



September 20, 1993

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

Identification # C00003764

Dear Ms. Reynolds:

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

Sincerely,

A handwritten signature in black ink that reads "Mark Gorman". The signature is written in a cursive, flowing style.

Mark Gorman
Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

93 SEP 20 PM 5:31

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association Political Action Committee	2. FEC IDENTIFICATION NUMBER C000D 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (year).
CITY, STATE and ZIP CODE Washington, DC 20036	

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

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 <u>8/1/93</u> through <u>8/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 32,904.08
(b) Cash on Hand at Beginning of Reporting Period	\$ 85,272.74	
(c) Total Receipts (from Line 19)	\$ 49,734.85	\$ 178,949.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 135,007.59	\$ 211,853.59
7. Total Disbursements (from Line 30)	\$ 10,450.00	\$ 87,296.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 124,557.59	\$ 124,557.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-3530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	

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

Type or Print Name of Treasurer Mark Gorman	Date 9/20/93
Signature of Treasurer 	

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

FEC FORM 3X

(revised 11-91)

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

(revised 11/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM 8/1/93 TO 8/31/93	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees:			
i. Itemized (Use Schedule A)		26,281.18	101,330.20
ii. Unitemized		23,190.78	55,581.53
iii. Total	(add i and ii) >	49,471.96	156,911.73
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		.00	20,750.00
d. Total Contributions	(add a iii, b and c) >	49,471.96	177,661.73
12. Transfers From Affiliated/Other Party Committees		.00	.00
13. All Loans Received		.00	.00
14. Loan Repayments Received		.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)		262.89	1,287.78
18. Transfers from Nonfederal Account for Joint Activity		.00	.00
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	49,734.85	178,949.51
20. Total Federal Receipts	(subtract line 16 from line 19) >	49,734.85	178,949.51
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (From Schedule H4):			
i. Federal Share		.00	1,296.00
ii. Non-Federal Share		.00	.00
b. Other Federal Operating Expenditures		.00	.00
c. Total Operating Expenditures	(add a i, a ii, and b) >	.00	1,296.00
22. Transfers to Affiliated/Other Party Committees		.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		10,450.00	85,850.00
24. Independent Expenditures (Use Schedule E)		.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)		.00	.00
26. Loan Repayments Made		.00	.00
27. Loans Made		.00	.00
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		.00	.00
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)		.00	.00
d. Total Contribution Refunds	(add a, b and c) >	.00	.00
29. Other Disbursements		.00	150.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,450.00	87,296.00
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	10,450.00	87,296.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11c)		49,471.96	177,661.73
33. Total Contribution Refunds (from line 28d)		.00	.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		49,471.96	177,661.73
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	.00	1,296.00
36. Offsets to Operating Expenditures (from line 15)		.00	.00
37. Net Operating Expenditures	(subtract line 35 from 36) >	.00	1,296.00

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page	Of
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dominic V Agoatino 21 Armory Drive Wheeling, WV 26003	Aladdin Food Management Services, Inc.	08/04/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dean Anderson PO Box 1104 Saint Cloud, MN 56302	Holiday Inn	08/12/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Hotel Management Aggregate Year To Date \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dean Anderson PO Box 1104 Saint Cloud, MN 56302	Holiday Inn	08/20/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Hotel Management Aggregate Year To Date \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Andrews 166 Broadway Providence, RI 02908	Leon's on the West Side, Inc.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		

