

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

Oct 24 4 22 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

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

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

CITY, STATE and ZIP CODE
Washington, DC 20036

2. FEC IDENTIFICATION NUMBER
C 0000 3764

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

4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding General
(Type of Election)
election on 11-05-96 in the State of US
- 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>10-01-96</u> through <u>10-16-96</u>			
6. (a)	Cash on Hand January 1, 19 <u>96</u>		\$ <u>239,180.70</u>
(b)	Cash on Hand at Beginning of Reporting Period	\$ <u>21,954.27</u>	
(c)	Total Receipts (from Line 19)	\$ <u>56,638.90</u>	\$ <u>457,041.21</u>
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>78,593.17</u>	\$ <u>696,221.91</u>
7.	Total Disbursements (from Line 30)	\$ <u>12,500.00</u>	\$ <u>630,128.74</u>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>66,093.17</u>	\$ <u>66,093.17</u>
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$.00	

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

Type or Print Name of Treasurer
Elaine Z. Graham

Signature of Treasurer
Elaine Z. Graham

Date
10-24-96

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

**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 PAC		FROM 10-01-96	TO 10-16-96
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Remitted (use Schedule A)	43,160.90	323,912.54	11(a)(i)
ii. Unremitted	10,878.00	81,665.16	11(a)(ii)
iii. Total (add i and ii) >	54,038.90	405,577.70	11(a)(iii)
b. Political Party Committees	.00	.00	11(b)
c. Other Political Committees (such as PACs)	2,600.00	44,481.67	11(c)
d. Total Contributions (add a, b and c) >	56,638.90	450,059.37	11(d)
12. Transfers From Affiliated/Other Party Committees	.00	.00	12
13. All Loans Received	.00	.00	13
14. Loan Repayments Received	.00	.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	.00	65.43	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	.00	.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	.00	6,916.41	17
18. Transfers from Nonfederal Account for Joint Activity	.00	.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	56,638.90	457,041.21	19
20. Total Federal Receipts (subtract line 18 from line 19) >	56,638.90	457,041.21	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	.00	.00	21(a)(i)
ii. Non-Federal Share	.00	.00	21(a)(ii)
b. Other Federal Operating Expenditures	.00	19,161.87	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	.00	19,161.87	21(c)
22. Transfers to Affiliated/Other Party Committees	.00	.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	12,500.00	364,381.52	23
24. Independent Expenditures (use Schedule E)	.00	44,085.35	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	.00	.00	25
26. Loan Repayments Made	.00	.00	26
27. Loans Made	.00	.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	.00	2,500.00	28(a)
b. Political Party Committees	.00	.00	28(b)
c. Other Political Committees (such as PACs)	.00	.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	.00	2,500.00	28(d)
29. Other Disbursements	.00	.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	12,500.00	630,128.74	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	12,500.00	630,128.74	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	56,638.90	450,059.37	32
33. Total Contribution Refunds (from line 28d)	.00	2,500.00	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	56,638.90	447,559.37	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	.00	19,161.87	35
36. Offsets to Operating Expenditures (from line 15)	.00	65.43	36
37. Net Operating Expenditures (subtract line 36 from line 35) >	.00	19,096.44	37

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 18
	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
Chris W Anton 3705 Myunewood Dr. Greensboro, NC 27408	Anton's, Inc	10/07/96	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
Christopher Bender 511 W. Hargett Street Raleigh, NC 27603	Wicked Smile, Inc	10/09/96	180.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 180.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George Berkowitz 33 Everett Street Allston, MA 02134	Legal Sea Foods, Inc.	10/16/96	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 400.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
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)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

One separate schedule (a) for each category of the Detailed Summary Page	Page 2	Of 12
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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
Evelyn G Bluestein 68 Edward Drive Winchester, MA 01890	Sovereign Hotels	10/09/96	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
Evelyn G Bluestein 68 Edward Drive Winchester, MA 01890	Sovereign Hotels	10/09/96	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
Jack Braglia 887 Spring St., NW Atlanta, GA 30308	Cheetah	10/15/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joni Brakebill 1009 Calibre Creek Pkwy Roswell, GA 30076	Langhorn Steaks	10/16/96	150.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

SUBTOTAL of Receipts This Page (optional)

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 18
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Robert Brown 100 Chiles Park Road West Roxbury, MA 02133	Name of Employer Uno Restaurants	Date (Month, day, year) 10/16/96	Amount of Each Receipt This Period 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 Peter Cabrelli 1284 Ragley Hall Rd Atlanta, GA 30319	Name of Employer SEMA, Inc.	Date (Month, day, year) 10/16/96	Amount of Each Receipt This Period 400.50
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 400.50	

