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,375.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 1,375.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Bill Ryan 3703 Harry Cooper Place Billings, MT 59108-1008</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Applebee's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/22/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Denise Marie Fugo, FMP 1400 West 10th Street Cleveland, OH 44113-1215</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sammy's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,242.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 92.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Craig Huse 127 South Illinois Street Indianapolis, IN 46226-1079</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer St. Elmo's Steak House</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional)

4,510.57

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 28
FOR LINE NUMBER 1181

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Gerard, FMP 504 North Street New Harmony, IN 47631-0581	Red Geranium Enterprises	10/23/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig Huse 127 South Illinois Street Indianapolis, IN 46225-1079	St. Elmo's Steak House	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen M. Huse P.O. Box 98 2620 North Walnut Street Bloomington, IN 47402	The Huse Food Group, Inc.	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 1,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lennie Dare 2372 Windingbrook Circle Bloomington, IN 47401	One World Enterprises	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	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
John Livengood 116 W. Washington Street Suite 1165 South Indianapolis, IN 46204	Restaurant & Hospitality Assn. of Indiana	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen M. Huse P.O. Box 98 2620 North Walnut Street Bloomington, IN 47402	The Huse Food Group, Inc.	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell Adama 2405 U.S. 30 E. Valparaiso, IN 46383	Strongbow Inn	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date: \$ 250.00	

SUBTOTAL of Receipts This Page (optional) 3,250.00

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 28
FOR LINE NUMBER 11 a l

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Jeffrey A Koastar 10810 Winery Road Wadesville, IN 47638-9540</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) 10/23/98</p>	<p>Amount of Each Receipt This Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Douglas A Padgett 1722 Olde Mill Court Newburgh, IN 47630-8051</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Gilmore Broadcast</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt This Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Robert Ossenberg 5503 Timberlake Court Evansville, IN 47710-4134</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Evansville Catering</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Gary McCannment 6799 Miller Lane Newburgh, IN 47630-9573</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Mac Group Agency</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Michael Howanski 117 Veterans Sq Media, PA 19063-3290</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Town House Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Bob Newswanger, Jr. 2248 Lincoln Highway East Lancaster, PA 17602-1111</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Castle Coffee Shop</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 750.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 750.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Charles Tampla 11205 Blackhorse Court Potomac, MD 20854</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Close Up Foundation</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 220.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 220.00</p>

SUBTOTAL of Receipts This Page (optional)

2,470.00

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 17 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Felberbaum 19 Woodmere Road North Brunswick, NJ 08902	S & G Paper Corp.	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 250.00	
James Conboy Philadelphia, PA	George L. Wallis Meat Co.	10/23/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 2,600.00	
Frank Stea 1419 E. Moyamensing Ave. Philadelphia, PA 19147	Stea Brothers, Inc.	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Richard Gravelle IN	INFORMATION REQUESTED	10/23/98	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	
J.B. Simmons 6000 Woodbridge Tr. Newburgh, IN 47630-8031	Shyler's Bar B.Q.	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
Pete Mihajlov 3001 Hennepin Avenue Suite 301A Minneapolis, MN 55400	Parasole Restaurant Holdings, Inc.	10/23/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 4,525.00	
Kennit Watts 1509 10th PI NE Austin, MN 55912-4007	Watts Cookin'	10/23/98	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Managing Partner	Aggregate Year-to-Date > \$ 220.00	

SUBTOTAL of Receipts This Page (optional) 4,470.00

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 18 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Michael Herstine 15009 Rushmore Ct MN 55308</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 340.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 140.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Karen Schultz 512 John St. Minneapolis, MN 55343</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Parasole</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 220.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 20.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Luis Larrea 15041 Woodhill Trail Eden Prairie, MN 55346-2557</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alliant Foodservice</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 875.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 875.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Luis Larrea 15041 Woodhill Trail Eden Prairie, MN 55346-2557</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alliant Foodservice</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,276.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>E. Full Name, Mailing Address and ZIP Code DJ Colyard 1250 Weisk Dr. Woodbury, MN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Keys Cafe</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 260.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 260.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Steve Davidson 2804 W. 55th Street Minneapolis, MN 55410-2426</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer D'Amico & Partners</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,935.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 1,935.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Tracy Schulte 426 Portland Ave. Minneapolis, MN 55488</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Star Tribune</p> <p>Occupation Restaurant Consultant</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 400.00</p>