SUBTOTAL of Receipts This Page (optional)> 625.00

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 29
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Stanley Baker 11 Dearborn Street Providence, RI 02909	Nature's Best Dairy	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Berman Ben 77 Mt. Laurel Dr. Cranston, RI 02920	United Restaurant Equipment	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Salesman Aggregate Year To Date> \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Douglas E Bafalar 2290 Pawtucket Avenue East Providence, RI 02914	ADP	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Einar W Bergstedt 199 First Street Suite 212 Los Altos, CA 94022	Berman Management Corporation	08/04/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 1025.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas W Blackmore 2759 44th Street SW Wyoming, WI 49509	Gutheries, Inc	08/02/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas W Blackmore 2759 44th Street SW Wyoming, WI 49509	Gutheries, Inc	08/13/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Matthew E Brady PO Box 204 Birmingham, WI 48012		08/02/93	270.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date > \$ 270.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Briggs 149 Main Street Manover, MA 02339	Autocrat, Inc.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional)> 745.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ralph Buchanan, Jr. 3007 Hudson-Aurora Road Hudson, OH 44236		08/10/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian Cain 9140 West Dodge Road Omaha, NE 68114 3335	Godfather's Pizza, Inc.	08/20/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1150.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard J Casey 245 Hacklin Street Cranston, RI 02920	Sierra Services of Rhode Island	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frederic W Castellucci 47 Rendon Avenue Pawtucket, RI 02861	Archie's Tavern	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		

SUBTOTAL of Receipts This Page (optional) 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 5 of 23
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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Chaiken 755 Prairie Center Drive Eden Prairie, MN 55344	Flagship Athletic Club	08/20/93	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year To Date \$ 350.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dee Cody 2620 South Highway 71 Willmar, MN 56201	Restech Partner	08/12/93	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year To Date \$ 600.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wayne M Conidine 45 Sharps Drive Cranston, RI 02920	Wayne Distributing Co.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Sales	Aggregate Year To Date \$ 275.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph M DeRoos 7613 West State Street Wausau, WI 53213	DeRoos Corporation	08/04/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 500.00	

SUBTOTAL of Receipts This Page (optional)> 1725.00

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 23
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Engel 19740 Timberline Drive Waukesha, WI 53186	DeKosa Corp.	08/09/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		
David J Erickson 1500 Providence Hwy., Suite 32 Norwood, MA 02062	EDCLAB	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Sales Aggregate Year To Date \$ 275.00		
David Fairchild PO Box 571505 Houston, TX 77257	Texas Richmond Corporation	08/04/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Management Aggregate Year To Date \$ 100.00		
Jerome Fain 613 Royal Street New Orleans, LA 70130	Joseph Fain Caterer's, Inc.	08/04/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 1075.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Raul Fernandes 22 West House Street Cranston, RI 02878	Fernco Services, Inc.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date > \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George H Fless, Jr. 10224 West Forest Home #105 Wales Corners, WI 53130	DeRoss Corp.	08/09/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry M Forehand 1135 Edgemoor Houston, TX 77034	Casa Ole, Inc.	08/04/93	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 2500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Fradin PO Box 1427 West Greenwich, RI 02817	Charles Fradin Inc.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional)> 3250.00

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 13
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Ted Fuller 15 Bayside Avenue Warwick, RI 02888	Greggs Restaurants	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 275.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
MEta K Fuller 15 Bayside Avenue Warwick, RI 02888	Gregg's Restaurant	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurant Aggregate Year To Date> \$ 275.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Morris Gaebe 8 Abbott Park Place Providence, RI 02905	Johnson and Wales University	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date> \$ 275.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Greg Gabel 5835 North Eastland Court Milwaukee, WI 53217	Superior Coffee	08/09/93	800.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Sales Aggregate Year To Date> \$ 800.00		

SUBTOTAL of Receipts This Page (optional)> 1625.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rob Gifford 225 West Washtenaw Lansing, MI 48933	Michigan Restaurant Association	08/02/93	90.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Association Executive Aggregate Year To Date > \$ 520.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Giffon 6700 East Davison Detroit, MI 48212	National Coney Island Inc	08/02/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 100.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack Gulliano 92 Purchase Street Rahoboth, MA 02769	Incanto Sopreno	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Glen Dulavig 1608 New Brighton Blvd. NE Minneapolis, MI 55413	McBarvey Coffee Inc.	08/20/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional)> 615.00

