

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) National Restaurant Association PAC	May 14 12 11 30
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th St., NW	2. FEC IDENTIFICATION NUMBER C 0000 3764
CITY, STATE and ZIP CODE Washington, DC 20036	3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

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

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>04/01/96</u> through <u>04/30/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 239,180.70
(b) Cash on Hand at Beginning of Reporting Period	\$ 174,607.23	
(c) Total Receipts (from Line 19)	\$ 29,072.61	\$ 99,569.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 203,679.84	\$ 338,749.71
7. Total Disbursements (from Line 30)	\$ 10,427.63	\$ 145,497.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 193,252.21	\$ 193,252.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$.00	

For further information contact:
 Federal Election Commission
 888 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9630
 Local 202-219-3423

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 	Date 5-14-96

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

9503001609

**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 04/01/96

TO: 04/30/96

		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).....	22,733.84	68,316.52
	ii. Unitemized.....	5,613.56	20,308.06
	iii. Total..... (add i and ii) >	28,347.40	88,624.58
	b. Political Party Committees.....	.00	.00
	c. Other Political Committees (such as PACs).....	.00	6,500.00
	d. Total Contributions..... (add a ii, b and c) >	28,347.40	95,124.58
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.).....	725.21	4,444.43
18.	Transfers from Nonfederal Account for Joint Activity.....	.00	.00
19.	Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	29,072.61	99,569.01
20.	Total Federal Receipts..... (subtract line 18 from line 19) >	29,072.61	99,569.01
II. Disbursements			
21.	Operating Expenditures:		
	a. Shared Federal/Non-Federal Activity (from Schedule H4)		
	i. Federal Share.....	.00	.00
	ii. Non-Federal Share.....	.00	.00
	b. Other Federal Operating Expenditures.....	427.63	1,273.75
	c. Total Operating Expenditures..... (add a i, a ii, and b) >	427.63	1,273.75
22.	Transfers to Affiliated/Other Party Committees.....	.00	.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees.....	10,000.00	144,223.75
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	.00
30.	Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,427.63	145,497.50
31.	Total Federal Disbursements..... (subtract line 21 a ii from line 30) >	10,427.63	145,497.50
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d).....	28,347.40	95,124.58
33.	Total Contribution Refunds (from line 28d).....	.00	.00
34.	Net Contributions (other than loans)(subtract line 33 from 32).....	28,347.40	95,124.58
35.	Total Federal Operating Expenditures..... (add 21 a i and 21 b) >	427.63	1,273.75
36.	Offsets to Operating Expenditures (from line 15).....	.00	.00
37.	Net Operating Expenditures..... (subtract line 36 from 35) >	427.63	1,273.75

9 3 0 3 0 1 6 0

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	of 1
	For Line Number 11a (1)	

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

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ted Balestreri 766 Nave Street Monterey, CA 93940	Sardini Factory, Inc.	04/23/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John T Bean, III PO Box 709 Columbus, MS 39703 0709	Harveys	04/22/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Elizabeth Burns PO Box 1979 Santa Monica, CA 90406 1979	Bob Burns Restaurant	04/22/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steven J Burtenshaw 7201 Holly Hill Drive Mercer Island, WA 98040	ABC Services, Inc.	04/10/96	1250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1250.00		

SUBTOTAL of Receipts This Page (optional) 4250.00

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 7
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James A Collins 955 W. Bundy Dr. Los Angeles, CA 90049	Collins Foods International	04/22/96	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
Donald Durley 5228 North High Street Columbus, OH 43214	Franco's	04/25/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
S. Cooper Dawson, Jr. PO Box 56 206 N. Quaker Lane Alexandria, VA 22313	Camp Allegany Inc	04/17/96	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
S. Cooper Dawson, Jr. PO Box 56 206 N. Quaker Lane Alexandria, VA 22313	Camp Allegany Inc	04/22/96	100.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 200.00		

SUBTOTAL of Receipts This Page (optional) \$200.00

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 8

	For Line Number 11a(1)	

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph M DeRosa 1270 Orchard Lane Elsa Grove, WI 53122	DeRosa Corporation	04/22/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARLA Figsel RT. 1 BOX 106 Highlands, NC 28741	On The Veranda Inn.	04/29/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chris Fowler Kentucky Fried Chicken 139 Southwest Drive Jonesboro, AR 72401	POWLER FOODS, INC.	04/23/96	250.00
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
Chris Fowler Kentucky Fried Chicken 139 Southwest Drive Jonesboro, AR 72401	POWLER FOODS, INC.	04/29/96	250.00
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)> 1700.00

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

SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 4	OF 8
	For Line Number 11a(i)	

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NAME OF CONTRIBUTOR (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
Sony Garrett PO Box 774199 Stearns Springs, CO 80477	La Montana Corporation	04/15/96	1250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary Gerard 508 North Street New Harmony, IN 47631	Red Geranium Enterprises Inc.	04/22/96	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
Richard J Herman PO Box 5279 Kansas City, KS 66119	Myron Green Cafeterias, Co.	04/19/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Clark D Jones 1010 West 2610 South West Valley City, UT 84119	JH's Restaurants, Inc.	04/23/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 3000.00