SUBTOTAL of Receipts This Page (optional) **4,030.00**

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 **19** OF **28**
FOR LINE NUMBER **11 a i**

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Patrick Kill 1610 Broadway St. NW Minneapolis, MN 55417	Name of Employer Hobarts	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00	
	Occupation Restaurant Supply	Aggregate Year-to-Date > \$ 800.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	B. Full Name, Mailing Address and ZIP Code Derm Rowland MN	Name of Employer Timberlades Steakhouse	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 800.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	C. Full Name, Mailing Address and ZIP Code Derm Rowland MN	Name of Employer Timberlades Steakhouse	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	D. Full Name, Mailing Address and ZIP Code Mark Osendorf 1700 East Co Rd. White Bear Lake, MN 55110	Name of Employer NSP	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 800.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	E. Full Name, Mailing Address and ZIP Code Mike Tewey 755 Prairie Center Drive Eden Prairie, MN 55344-5383	Name of Employer Flagship/Stars	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 805.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	F. Full Name, Mailing Address and ZIP Code Dennis Dahl 31303 64th Ave Path Cannon Falls, MN 55009	Name of Employer Country Kitchen	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 800.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 800.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	G. Full Name, Mailing Address and ZIP Code Doran Jensen 4021 Vernon Avenue South Minneapolis, MN 55416-2831	Name of Employer Timberlodge Steakhouse	Date (month, day, year) 10/23/98	Amount of Each Receipt this Period 425.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 425.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SUBTOTAL of Receipts This Page (optional)			5,225.00
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 20 OF 28
FOR LINE NUMBER 11 B I

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Robert Holt 4928 Islandview Drive Mound, MN 55364-9393</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Juke Box Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 775.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 700.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Tom Jared 4580 Lake Park Drive Eagan, MN 55122</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Reinhardt Foods</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 800.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 800.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Joan Iacona 7550 France Ave S Ste 180 Minneapolis, MN 55435-4799</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sales Consultants</p> <p>Occupation Restaurant Consultant</p> <p>Aggregate Year-to-Date > \$ 800.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 800.00</p>
<p>D. Full Name, Mailing Address and ZIP Code John McMahon 4857 Canterbury Mound, MN 55364-9314</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Price Waterhouse</p> <p>Occupation Restaurant Consultant</p> <p>Aggregate Year-to-Date > \$ 840.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 800.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Rick Weidner 5656 Lincoln Drive Edna, MN 55436</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Gastof zur Gemutlichkeit</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 800.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 800.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Arnold Hewas 871 Jefferson Avenue Saint Paul, MN 55102-2801</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Minnesota Restaurant, Hotel & Resort Assn.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Bill Morrissey 350 Market Street Saint Paul, MN 55102-1484</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer St. Paul Hotel</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 800.00</p>	<p>Date (month, day, year) 10/23/98</p>	<p>Amount of Each Receipt this Period 800.00</p>

SUBTOTAL of Receipts This Page (optional)

