

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2001 JAN 31 P 1:20

USE FEC MAILING LABEL OR TYPE OR PRINT

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

4. TYPE OF REPORT

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

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on 11/7/00 in the State of USA

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/19/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 224,537.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 284,611.00	
(c) Total Receipts (from Line 19)	\$ 84,407.37	\$ 502,786.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 369,018.37	\$ 727,324.53
7. Total Disbursements (from Line 20)	\$ 98,046.00	\$ 454,352.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 272,972.37	\$ 272,972.37
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 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-694-1100
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 Lee Culpepper	Date
Signature of Treasurer	<u>1-31-01</u>

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

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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	REPORT COVERING PERIOD		
National Restaurant Association Political Action Committee	FROM	TO:	
	10/19/00	11/27/00	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	67,038.84	390,124.08	11(a)(i)
ii. Unitemized	13,501.53	79,137.73	11(a)(ii)
iii. Total (add i and ii) >	80,541.37	469,261.81	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	3,700.00	29,103.16	11(c)
d. Total Contributions (add a iii, b and c) >	84,241.37	498,364.97	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	519.22	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	1,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	166.00	2,402.46	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) >	84,407.37	502,786.64	19
20. Total Federal Receipts (subtract line 18 from line 19) >	84,407.37	502,786.64	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	646.00	1,713.36	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	646.00	1,713.36	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	96,600.00	432,908.80	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	3,160.00	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	3,160.00	28(d)
29. Other Disbursements	0.00	16,670.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	96,646.00	454,362.16	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	96,646.00	454,352.16	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	84,241.37	498,364.97	32
33. Total Contribution Refunds (from line 28d)	0.00	3,160.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	84,241.37	495,204.97	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	546.00	1,713.36	35
36. Offsets to Operating Expenditures (from line 15)	0.00	519.22	36
37. Net Operating Expenditures (subtract line 35 from 36) >	546.00	1,194.14	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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

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

A. Full Name, Mailing Address and ZIP Code Tricon PAC PO Box 32220 Louisville, KY 40232-2220	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/06/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11/07/00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Coca Cola NPCGG Committee Post Office Drawer 1734 Atlanta, GA 30301	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,200.00	Date (month, day, year) 11/07/00	Amount of Each Receipt this Period 2,200.00
C. Full Name, Mailing Address and ZIP Code Hawaii Restaurant Association 1164 Bishop Street Suite 905 Honolulu, HI 96813	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 3,700.00

TOTAL This Period (last page this line number only) 3,700.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 14
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and ZIP Code Wayne Abele 2156 S Sterling St Morganton, NC 28655-4049	Name of Employer Shoney's of Morganton	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Edward Thompson Jr. 146 E Main St Forest City, NC 28043-3102	Name of Employer Ron & Eddy's Restaurant	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Greg Neichter 1350 Elbridge Payne S20B Chesterfield, MO 63017	Name of Employer Domino's Pizza	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period 500.00
	Occupation restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Bob Crumley 1021 Noell Lane Rocky Mount, NC 27804-1781	Name of Employer Boddie Noell Enterprises	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code David Long P.O. Box 450 Morrisville, NC 27580	Name of Employer Long Beverage	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Douglas Pearce 229 Carpathian Way Raleigh, NC 27615	Name of Employer Bakers Choice	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Patrick O'Malley 155 N Michigan Ave Suite 719 Chicago, IL 60601-7611	Name of Employer Cantien Company	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 200.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **2,900.00**

