

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC		2. FEC IDENTIFICATION NUMBER C 0000 3784
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Washington, DC 20036		

MAR 19 1 34 PM '99

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 02/01/99 through 02/28/99		
6. (a) Cash on Hand January 1, 19 99		\$ 164,443.63
(b) Cash on Hand at Beginning of Reporting Period	\$ 194,429.12	
(c) Total Receipts (from Line 19)	\$ 4,287.01	\$ 39,321.59
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 198,696.13	\$ 203,765.22
7. Total Disbursements (from Line 30)	\$ 52,716.93	\$ 57,786.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 145,979.20	\$ 145,979.20
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 990 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer
Elaine Z. Graham

Signature of Treasurer

Elaine Z. Graham

Date

3-19-99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM: 02/01/99 TO: 02/28/99	
		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)	2,965.00	34,269.79	11(a)(1)
ii. Unitemized	977.92	4,498.66	11(a)(2)
iii. Total (add i and ii) >	3,932.92	38,768.34	11(a)(3)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a ii, b and c) >	3,932.92	38,768.34	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, Forfeits, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	334.09	553.25	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) >	4,267.01	39,321.59	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4,267.01	39,321.59	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	116.93	193.64	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	116.93	193.64	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	37,500.00	42,592.38	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	15,000.00	15,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	52,716.93	57,786.02	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	52,716.93	57,786.02	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3,932.92	38,768.34	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,932.92	38,768.34	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	116.93	193.64	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	116.93	193.64	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
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 Gale Ogawa 3660 Waiialae Ave. Honolulu, HI 96816-3257	Name of Employer 3660 on the Rise	Date (month, day, year) 02/04/99	Amount of Each Receipt this Period 425.00
	Occupation <i>Restaurateur</i>	Aggregate Year-to-Date > \$ 425.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Carol Uyemura 94-245 Illula Place Mililani, HI 96789	Name of Employer <i>Hawaiian Restaurant Association</i>	Date (month, day, year) 02/04/99	Amount of Each Receipt this Period 330.00
	Occupation <i>Restaurant Exec.</i>	Aggregate Year-to-Date > \$ 385.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Julie Flik, FMP 3 International Drive Rye Brook, NY 10573-1058	Name of Employer Compass Group/North American Division	Date (month, day, year) 02/08/99	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code John R. Farquharson, FMP 8 Belmont Boulevard Sewell, NJ 08080	Name of Employer International Food Safety Council	Date (month, day, year) 02/08/99	Amount of Each Receipt this Period 1,000.00
	Occupation <i>Association Executive</i>	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Elaine Graham 1200 17th Street, NW Washington, DC 20036	Name of Employer National Restaurant Association	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 200.00 (\$96.16 Semimonthly)
	Occupation Association Executive	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **2,955.00**

TOTAL This Period (last page this line number only) **2,955.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-8150	Name of Employer Interest Earned	Date (month, day, year) 02/28/99	Amount of Each Receipt this Period 334.09
	Occupation _____	Aggregate Year-to-Date > \$ 553.25	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
B. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
C. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
D. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
E. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
F. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
G. Full Name, Mailing Address and ZIP Code _____	Name of Employer _____	Date (month, day, year) _____	Amount of Each Receipt this Period _____
	Occupation _____	Aggregate Year-to-Date > \$ _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			

SUBTOTAL of Receipts This Page (optional)	334.09
TOTAL This Period (last page this line number only)	334.09

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
American Renewal PAC P.O. Box 221104 Chantilly, VA 20153	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	02/02/99	1,000.00
B. Full Name, Mailing Address and ZIP Code Tom DeLay Congressional Committee 10707 Corporate Drive Suite 130 Stafford, TX 77477	Purpose of Disbursement Tom DeLay, U.S. HOUSE 22nd TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/02/99	1,500.00
C. Full Name, Mailing Address and ZIP Code Friends of Dick Lugar Post Office Box 56952 Indianapolis, IN 46205	Purpose of Disbursement Richard G. Lugar, U.S. SENATE IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	5,000.00
D. Full Name, Mailing Address and ZIP Code ASHCROFT FOR SENATE MO-R Steve Gordon & Assoc. 507 Capitol Court, NE #100 Washington, DC 20002	Purpose of Disbursement John Ashcroft, U.S. SENATE MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	5,000.00
E. Full Name, Mailing Address and ZIP Code Friends of Roy Blunt 1736 East Sunshine Street, #817 Springfield, MO 65804	Purpose of Disbursement Roy Blunt, U.S. HOUSE 7th MO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
F. Full Name, Mailing Address and ZIP Code Ed Bryant for Congress Post Office Box 1961 Cordova, TN 38088	Purpose of Disbursement Ed Bryant, U.S. HOUSE 7th TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Conrad Burns Post Office Box 1532 Billings, MT 59103	Purpose of Disbursement Conrad Burns, U.S. SENATE MT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
H. Full Name, Mailing Address and ZIP Code Dreier For Congress Post Office Box 1110 Covina, CA 91722	Purpose of Disbursement David Dreier, U.S. HOUSE 28th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
I. Full Name, Mailing Address and ZIP Code Friends of Mark Foley Post Office Box 30505 Palm Beach Gardens, FL 33420	Purpose of Disbursement Mark Foley, U.S. HOUSE 15th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00