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 8
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William P McCormick 720 SW Washington #550 Portland, OR 97205	McCormick & Schmick Management Group	04/25/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 5000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Biff Naylor 500 South Sepulveda Blvd. #101 Los Angeles, CA 90049 3544	T.P. California	04/04/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edwin Mowak 3021 Oneida Street Denver, CO 80220	Broker RESTAURANTS	04/16/96	280.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 280.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Patrick L O'Malley 203 North LaSalle Street #2100 Chicago, IL 60601	Canteen Corporation	04/22/96	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) \$480.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s)	Page	OF
For each category of the	6	8
Detailed Summary Page		
	For Line Number	
	11a(1)	

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NAME OF COMMITTEE (In Full)
 NATIONAL RESTAURANT ASSOCIATION PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walt Prager 17 Skysail Drive Corona Del Mar, CA 92625		04/30/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation 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
Eugene Saylor 10519 SE Stark Street Portland, OR 97216	Saylor's Old Country Kitchen, Inc.	04/22/96	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
James R Schnaithorst 1500 S. Lindbergh Blvd. St. Louis, MO 63131	Schnaithorst Restaurant	04/26/96	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William F Specht 893 Wisconsin Megal Drive Menomonee Falls, WI 53051	Cousins Submarines Inc.	04/03/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURANT Aggregate Year To Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) 2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A - EXPENSE RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 7	Of 8
	For Line Number 11a(1)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dick Stubbs 4403 SW 3rd Oklahoma City, OK 73127 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Appliswoods, Inc. Occupation Restaurateur Aggregate Year To Date \$ 1000.00	04/30/96	1000.00
Thomas Walls 12506 East Vassar Drive Aurora, CO 80014 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Trinity Grille Occupation Restaurateur Aggregate Year To Date \$ 250.00	04/16/96	250.00
Jay Washbrook 1265 New Hampshire Ave., NW #414 Washington, DC 20036 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	National Restaurant Association Occupation ASSN. Executive Aggregate Year To Date \$ 250.00	04/02/96	250.00
Ralph M Wood 31244 P.V. Drive West #236 Rancho Palos Verdes, CA 90274 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	The Admiral Risky Occupation Restaurateur Aggregate Year To Date \$ 250.00	04/29/96	250.00

SUBTOTAL of Receipts This Page (optional)> 1750.00

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

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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
Elaine Z Graham Rt. 2, Box 66D Lovettsville, VA 22080		National Restaurant Association	04/30/96	153.84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Assn. Executive	Aggregate Year-to-Date \$ 615.36	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$	

TOTAL of Receipts This Page (optional)	153.84
TOTAL This Period (last page this line number only)	22,733.84

96030168

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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
Crestar NA P.O. Box 26150 Richmond, VA 23260	interest earned on cash equivalent fund	04/30/96	130.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 972.47	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Securities Corporation P.O. BOX 498 Richmond, VA 23204-0498	interest earned on money market acct.	04/30/96	594.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,471.96	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 725.21

TOTAL This Period (last page this line number only) 725.21

966301639

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

9 6 0 3 0 : 0 1 6 0 0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express 200 Vesey Street New York, NY 10285	credit card fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/96	173.81
B. Full Name, Mailing Address and ZIP Code Crestar Bank NA 100 Connecticut Avenue, NW Washington, DC 20036	taxes paid on interest earned Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/96	253.82
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)

427.63

TOTAL This Period (last page this line number only)

427.63

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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
Silvestre Reyes Candidate for US Congress 303 Texas, Ste. 600 El Paso, TX 79901	(TX-16) Cont. to Silvestre Reyes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Run-off</i>	04/05/96	2,000.00
Shelby for US Senate P.O. Box 1091 Tuscaloosa, AL 35403	(AL-S) Cont. to Richard Shelby Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/96	1,000.00
Bob Smith for US Senate P.O. Box 794 CONcord, NH 03302	(NH-S) cont. to Bob Smith Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/96	1,000.00
Seastrand '96 1251 E. Dyer Rd. Santa Ana, CA 92705	(CA-22) cont. to Andrea Seastrand Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/23/96	1,000.00
Linder for Congress P.O. Box 942060 Atlanta, GA 31141	(GA-4) cont. to John Linder Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/96	500.00
Texans for Henry Bonilla 4451 Brookfield Corp. Dr. #200 Chantilly VA 22021	(TX-23) Cont. to Henry Bonilla Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/96	1,000.00
Ruben Hinojosa for Congress P.O. Box 1075 Mercedes, TX 78570	(TX-15) cont. to Ruben Hinojosa Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/05/96	2,000.00
Congressman Joe Barton Comm. P.O. Box 1444 Ennis, TX 75120	(TX-6) cont. to Joe Barton Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/17/96	1,000.00
HOOSIERS Supporting Steve Buyer P.O. Box 712 MONTicello, IN 47960	(IN-5) Cont. to Steve Buyer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Run-off</i>	04/17/96	500.00

SUBTOTAL of Disbursements This Page (optional) 10,000.00

TOTAL This Period (last page this line number only) 10,000.00

**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>5-14-96</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
<i>SL</i>	<i>5-15-96</i>

PREPARER

DATE PREPARED

96030:01672