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 14
FOR LINE NUMBER 11 a 1

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mayo Boddie PO Box 1908 Rocky Mount, NC 27802-1908	Boddie-Noell Enterprises	10/23/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO	Aggregate Year-to-Date > \$ 400.00	
Russell Adams 2405 U.S. 30 E. Valparaiso, IN 46283	Strongbow Inn	10/23/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 650.00	
T. Jerry Williams 6900 Clear Sailing Ln Raleigh, NC 27615-5200	North Carolina Restaurant Association	10/23/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Ted Burke PO Box 65 Capitola, CA 95010-0065	Shadowbrook Restaurant	10/23/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
Robert Temple 850 State Route 239 West Portsmouth, OH 45663-6056	Lenora's Mex-Itali Mex-Itali Inn, Inc	10/23/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 518.50	
Barry Sandman 3210 Yonkers Road Raleigh, NC 27604-3854	Vinnie's Steakhouse & Tavern Good Cheer, Inc.	10/23/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 260.00	
Brian Moore 232 N Dean Rd Auburn, AL 36830-5019	Tenda Chick, Inc.	10/23/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 600.00	

SUBTOTAL of Receipts This Page (optional) **3,050.00**

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 14
FOR LINE NUMBER 11 a 1

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

A. Full Name, Mailing Address and ZIP Code Douglas Schmick 720 SW Washington, Ste. 550 Portland, OR 97205-3592	Name of Employer McCormick & Schmick Occupation restaurateur	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code Tim Greene 2504 Westham Place Raleigh, NC 27604	Name of Employer Sharin' Foodservice Sales, Inc. Occupation Sales Representative	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 400.00	
C. Full Name, Mailing Address and ZIP Code William H Zeliff Route 16B Jackson, NH 03846-8801	Name of Employer Christmas Farm Inn Occupation Restaurateur	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 370.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 370.00	
D. Full Name, Mailing Address and ZIP Code William Anton Reagan National Airport Main Terminal Washington, DC 20001-4901	Name of Employer Anton Airfood, Inc. Occupation restaurateur	Date (month, day, year) 10/26/00	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 8,000.00	
E. Full Name, Mailing Address and ZIP Code James Britt PO Box 803 Hwy 72E at Lake Greenwood Greenwood, SC 29648-0803	Name of Employer Blazers Restaurant Occupation Restaurateur	Date (month, day, year) 10/26/00	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 400.00	
F. Full Name, Mailing Address and ZIP Code Julie Filk Blon Island Mamaroneck, NY 10543	Name of Employer Compass Group North American Division Occupation Executive	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00	
G. Full Name, Mailing Address and ZIP Code Robert Hamm PO Box 46 Route 15 N Lewistown, PA 17837-0046	Name of Employer Country Cupboard, Inc. Occupation Restaurateur	Date (month, day, year) 10/26/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) 11,920.00

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 14
FOR LINE NUMBER 11 a 1

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Debbie Bunn 1381 Franquhe Concord, CA 94520	Harvest Foods	10/25/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Gary Fly 4533 W. Market Street Greensboro, NC 27407	Freeway Foods, Inc.	10/25/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Audrey Pope 129 Post Lane Mooresville, NC 28117	Claremont Restaurant Group	10/25/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Warren Anderson <i>information requested</i> Manchester, NH	Mondavi Liquors	10/25/00	740.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Rep.	Aggregate Year-to-Date > \$ 740.00	
Steven Lago 212 Pambroke Road Concord, NH 03301	Lago & Sons Dairy	10/25/00	555.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 555.00	
Michael Wolfe <i>information requested</i> NH	<i>information requested</i>	10/25/00	555.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>information requested</i>	Aggregate Year-to-Date > \$ 555.00	
Wesley Howard P.O. Box 7017 Pasadena, TX 77608	Dairy Queen/Hartselle	10/25/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	

GUSTOTAL of Receipts This Page (optional) 3,400.00

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 **14**
FOR LINE NUMBER **11 a 1**