SUBTOTAL of Disbursements This Page (optional)	17,000.00
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

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NAME OF COMMITTEE (in FUB)
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
Frst 2000 4205 Hillsboro Road Suite 306 Nashville, TN 37215	Bill Frst, U.S. SENATE TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
B. Full Name, Mailing Address and ZIP Code MARTIN FROST CAMPAIGN CMTE. TX-25-D P.O. Box 4219 Dallas, TX 75208	Martin Frost, U.S. HOUSE 24th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
C. Full Name, Mailing Address and ZIP Code Upton for All of Us Post Office Box 490 St. Joe, MI 49085	Fred Upton, U.S. HOUSE 6th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	1,000.00
D. Full Name, Mailing Address and ZIP Code Georgians for Isakson 5085 Roswell Rd Atlanta, GA 30309	Johnny Isakson, U.S. HOUSE 6th GA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Special Election	02/08/99	6,000.00
E. Full Name, Mailing Address and ZIP Code Mary Bono Campaign Committee 36-810 Palm Court Rancho Mirage, CA 92270	Mary Bono, U.S. HOUSE 44th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/08/99	2,500.00
F. Full Name, Mailing Address and ZIP Code Republican Majority Fund 1155 21st Street, NW Suite 300 Washington, DC 20036	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	02/08/99	1,500.00
G. Full Name, Mailing Address and ZIP Code Illinois Restaurant Association 200 North LaSalle Street Suite 880 Chicago, IL 60601	In-Kind Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	1,100.00 (In-Kind)
H. Full Name, Mailing Address and ZIP Code DAVIS FOR CONGRESS/FRIENDS OF DANNY K 5262 W POLK ST CHICAGO, IL 60644	In-Kind Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	1,100.00 (Memo In-Kind)
I. Full Name, Mailing Address and ZIP Code Charles A. Gonzalez Congressional Committee 134 Schreiner Place San Antonio, TX 78212	Charles Gonzalez, U.S. HOUSE 20th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/12/99	1,000.00

SUBTOTAL of Disbursements This Page (optional)

14,100.00

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

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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
Coble for Congress Post Office Box 1177 Greensboro, NC 27402	Howard Coble, U.S. HOUSE 6th NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	1,000.00
Chambliss for Congress Post Office Box 4084 Macon, GA 31208	Saxby Chambliss, U.S. HOUSE 6th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	500.00
ABRAHAM FOR SENATE MI-S-R P.O. Box 1957 Royal Oaks, MI 48068	Spencer Abraham, U.S. SENATE MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	1,000.00
Volunteers for Shimkus Post Office Box 5458 Springfield, IL 62704	John Shimkus, U.S. HOUSE 20th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	500.00
Wally Herger for Congress P.O. Box 1500 Chico, CA 95927	Wally Herger, U.S. HOUSE 2nd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	1,000.00
Rogan Campaign Committee P.O. Box 36 Montrose, CA 91021	Rogan, U.S. HOUSE 27th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	500.00
LAZIO FOR CONGRESS '94 72 East Main St. Suite 4 c/o Piccirillo Reinfurt & Lamont LLP Babylon, NY 11702	Rick A. Lazio, U.S. HOUSE 2nd NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	1,000.00
Friends of John Boehner 7908 Cincinnati - Dayton Road, #1 West Chester, OH 45069	John A. Boehner, U.S. HOUSE 6th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/23/99	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	37,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee Trust 320 First Street, SE Washington, DC 20003	Purpose of Disbursement Non Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 02/23/99	Amount of Each Disbursement This Period 15,000.00
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)	15,000.00
TOTAL This Period (last page this line number only)	15,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>3-19-99</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>Set</i> PREPARER	<i>3-19-99</i> DATE PREPARED