5,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 21 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corbin Kristufek 425 Portland Ave Minneapolis, MN 55488	Star Tribune Occupation: Restaurant Consultant	10/23/98	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
B. Full Name, Mailing Address and ZIP Code J.B. Simmons 6000 Woodbridge Tr. Newburgh, IN 47630-8031	Snyler's Bar B.Q. Occupation: restaurateur	10/23/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
C. Full Name, Mailing Address and ZIP Code Gypsy Lillian P.O. Box 2060 1550 Buck Jones Rd. Cary, NC 27512	Gypsy's Shiny Diner, Inc. Occupation: Restaurateur	10/23/98	1,100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,100.00		
D. Full Name, Mailing Address and ZIP Code Jim Allen 8543 Page Avenue St. Louis, MO 63114-0899	Allen Foods Occupation: Restaurateur	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Jeffrey A Koester 10810 Winery Road Wadesville, IN 47638-8540	INFORMATION REQUESTED Occupation: Restaurateur	10/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Julian Nabozny 10230 N 32nd St Phoenix, AZ 85028-3823	MCDONALD'S RESTAURANTS Occupation: restaurateur	10/25/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00		
G. Full Name, Mailing Address and ZIP Code Ollie G. Wilkes P.O. Box 6 Meridian, MS 39302-0006	Hotel & Restaurant Supply Occupation: Restaurant Supplier	10/26/98	333.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 333.00		

SUBTOTAL of Receipts This Page (optional) 2,883.00

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 22 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry R Greene P.O. Box 6 Meridian, MS 39302-0006	Hotel & Restaurant Services	10/26/98	336.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurant Supplier	Aggregate Year-to-Date > \$ 335.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bill Wolfe 4251 Industrial Drive Jackson, MS 39209-2748	Hotel & Restaurant Supply	10/26/98	333.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurant Supplier	Aggregate Year-to-Date > \$ 333.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nick Apostia 1501 Lakeland Drive Jackson, MS 39216-4834	Nick's	10/26/98	1,250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 1,400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig S. Miller, FMP 100 Charles Place Road West Roxbury, MA 02132-4902	Uno Restaurant Corporation	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: restaurateur	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
Joyce Hulm East Derry, NH 03041	Information Requested	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Dagen P.O. Box 10277 Kansas City, MO 64171	Missouri Restaurant Association	10/26/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Vice President	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Thanhauser P.O. Box 6367 Raleigh, NC 27628-6357	The Angus Barn	10/26/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 2,475.00	

SUBTOTAL of Receipts This Page (optional)	2,618.00
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 23 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Ardith Daffinson 400 Lang Drive LaCrosse, WI 54603	Name of Employer Ardie's Restaurant	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 200.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Robert St. John P.O. Box 17318 Hattiesburg, MS 39404-7318	Name of Employer New South Restaurant Group	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 750.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 850.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Peter Marks 28 Washington Avenue Chelsea, MA 02152-1724	Name of Employer Paul W. Marks Company	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 1,250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Joseph A. Milano, Jr. 41 Union Street Boston, MA 02108-2494	Name of Employer Union Oyster House	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Christopher Delsanto 8 Abbott Park Place Providence, RI 02903	Name of Employer Johnson & Wales Univ.	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 3,750.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 3,750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Paul Fogarty 500 Stanlford Boston, MA 02114	Name of Employer Miller Brewing Company	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mark Sheehy 980 Turnpike Street Canton, MA 02021	Name of Employer Uno Restaurant Group	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 1,250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 7,950.00

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 **24** OF **28**
FOR LINE NUMBER
11 a

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Gene Robinson 945 Concord Street Framingham, MA 01701</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Schleffelin & Somerset</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/28/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Robert Penna 50 Innerbelt Rd. Somerville, MA 02143</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Arrow Paper Co.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/28/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code JoAnn Welner PO Box F Kimball Hall Worcester, MA 01610</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer American Express</p> <p>Occupation Restaurant Supplier</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/28/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Bill Latham, FMP 805 South Wheelley Suite 155 Ridgeland, MS 39157-5003</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Amerigo Restaurant Corp.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Paul P. Smith 104 Hwy 72 East Corinth, MS 38834</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Russell's Beefhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Myrd H Bean 574 Greenbriar Columbus, MS 39701-1455</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Harvey's Rest.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Joseph Piantedosi 240 Commercial St. Malden, MA 02148</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Plantedosi Baking Co.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 375.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 375.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2,825.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 25 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Dick Hartmann 55 Messina Dr. Bralntree, MA 02184-8783</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Suburban Wastewater</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code John McGree 3 North Square Boston, MA 02113</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Mamma Maria</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/02/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Craig Nickoloff 26442 Houston Trail Laguna Hills, CA 92653-6334</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Claim Jumper Restaurants</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 11/04/98</p>	<p>Amount of Each Receipt this Period 6,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code James E Schnellhorst 1600 S. Lindbergh Blvd. Saint Louis, MO 63131-3599</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Schnellhorst Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 11/04/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Ashiq A Delawalla 5300 Oakbrook Pkwy. #200 Norcross, GA 30093-2270</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Restaurant Management</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/06/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Bill C. Rowe Jr. 1320 E. Kallogg Drive Wichita, KS 67211</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Wille C's Cafe</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/10/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Charles Dufina P.O. Box 495 Mackinac Island, MI 49757</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) 11/10/98</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) **7,250.00**