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

A. Full Name, Mailing Address and ZIP Code Xavier Teledo 2020 Naamans Rd Wilmington, DE 19810-2855	Name of Employer Harry's Savoy Grill	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 1,000.00
	Occupation Restaurateur	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 1,750.00			
B. Full Name, Mailing Address and ZIP Code Linda V Perdue 2830 Montclair Road Winston-Salem, NC 27106-5206	Name of Employer Golden Corral	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 300.00			
C. Full Name, Mailing Address and ZIP Code Paul Turley 2360 Arapahoe Ave Boulder, CO 80302-6608	Name of Employer Turley's PGT Inc.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 250.00
	Occupation Owner	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 250.00			
D. Full Name, Mailing Address and ZIP Code Robert Williams 1036 Market St Columbia, SC 29201-4741	Name of Employer Lizard's Thicket	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 700.00			
E. Full Name, Mailing Address and ZIP Code Tommy Haddock 801 Jones Franklin Rd Raleigh, NC 27606-3358	Name of Employer Bojangles Famous Chick 'n Biscuit	Date (month, day, year) 10/26/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 400.00			
F. Full Name, Mailing Address and ZIP Code DeVera Burtanshaw 1500 114th Ave SE Suite 105 Bellevue, WA 98004-8948	Name of Employer ABC Services, Inc.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 500.00
	Occupation Food Service Management	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 1,000.00			
G. Full Name, Mailing Address and ZIP Code Mary Ann Gricchio 217 S High St Baltimore, MD 21202-4418	Name of Employer Il Mondo, Inc.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 500.00
	Occupation restaurateur	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$ 500.00			

SUBTOTAL of Receipts This Page (optional) **3,350.00**

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 14
FOR LINE NUMBER 11 & i

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

A. Full Name, Mailing Address and ZIP Code Diane Symms 2200 NW Market St Seattle, WA 98107-4024	Name of Employer Lombardi's Cucina	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Dave Williams 2280 S Main St Salt Lake City, UT 84115-2529	Name of Employer HB Boys, LC Burger King	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 200.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Brian Johnson 1965 Barber Dr Stoughton, WI 53589	Name of Employer Halvorson's	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 485.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 485.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Michael Sternberg 1200 19th St NW Washington, DC 20036-2412	Name of Employer Sam & Harry's	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Richard Smith 17901 Von Karman Ave Irvine, CA 92714-6253	Name of Employer Taco Bell Corporation	Date (month, day, year) 10/26/00	Amount of Each Receipt this Period 1,000.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Stephen Torpey 2038 Foulk Rd Wilmington, DE 19810-3824	Name of Employer Stanley's Tavern	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 500.00
	Occupation restaurateur	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Thomas W. Steed, Jr. 859-B Washington Street Raleigh, NC 27606-3260	Name of Employer Self Employed	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period 350.00
	Occupation Attorney at Law	Aggregate Year-to-Date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **3,035.00**

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

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FOR LINE NUMBER 11 a 1

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

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

A. Full Name, Mailing Address and ZIP Code Jackie Trujillo 189 1st St Ste 212 Los Altos, CA 94022-2807	Name of Employer Harman Management Corporation	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		500.00
Aggregate Year-to-Date > \$ 2,000.00			
B. Full Name, Mailing Address and ZIP Code Fradric Rosenthal 10707 B Hanna Street Beltsville, MD 20705-2122	Name of Employer Jaspers	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		350.00
Aggregate Year-to-Date > \$ 450.00			
C. Full Name, Mailing Address and ZIP Code William Irwin 2914 Jack Road Clayton, NC 27520	Name of Employer Golden Corral Corp.	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		475.00
Aggregate Year-to-Date > \$ 475.00			
D. Full Name, Mailing Address and ZIP Code Steve Wordeworth P.O. Box 800 Rocky Mount, NC 27802-0800	Name of Employer JR's Steakhouse	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		2,000.00
Aggregate Year-to-Date > \$ 2,000.00			
E. Full Name, Mailing Address and ZIP Code Glenda Fowler 13520 Durant Road Raleigh, NC 27514	Name of Employer Golden Corral Corp.	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur		1,300.00
Aggregate Year to Date > \$ 1,300.00			
F. Full Name, Mailing Address and ZIP Code Glenda Fowler 13520 Durant Road Raleigh, NC 27614	Name of Employer Golden Corral Corp.	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur		2,300.00
Aggregate Year-to-Date > \$ 3,600.00			
G. Full Name, Mailing Address and ZIP Code Jim Sabiston 3124 Lakepointe Trail Battleboro, NC 27809	Name of Employer Federated Food Service	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		500.00
Aggregate Year-to-Date > \$ 500.00			