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 23
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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Hoffman 1799 South Bussan Road Mount Prospect, IL 60056	Smuggery	08/16/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 100.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eppie G Johnson 1716 L Street Sacramento, CA 95814	Eppie's Restaurants, Inc.	08/09/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Kavanaugh 5096 Eaton Lane Monroe, WI 53597	Equine Club	08/10/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Kavanaugh 5096 Eaton Lane Monroe, WI 53597	Equine Club	08/12/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 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	Of
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NAME OF COMMITTEE (In full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Don Kennedy 1 Pan Kee Place, Suite 600 Janesville, WI 53545	ANI	08/09/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		
Richard Korn 460 Stone Church Road Tiverton, RI 02878	Yesterday's of Newport	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		
Henry Kristal 1664 University Avenue St. Paul, MN 55104	Embers Restaurants	08/20/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		
Richard Kroening 1517 Bismarck Street Green Bay, WI 54304	Biz Mark Inc.	08/09/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)> 775.00

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 23
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ralph Labron 5617 S.E. Foxcross Place Gorham, NH 03501	Town & Country Motor Inn	08/10/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 900.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Latham Scrooge's P.O. Box 70005 Jackson, MS 39236	MRM Inc.	08/04/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bettista Locatelli 2041 Audrie Las Vegas, NV 89109	Bettista's Hole in the Wall	08/05/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Raymond Mancini 119 Hopkins Mill Road West Greenwich, RI 02817	R.I. Distributing Company	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional) 1775.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul McEnroe Ocean Drive Middletown, RI 02840	Inn at Castle Hill	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		
Stephen J McGarry 77 Homestead Avenue Warwick, RI 02889		08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date \$ 275.00		
Dale McMath 27501 Perdido Beach Boulevard Orange Beach, AL 36561	Perdido Pass Restaurant	08/11/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		
Pete Mihajlov Suite 301A 3001 Hennepin Avenue South Minneapolis, MN 55408	Parasol Restaurant Holdings	08/20/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 1250.00

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 23
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Terrence Moran 40 Slater Road Cranston, RI 02920	Name of Employer McLaughlin & Moran Inc.	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date	\$ 275.00	

Full Name, Mailing Address and Zip Code Paul Moran 40 Slater Road Cranston, RI 02920	Name of Employer McLaughlin & Moran Inc.	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date	\$ 275.00	

Full Name, Mailing Address and Zip Code Bill Morrissey 350 Market Street St. Paul, MN 55102	Name of Employer St. Paul Hotel	Date (month, day, year) 08/12/93	Amount of Each Receipt This Period 640.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Hotel Management Aggregate Year To Date	\$ 640.00	

Full Name, Mailing Address and Zip Code Bill Morrissey 350 Market Street St. Paul, MN 55102	Name of Employer St. Paul Hotel	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 40.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Hotel Management Aggregate Year To Date	\$ 40.00	

SUBTOTAL of Receipts This Page (optional) 1190.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 15 of 23
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code John Machulak 3005 Harbor Lane North Minneapolis, MN 55447	Name of Employer JP Mulligan's Restaurant	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 300.00		

Full Name, Mailing Address and Zip Code William Neegels 4300 Baker Road Minnetonka, MN 55343	Name of Employer Restaurants No Limit, Inc.	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 3070.00		

Full Name, Mailing Address and Zip Code William Neegels 4300 Baker Road Minnetonka, MN 55343	Name of Employer Restaurants No Limit, Inc.	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 620.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 3070.00		

Full Name, Mailing Address and Zip Code Thomas E Needels 28393 Wellington Farmington Hills, MI 48018	Name of Employer Golden Mushroom Inc.	Date (month, day, year) 06/02/93	Amount of Each Receipt This Period 225.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 225.00		

SUBTOTAL of Receipts This Page (optional) 1095.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Edwin Novak 1621 Oneida Street Denver, CO 80220	Broker Restaurants	08/06/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 1000.00		
Full Name ,Mailing Address and Zip Code James L O'Hara 3 Kirker Drive East Greenwich, RI 02818	Felvey Linen Supply, Inc.	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Sales Aggregate Year To Date> \$ 275.00		
Full Name ,Mailing Address and Zip Code Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	08/16/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 300.00		
Full Name ,Mailing Address and Zip Code Reuben Palm 2727 Nicollet Avenue Minneapolis, MN 55408	Palm Brothers	08/20/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 300.00		