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 26 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Joseph Plantadosi 240 Commercial St. Malden, MA 02148</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Plantadosi Baking Co.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 625.00</p>	<p>Date (month, day, year) 11/10/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Larry M Brown East 2011 South Ridga Drive Spokane, WA 99223-8430</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Onions, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/10/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Jeff Good 244 Highland Village Jackson, MS 39211-5931</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bravo! Italian Restaurant & Bar</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 11/10/98</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code William R Roberts 1220 Jefferson Avenue New Orleans, LA 70115-3014</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Roberts Gumbo Shop</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 11/18/98</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Kevin Barrett 29 Stoney Brook Road Sherborn, MA 01770-1417</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Deloitte & Touche</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/18/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Richard P McCoy One Industrial Drive Windham, NH 03087-2021</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer INFORMATION REQUESTED</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/18/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Stuart Thompson P.O. Box 155 North Andover, MA 01845-0155</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Thompson Consulting</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/18/98</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional) **1,800.00**

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 27 OF 28
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Ernie Tremblay, Jr. 12 Sylvan St. Peabody, MA 01960-1607</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sylvan Street Grille</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,250.00</p>	<p>Date (month, day, year) 11/18/98</p>	<p>Amount of Each Receipt this Period 1,250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Arnold Isken 1811 Concord Pike Wilmington, DE 19803-2901</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Howard Johnson's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/23/98</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Steve Wabb 1931 Wake Forest Rd Raleigh, NC 27608-2731</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SNOOPY'S I, INC.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 11/23/98</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Dick Gaven 150 N Michigan Ave Ste 200 Chicago, IL 60601-7524</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 210.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 20.00 (\$10.00 Semimonth)</p>
<p>E. Full Name, Mailing Address and ZIP Code Steve Caldeira 250 S. Wacker Drive Chicago, IL 60606</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association Educational Found.</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 846.34</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 76.94 (\$38.47 Semimonth)</p>
<p>F. Full Name, Mailing Address and ZIP Code Elaine Graham 1200 17th Street, NW Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 2,115.52</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 192.32 (\$96.16 Semimonth)</p>
<p>G. Full Name, Mailing Address and ZIP Code Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181-5400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 423.28</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 38.48 (\$19.24 Semimonth)</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2,127.74</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 28 OF 28
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Denise Roach 1701 Massachusetts Ave., NW #704 Washington, DC 20036-2136</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 25.00 (\$12.50 Semimonth)</p>
<p>B. Full Name, Mailing Address and ZIP Code Eric Ruff 1200 17th Street Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 382.46</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 58.84 (\$29.42 Semimonth)</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>83.84</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>110,075.15</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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 committees.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Eamed Occupation Aggregate Year-to-Date > \$ 6,684.88	Date (month, day, year) 10/31/98	Amount of Each Receipt this Period 445.81
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	445.81
TOTAL This Period (last page this line number only)	445.81