SUBTOTAL of Receipts This Page (optional) **7,425.00**

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

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FOR LINE NUMBER 11 a 1

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

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

<p>A. Full Name, Mailing Address and ZIP Code Helen Dare 2372 Winding Brook Cir Bloomington, IN 47401-4382</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer One World Enterprises</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/30/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Donald Porterfield PO Box 4000 Pinehurst, NC 28374-4000</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pinehurst Hotel & Country Club</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 520.00</p>	<p>Date (month, day, year) 10/30/00</p>	<p>Amount of Each Receipt this Period 320.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Jerry Wardsworth PO Box 2856 Rocky Mount, NC 27802-2856</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer JR's Steak House</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 10/30/00</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Peter Plamondon 4 S McCain Dr Frederick, MD 21703</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Plamondon Enterprises, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 11/01/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Ralph Buchanan, Jr. 3007 Hudson-Aurora Road Hudson, OH 44238-2423</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Buchanan Industries</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/01/00</p>	<p>Amount of Each Receipt this Period 280.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Denny LaRusse 133 W Oxmoor Rd Ste 216 Birmingham, AL 35209-6379</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jack's Family Restaurants, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 11/01/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Craig Huss 127 S Illinois St Indianapolis, IN 46225-1079</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Saint Elmo's Steak House</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Receipt this Period 600.00</p>

SUBTOTAL of Receipts This Page (optional) **4,020.00**

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

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

A. Full Name, Mailing Address and ZIP Code M. Donald O'Neill 3001 Monroe Avenue Rochester, NY 14618-4603	Name of Employer Spring House Restaurant Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Xavler Telxdo 2020 Naamans Rd Wilmington, DE 19810-2655	Name of Employer Harry's Savoy Grill Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
C. Full Name, Mailing Address and ZIP Code Craig Mitchell 6833 Falls of Neuse Road Raleigh, NC 27615	Name of Employer Mitchell's Catering Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
D. Full Name, Mailing Address and ZIP Code Cameron McRae PO Box 277 Kinston, NC 28502-0277	Name of Employer Tands, Inc. Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
E. Full Name, Mailing Address and ZIP Code William Roland Beuret 430 S Wymora Rd Altamonte Springs, FL 32714-6061	Name of Employer Maison & Jardin Restaurant/Beuret Ent., Inc. Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
F. Full Name, Mailing Address and ZIP Code Joseph DeRosa 7613 W State St Wauwatosa, WI 53213-2838	Name of Employer DeRosa Corporation Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 625.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,700.00		
G. Full Name, Mailing Address and ZIP Code Cameron Mitchell 1246 Olentangy River Rd. Columbus, OH 43212	Name of Employer Cameron Mitchell Restaurants/Cap City Diner Occupation Restaurateur	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,018.50		

SUBTOTAL of Receipts This Page (optional) **3,475.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11 a 1