SUBTOTAL of Receipts This Page (optional)> 1075.00

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 23
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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lan Panaggio Sayer's Wharf Middletown, RI 02840	The Mooring Restaurant	06/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nancy A Parr 2600 Shagbark Lane Milford, MI 48380		08/02/93	270.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 270.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jon D Plamann W. 6150 Spencer Road Appleton, WI 54915	Plamann & Associates	08/09/93	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 400.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold Pollin 3235 NE Airport Way Portland, OR 97220	Sheraton Inn Airport	08/04/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

SUBTOTAL of Receipts This Page (optional)> 1045.00

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 23 For Line Number 11a(i)
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Rampino 50 Holly Hill Lane Cranston, RI 02921	West Valley Inn	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Christopher Bellly 77 Nagasaki Avenue Barrington, RI 02806	Gustave J.S. White	08/20/93	275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Insurance Salesman Aggregate Year To Date \$ 275.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William B Roberts 3910 South Front Street New Orleans, LA 70115	Roberts Gumbo Shop	08/04/93	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John R Roherty 144 Jefferson Janesville, WI 53545	Roherty's	08/09/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		

SUBTOTAL of Receipts This Page (optional)> 1200.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harris Ruelitzky One Grove Street Pittsford, NY 14534	Serv-Site Corporation	08/24/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		
Full Name, Mailing Address and Zip Code Way Schmidt 3862 North 87th Street Wauwatosa, WI 53222	Chancery Restaurants	08/09/93	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 400.00		
Full Name, Mailing Address and Zip Code Tom Stone 7085 Santa Monica Boulevard Los Angeles, CA 90046	Mimis Cafe	08/02/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1100.00		
Full Name, Mailing Address and Zip Code James E Spear 18100 West Ten Mile Road Southfield, MI 48075	Golden Mushroom Inc.	08/02/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 2100.00

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 23
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Ted Starnberg 3100 Calhoun Street New Orleans, LA 70125	Name of Employer Ted's Frostop Restaurants Occupation Restaurateur Aggregate Year To Date > \$ 200.00	Date (month, day, year) 08/06/93	Amount of Each Receipt This Period 100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Thomas J Sullivan 1610 Broadway Street NE Minneapolis, MN 55413	Name of Employer Moberg Corporation Occupation Sales Aggregate Year To Date > \$ 300.00	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Gary Susman 2901 Greenfield Road Southfield, MI 48076	Name of Employer Sweet Lorraine's Cafe Occupation Restaurateur Aggregate Year To Date > \$ 100.00	Date (month, day, year) 08/10/93	Amount of Each Receipt This Period 100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Bary B Swartz ECOLAB Center 1500 Providence Hwy. Suite 32 Norwood, MA 02062	Name of Employer ECOLAB, Inc. Occupation Restaurant Sales Aggregate Year To Date > \$ 275.00	Date (month, day, year) 08/20/93	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional) > 775.00

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 21	Of 23
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code C. Milton Turner PO Box 760 East Greenwich, RI 02818	Name of Employer Twenty Meter Street Restaurant	Date(month, day, year) 08/20/93	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 275.00		

Full Name ,Mailing Address and Zip Code Charles Taylor 636 State Street Madison, WI 53703	Name of Employer Flamingo Restaurant and Bar	Date(month, day, year) 08/09/93	Amount of Each Receipt This Period 270.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 270.00		

Full Name ,Mailing Address and Zip Code Ed Thomsen 141 Narragansett Park Drive Rumford, RI 02916	Name of Employer E.S. Thomsen, Inc.	Date(month, day, year) 08/20/93	Amount of Each Receipt This Period 275.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 275.00		

Full Name ,Mailing Address and Zip Code Kevin E Tracy 3746 Sunset Drive Spring Park, MN 55384	Name of Employer Lord Fletcher's of the Lake	Date(month, day, year) 08/20/93	Amount of Each Receipt This Period 150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 50.00		