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Connie Morella for Congress Committee P.O. Box 5945 Bethesda, MD 20824	Constance A. Morella, U.S. HOUSE 8th MD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/20/98	600.00
B. Full Name, Mailing Address and ZIP Code Nethercutt for Congress P.O. Box 1925 Spokane, WA 99201	George Nethercutt, U.S. HOUSE 5th WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/20/98	1,000.00
C. Full Name, Mailing Address and ZIP Code Lewis for Congress Committee Post Office Box 247 Redlands, CA 92373	Jerry Lewis, U.S. HOUSE 40th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/20/98	500.00
D. Full Name, Mailing Address and ZIP Code Rod Frelinghuysen for Congress 1711 Route 46 Parsippany, NJ 07054	Rodney Frelinghuysen, U.S. HOUSE 11th NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	600.00
E. Full Name, Mailing Address and ZIP Code Kay Granger for Congress 901 Houston Street Suite 105-C Fort Worth, TX 76102	Kay Granger, U.S. HOUSE 14th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	1,000.00
F. Full Name, Mailing Address and ZIP Code Don Sherwood for Congress Committee 10 Bridgeover Tunkhannock, PA 18657	Don Sherwood, U.S. HOUSE 10th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,500.00
G. Full Name, Mailing Address and ZIP Code Nussle for Congress PO Box 324 Manchester, IA 52057	Jim Nussle, U.S. HOUSE 2nd IA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,500.00
H. Full Name, Mailing Address and ZIP Code Larry McKibben to Congress Post Office Box 308 Marshalltown, IA 50158	Larry McKibben, U.S. HOUSE 3rd IA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,500.00
I. Full Name, Mailing Address and ZIP Code Andrews for Congress Committee Post Office Box 2314 Washington, DC 20013	Robert E. Andrews, U.S. HOUSE 1st NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,000.00

SUBTOTAL of Disbursements This Page (optional)

13,000.00

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 3
FOR LINE NUMBER 23

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Snowbarger for Congress 110 South Cherry Suite 103 Olate, KS 66061	Vincent Snowbarger, U.S. HOUSE 3rd KS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,600.00
B. Full Name, Mailing Address and ZIP Code Rick White for Congress Post Office Box 8156 Kirkland, WA 98034	Rick White, U.S. HOUSE 1st WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,500.00
C. 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) 1998	10/23/98	2,000.00
D. Full Name, Mailing Address and ZIP Code Abercrombie Back to Congress 1357 Kapiolani Blvd. Suite 1005 Honolulu, HI 96814	Neil Abercrombie, U.S. HOUSE 1st HI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,000.00
E. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Nydia Velazquez 148 North Carolina Ave., SE Washington, DC 20003	Nydia M. Velazquez, U.S. HOUSE 12th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	500.00
F. Full Name, Mailing Address and ZIP Code SAM FARR FOR CONGRESS PO BOX 7548 CARMEL, CA 93920	Sam Farr, U.S. HOUSE 17th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	1,000.00
G. Full Name, Mailing Address and ZIP Code 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) 1998	10/23/98	2,500.00
H. Full Name, Mailing Address and ZIP Code Gallegly for Congress P.O. Box 3788 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) 1998	10/23/98	1,000.00
I. Full Name, Mailing Address and ZIP Code Benton for Congress P.O. Box 5076 Vancouver, WA 98668	Don Benton, U.S. HOUSE 3rd WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,500.00

SUBTOTAL of Disbursements This Page (optional)

16,600.00

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 3 OF 3
FOR LINE NUMBER 23

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Ferguson for Congress 340 North Ave. E Suite 6 Cranford, NJ 07016	Mike Ferguson, U.S. HOUSE 6th NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Campaign America Inc. 6263 N. Scottsdale Road Suite 292 Scottsdale, AZ 85250	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/23/98	2,000.00
C. Full Name, Mailing Address and ZIP Code Wyden for Senate P.O. Box 3498 Portland, OR 97208	Purpose of Disbursement Ron Wyden, U.S. SENATE OR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/28/98	2,000.00
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)	5,000.00
TOTAL This Period (last page this line number only)	34,600.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Committee Trust 320 First Street, SE Washington, DC 20003	Non-Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/22/98	72,500.00
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)	72,500.00
TOTAL This Period (last page this line number only)	72,500.00

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 <i>12/3/98</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 _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>DC</i> PREPARER	<i>12/3/98</i> DATE PREPARED