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

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

A. Full Name, Mailing Address and ZIP Code Gregory Hamer PO Drawer 3608 Morgan City, LA 70381-3608	Name of Employer Taco Bell - B&G Food Enterprises	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 250.00	
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	B. Full Name, Mailing Address and ZIP Code Harrison Ewell PO Box 7 Chapel Hill, NC 27514-0007	Name of Employer Chapel Hill Restaurant Management	Date (month, day, year) 11/03/00	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	C. Full Name, Mailing Address and ZIP Code Cory Wingerter 3468 Route 9 South Second Fl Freehold, NJ 07728-8561	Name of Employer Princeton Innkeepers	Date (month, day, year) 11/04/00	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	D. Full Name, Mailing Address and ZIP Code Adrian Stevens 3468 U.S. Highway 9 Freehold, NJ 07728	Name of Employer Princeton Innkeepers	Date (month, day, year) 11/04/00	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	E. Full Name, Mailing Address and ZIP Code Alan Seidenfeld 6650 E Euclid Pl Englewood, CO 80111-4607	Name of Employer Data Host Direct, Inc.	Date (month, day, year) 11/06/00	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 2,010.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	F. Full Name, Mailing Address and ZIP Code Robert Hahn 234 Columbine St Suite 310 Denver, CO 80208-4726	Name of Employer Manhattan Grill Airport Services, Inc.	Date (month, day, year) 11/06/00	Amount of Each Receipt this Period 250.00
	Occupation Executive	Aggregate Year-to-Date > \$ 575.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	G. Full Name, Mailing Address and ZIP Code Arnold Isken 1811 Concord Pike Wilmington, DE 19803-2901	Name of Employer Howard Johnson's Restaurant	Date (month, day, year) 11/06/00	Amount of Each Receipt this Period 150.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SUBTOTAL of Receipts This Page (optional)			2,550.00
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

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

A. Full Name, Mailing Address and ZIP Code C. Fred Jones 628 S. Main Street Mount Airy, NC 27030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Aunt Bea's Restaurant Occupation Restaurateur Aggregate Year-to-Date > \$ 1,480.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 1,080.00
B. Full Name, Mailing Address and ZIP Code Craig Miller 100 Charles Park Rd West Roxbury, MA 02132-4902 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Uno Restaurant Corporation Occupation Restaurateur Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 500.00
C. Full Name, Mailing Address and ZIP Code Adrian Stevens 3488 U.S. Highway 9 Freehold, NJ 07728 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Princeton Innkeepers Occupation Restaurateur Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 1,500.00
D. Full Name, Mailing Address and ZIP Code Jeff Sparks 622 Florence Rd PO Box 56 Savannah, TN 38372-3126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer American Foodservice Company Occupation Restaurateur Aggregate Year-to-Date > \$ 3,700.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 3,500.00
E. Full Name, Mailing Address and ZIP Code Tom Anderson 333 N Randall Rd PO Box 377 Saint Charles, IL 60174-1573 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Colonial Ice Cream, Inc. Occupation Restaurateur Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Gerald Douglas 2611 Dogwood Street Sanford, NC 27330 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer House of Lights Occupation Restaurateur Aggregate Year-to-Date > \$ 3,100.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 2,700.00
G. Full Name, Mailing Address and ZIP Code Thomas Ruff 46 Fox Ridge Drive Fletcher, NC 28732 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Blitmore Estate dba. Deerpark Restaurant Occupation Restaurateur Aggregate Year-to-Date > \$ 1,225.00	Date (month, day, year) 11/07/00	Amount of Each Receipt This Period 1,025.00

SUBTOTAL of Receipts This Page (optional) **11,285.00**

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

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Pearce 229 Carpathian Way Raleigh, NC 27615	Bakers Choice	11/07/00	1,100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,600.00	
B. Full Name, Mailing Address and ZIP Code Gary Fly 4533 W. Market Street Greensboro, NC 27407	Name of Employer Freeway Foods, Inc.	11/07/00	325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 826.00	
C. Full Name, Mailing Address and ZIP Code William M. Kotis 1420 Westover Terrace Suite E Greensboro, NC 27408	Name of Employer Kotis Properties, Inc.	11/07/00	675.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 875.00	
D. Full Name, Mailing Address and ZIP Code Barbara O'Connor 250 Dutton Avenue Santa Rosa, CA 95407	Name of Employer Cattlemen's Restaurants	11/07/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code Paul Cunney 1188 Bishop Street # 3500A Honolulu, HI 96813	Name of Employer Self Employed	11/07/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
F. Full Name, Mailing Address and ZIP Code Raymond J. Goodman, Jr McConnell Hall 403 East Dept. of Hospitality Mngt. Durham, NH 03824	Name of Employer Whitmore School of Business at UNH	11/07/00	740.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 740.00	
G. Full Name, Mailing Address and ZIP Code Vincent Orza 1220 S Santa Fe Ave Edmond, OK 73003-5904	Name of Employer Eateries, Inc.	11/07/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) **4,240.00**