SUBTOTAL of Receipts This Page (optional) 970.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian M Windschitl 755 Prairie Center Drive Eden Prairie, MN 55344	Restaurants No Limit	08/20/93	370.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 620.00		

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SUBTOTAL of Receipts This Page (optional)> 370.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee C0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Gorman 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Association Executive Aggregate Year-to-Date > \$ 400.00	semi-monthly payroll deduction	\$50.00 (\$25.00 per pay period)
Don Thoren 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Association Executive Aggregate Year-to-Date > \$ 333.28	semi-monthly payroll deduction	\$41.66 (\$20.83 per pay period)
Elaine Graham 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Association Executive Aggregate Year-to-Date > \$ 309.40	semi-monthly payroll deduction	\$47.60 (\$23.80 per pay period)
Lee Culpepper 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Association Executive Aggregate Year-to-Date > \$ 325.95	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
JoAnn Emerson 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Restaurant Association Occupation: Association Executive Aggregate Year-to-Date > \$ 325.95	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) \$ 226.18

TOTAL This Period (last page this line number only) \$26,281.18

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SCHEDULE A

ITEMIZED RECEIPTS

Use itemized schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee C0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
1st American Bank 740 15th Street, NW Washington, DC 20036	Interest received on investment--money market checking account Occupation	8/31/93	\$142.03
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code 1st American Bank 11751 Pinnacle Drive McLean, VA 22102-3833	Interest received on cash equivalent fund Occupation	8/31/93	\$120.86
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

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SUBTOTAL of Receipts This Page (optional)	\$262.89
TOTAL This Period (last page this line number only)	\$262.89

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1 of 3
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
Congressman Bart Gordon Ctrc. 940 East Northfield Blvd. Murfreesboro, TN 37133-	Cont. to Bart Gordon (TN-6) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/04/93	500.00
Full Name, Mailing Address and Zip Code Dave Camp for Congress 5915 Eastman Road, Suite 100 Midland, MI 48640-	Purpose of Disbursement Cont. to Dave Camp (MI-4) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 08/19/93	Amount of Each Disbursement This Period 600.00
Full Name, Mailing Address and Zip Code Franks Congress Committee 100 Grand Street Waterbury, CT 06723-	Purpose of Disbursement Cont. to Gary Franks (CT-5) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 08/19/93	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code Michael Andrews for Congress PO Box 2884 Washington, DC 20013-	Purpose of Disbursement Cont. to Mike Andrews (TX-25) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 08/04/93	Amount of Each Disbursement This Period 5000.00
Full Name, Mailing Address and Zip Code Nolan for Congress P.O. Box 2518 Alexandria, VA 22301-	Purpose of Disbursement Cont. to Jim Nolan (VA-8) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 08/04/93	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional).....> 7,100.00

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	Of
	2	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 for such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Myers for Congress P.O. Box 11 Covington, IN 47932-	Cont. to John Myers (IN-7) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/19/93	500.00
Nathan Deal for Congress PO Box 2522 Garnesville, GA 30503-	Cont. to Nathan Deal (GA-9) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/01/93	350.00
Price for Congress Committee P.O. Box 1986 Raleigh, NC 27602-	Cont. to David Price (NC-4) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/04/93	500.00
Gillen for Congress Committee 438 Sullivan St. P.O. Box 68 Kingsport, TN 37662-	Cont. to James Gillen (TN-1) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/19/93	500.00
Roth Senate Committee PO Box 105 Wilmington, DE 19899-	Cont. to William Roth (DE) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/19/93	1000.00

SUBTOTAL of Disbursements This Page (optional).....> 2,850.00

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Serrano for Congress 175 West 93rd Street, #1614 New York, NY 10025-	Cont. to Jose Serrano (NY-16) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/04/93	500.00

1
0
5
1
1
9
0
3
3
3

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	10450.00

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.

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PREPARER

9/21/93
DATE PREPARED

3 3 3 8 6 1 1 5 6 3