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

<p>A. Full Name, Mailing Address and ZIP Code Cameron McRae PO Box 277 Kinston, NC 28502-0277</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tanda, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 650.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Don Skewis 1402 Gambell St Anchorage, AK 99501-6338</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Crossroads</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Tommy Haddock 801 Jones Franklin Rd Raleigh, NC 27608-3358</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bojangles Famous Chick 'n Biscuit</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,700.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 1,300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Dale Whitworth PO Box 29502 Raleigh, NC 27626-0502</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Investors Management Corporation Golden Corral</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 535.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 135.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Lenny Kaplan 4 W University Pkwy Baltimore, MD 21218-2306</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Polo Grill</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Libby Eaton P.O. Box 1040 Atlantic Beach, NC 28512-1673</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bistro-By-The-Sea</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 3,900.00</p>	<p>Date (month, day, year) 11/07/00</p>	<p>Amount of Each Receipt this Period 3,700.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Christina Howard 1200 17th Street NW Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Restaurant Association</p> <p>Occupation Association Executive</p> <p>Aggregate Year-to-Date > \$ 413.06</p>	<p>Date (month, day, year) Payroll Deduction</p>	<p>Amount of Each Receipt this Period 65.22 (\$21.74 Biweekly)</p>

SUBTOTAL of Receipts This Page (optional) 6,100.22

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

A. Full Name, Mailing Address and ZIP Code Lee Culpepper 1200 17th St NW Washington, DC 20036-3005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$ 1,150.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Biweekly)
B. Full Name, Mailing Address and ZIP Code Kathleen O'Leary 1200 17th St NW Washington, DC 20036-3006 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$ 409.14	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 68.19 (\$22.73 Biweekly)
C. Full Name, Mailing Address and ZIP Code Gay Woodbrook 1200 17th St NW Washington, DC 20036-3008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Restaurant Association Occupation Association Executive Aggregate Year-to-Date > \$ 428.58	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 71.43 (\$23.81 Biweekly)
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 289.62

TOTAL This Period (last page this line number only) 67,039.84

SCHEDULE A

ITEMIZED RECEIPTS

The separate contribution(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 Political Action Committee

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interest Earned Occupation Aggregate Year-to-Date > \$ 2,402.45	Date (month, day, year) 10/31/00	Amount of Each Receipt This Period 166.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)	166.00
TOTAL This Period (last page this line number only)	166.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank NA 1100 Connecticut Avenue, NW Washington, DC 20035	October Bank Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	548.00
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)	548.00
TOTAL This Period (last page this line number only)	548.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 6
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chet Edwards for Congress Post Office Box 182 Waco, TX 76703	Chet Edwards, U.S. HOUSE 11th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/23/00	2,000.00
Rangel for Congress 40 W. 135th Street New York, NY 10037	Charles B. Rangel, U.S. HOUSE 15th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/23/00	2,000.00
Majonty Leaders Fund 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	10/23/00	1,000.00
Manzullo for Congress Committee Post Office Box 7783 Rockford, IL 61126	Donald Manzullo, U.S. HOUSE 16th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/23/00	5,000.00
Lincoln Chafee for US Senate 1800 Post Road Suite 13 Warwick, RI 02886	Lincoln Chafee, U.S. SENATE RI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/23/00	6,000.00
Friends of J.C. Watts P.O. Box 720446 Norman, OK 73070	J.C. Watts, U.S. HOUSE 4th OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/23/00	1,000.00
Ryan for Congress P.O. Box 1919 Jamesville, WI 53547	Paul Ryan, U.S. HOUSE 1st WI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/24/00	2,500.00
Sharpless For Congress 2114 Regent St Po Box 260050 Madison, WI 53726	John Sharpless, U.S. HOUSE 2nd WI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/24/00	1,000.00
Gibbons for Congress Post Office Box 12938 Reno, NV 89510	James A. Gibbons, U.S. HOUSE 2nd NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	10/24/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

20,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 6
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Graves for Congress 6500 Tower Drive Suite 111 Kansas City, MO 64151	Sam Graves, U.S. HOUSE 6th MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,500.00
Re-Elect Brian Bilbray for Congress 12780 High Bluff Drive #270 San Diego, CA 92130	Brian P. Bilbray, U.S. HOUSE 49th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	1,500.00
Shelley Moore Capito for Congress P.O. Box 11519 Charleston, WV 25339	Shelley Moore Capito, U.S. HOUSE 2nd WV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,500.00
Whitfield for Congress Committee 1611 South Main Street Hopkinsville, KY 42240	Edward Whitfield, U.S. HOUSE 1st KY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	1,000.00
Bob Franks For US Senate Inc 20 Springholm Drive Berkeley Heights, NJ 07922	Robert Franks, U.S. SENATE NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,500.00
Rogan Campaign Committee P.O. Box 36 Montrose, CA 91021	Jim Rogan, U.S. HOUSE 27th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	1,500.00
Kuykendall Congressional Committee 1379 Park Western Drive #300 San Pedro, CA 90732	Steve Kuykendall, U.S. HOUSE 36th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,000.00
John Koster For Congress Po Box 3595 Arlington, WA 98223	John Koster, U.S. HOUSE 2nd WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,500.00
Friends Of Phil 10624 W 61st Street Shawnee, KS 66203	Phil Kline, U.S. HOUSE 3rd KS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/24/00	2,000.00

SUBTOTAL of Disbursements This Page (optional)	18,000.00
TOTAL This Period (total page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 6
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoosiers for Tim Roemer Post Office Box 4400 South Bend, IN 46634	Tim Roemer, U.S. HOUSE 3rd IN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Brady for Congress Post Office Box 8277 Woodlands, TX 77387	Kevin Brady, U.S. HOUSE 6th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	2,000.00
Ken Calvert for Congress PO Box 1414 Riverside, CA 92502	Ken Calvert, U.S. HOUSE 43rd CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Jim Turner for Congress Committee 803 East Gollad Crockett, TX 75835	Jim Turner, U.S. HOUSE 2nd TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Blue Dog PAC 442 New Jersey Ave., SE Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	4,000.00
Committee to Re-Elect Nydia Velazquez 148 North Carolina Ave., SE Washington, DC 20003	Nydia M. Velazquez, U.S. HOUSE 12th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Re-Elect Nancy Johnson to Congress Post Office Box 1986 New Britain, CT 06050	Nancy L. Johnson, U.S. HOUSE 6th CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Istook for Congress Committee 5400 N. Grand Boulevard Suite 100 Oklahoma City, OK 73112	Ernest Jim Istook, U.S. HOUSE 5th OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	500.00
Friends of Ronnie Shows Rt. 2 Box 228A-1 Bassfield, MS 39421	Ronnie Shows, U.S. HOUSE 4th MS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 00 General Debt	10/26/00	1,000.00

SUBTOTAL of Disbursements This Page (optional) **12,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 6
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boyd for Congress Post Office Box 15703 Tallahassee, FL 32317	Allen Boyd, U.S. HOUSE 2nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Nelson 2000 1915 North 121st Street Suite B Omaha, NE 68154	Ben Nelson, U.S. SENATE NE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	2,500.00
Keep Our Majority PAC PO Box 884 Washington, DC 20044	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Tiberi 2000 865 Macon Alley Columbus, OH 43206	Pat Tiberi, U.S. HOUSE 12th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	500.00
National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20003	Contribution to National Party Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	15,000.00
Hoolley for Congress PO Box 2050 Salem, OR 97308	Darlene Hoolley, U.S. HOUSE 5th OR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	1,000.00
Kline for Congress P.O. Box 21532 Eagan, MN 55121	John Kline, U.S. HOUSE 8th MN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	2,000.00
Chabot for Congress 3014 Harrison Street Cincinnati, OH 45211	Steve Chabot, U.S. HOUSE 1st OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/31/00	1,000.00
Pryce for Congress 340 East Gay Street Columbus, OH 43215	Deborah Pryce, U.S. HOUSE 15th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/31/00	1,000.00

SUBTOTAL of Disbursements This Page (optional) **25,000.00**

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 5 OF 6
FOR LINE NUMBER 23

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

<p>A. Full Name, Mailing Address and ZIP Code Tim Johnson for Congress PO Box 17097 Urbana, IL 61803</p>	<p>Purpose of Disbursement Johnson, U.S. HOUSE 15th IL</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 10/31/00</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Grucci 2000 Committee 2884 Route 112 Medford, NY 11763</p>	<p>Purpose of Disbursement Felix Grucci, U.S. HOUSE 1st NY</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/01/00</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Simmons For Congress 268 North Main Street Stonington, CT 06378</p>	<p>Purpose of Disbursement Rob Simmons, U.S. HOUSE 2nd CT</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 1,500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Hastert for Congress Committee Post Office Box 625 Batavia, IL 60510</p>	<p>Purpose of Disbursement Dennis Hastert, U.S. HOUSE 14th IL</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 1,500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Friends of Conrad Burns Post Office Box 1532 Billings, MT 59103</p>	<p>Purpose of Disbursement Conrad Burns, U.S. SENATE MT</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 2,500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Mike Ferguson for Congress 340 North Ave. E Suite 8 Cranford, NJ 07016</p>	<p>Purpose of Disbursement Mike Ferguson, U.S. HOUSE 6th NJ</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 2,500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Heather Wilson for Congress 9220 Guadalupe Terrace, NW Albuquerque, NM 87191</p>	<p>Purpose of Disbursement Heather Wilson, U.S. HOUSE 1st NM</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 2,000.00</p>
<p>H. Full Name, Mailing Address and ZIP Code Bob Franks For US Senate Inc 20 Springholm Drive Berkeley Heights, NJ 07922</p>	<p>Purpose of Disbursement Robert Franks, U.S. SENATE NJ</p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/03/00</p>	<p>Amount of Each Disbursement This Period 2,500.00</p>
<p>I. Full Name, Mailing Address and ZIP Code The Freedom Project 111 C Street, SE Lower Unit Washington, DC 20003</p>	<p>Purpose of Disbursement Contribution</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000</p>	<p>Date (month, day, year) 11/06/00</p>	<p>Amount of Each Disbursement This Period 2,000.00</p>

SUBTOTAL of Disbursements This Page (optional) **16,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 6
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Otter For Idaho PO Box 1456 Boise, ID 83701	Purpose of Disbursement Clement Otter, U.S. HOUSE 1st ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/08/00	1,000.00
B. Full Name, Mailing Address and ZIP Code Greshaw For Congress Comm. 4314 Ortega Forest Drive Jacksonville, FL 32210	Purpose of Disbursement Ander Greshaw, U.S. HOUSE 4th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Todd Akin For Congress 305 Conway Hill Rd St Louis, MO 63141	Purpose of Disbursement W Todd Akin, U.S. HOUSE 2nd MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 3,000.00

TOTAL This Period (last page this line number only) 95,600.00

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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