Full Name, Mailing Address and Zip Code Herman Cain 9140 West Dodge Road Omaha, NE 68114 3335	Name of Employer Godfather's Pizza, Inc.	Date (Month, day, year) 10/16/96	Amount of Each Receipt This Period 2000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 2000.00	

Full Name, Mailing Address and Zip Code Pat Cattin 29211 7th Place South Federal Way, WA 98003	Name of Employer Cattin's Restaurants, INC.	Date (Month, day, year) 10/10/96	Amount of Each Receipt This Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A - ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 NATIONAL RESTAURANT ASSOCIATION PAC

Full Name, Mailing Address and Zip Code Manuel Costa 414 Rutherford Avenue Charlestown, MA 02129	Name of Employer Costa Fruit & Produce Co.	Date (month, day, year) 10/16/96	Amount of Each Receipt This Period 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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code Michael Dunningham 19 Kermady Boston, MA	Name of Employer Au Bon Pain	Date (month, day, year) 10/09/96	Amount of Each Receipt This Period 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 Joseph Curzi, Jr. 87 Kingston Road Waltham, MA 02154	Name of Employer Linen & Laundry Sales, Inc.	Date (month, day, year) 10/09/96	Amount of Each Receipt This Period 200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Sales Aggregate Year To Date: \$ 300.00		

SUMTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Don Denton 100 Fifth Avenue Waltham, MA 02154	Peppico	10/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph Dainistofons Dining Services Harvard University Cambridge, MA	Harvard University	10/16/96	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
Thomas Fortch 229 Peachtree St. #616 Atlanta, GA 30303	BACON, Inc.	10/16/96	534.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 534.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lary Ellstein 7 Branley Hill Road Windham, NH 03087	Balsam Hotel	10/09/96	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)

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Stephen Elmont 85 Newbury Street Boston, MA 02116	Name of Employer Creative Concepts	Date (month, day, year) 10/07/96	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur Aggregate Year To Date \$ 500.00		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Craig W Fleming 112 Royal Drive Forest Park, GA 30050	Name of Employer Royal Food Service	Date (month, day, year) 10/16/96	Amount of Each Receipt This Period 450.00
	Occupation Restaurateur Aggregate Year To Date \$ 450.00		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Jodi R Fowler 137 S. Main Street Raymond, NH 03077	Name of Employer <i>Jodi's Place</i>	Date (month, day, year) 10/09/96	Amount of Each Receipt This Period 200.00
	Occupation <i>Restaurateur</i> Aggregate Year To Date \$ 200.00		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name, Mailing Address and Zip Code Denise M Fugo 1400 West 10th Street Cleveland, OH 44113	Name of Employer Searcy's	Date (month, day, year) 10/10/96	Amount of Each Receipt This Period 500.00
	Occupation Restaurateur Aggregate Year To Date \$ 1000.00		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A IDENTIFIED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James L GAGBY 180 Shrewsbury Street West Boylston, MA 01583	The Ziff Company	10/09/96	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
Raymond B Gaspert 120 Interstate W. Pkwy. East Suite 112 Atlanta, GA 30339	Philly Connection	10/16/96	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 250.00		

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.	10/16/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steve Grantham P.O. Office Box 16705 Jackson, MS 39236	POL	10/01/96	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)

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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
Tom Hall Post Office Box 390 Waynesville, NC 28786	Waynesville Country Club	10/04/96	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
Howard I Halpern 3926 Riverchase Dr. NW Atlanta, GA 30327	Buckhead Meats, Inc.	10/16/96	1780.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur Aggregate Year To Date: \$ 1780.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward Reedy 380 South Worcester Street Norton, MA 02766	Hallenith-Sysco	10/09/96	800.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur Aggregate Year To Date: \$ 800.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Reedy Ricky 867 Waterford Green Marietta, GA 30068	Rio Bravo	10/16/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)		Occupation Restaurateur Aggregate Year To Date: \$ 300.00	

SUBTOTAL of Receipts This Page (optional)

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Use separate schedule(s) for each category of the Detailed Summary Page	Page 3	02 19
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Hogg 755 Jefferson St. Atlanta, GA 30317	Better Brands	10/16/96	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
William A Ronayouck 84 Beacon Street Boston, MA 02108	Beaehike House	10/16/96	2000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Management Aggregate Year To Date \$ 2000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eric Jones 3616 Dogwood Park Road Decatur, GA 30634	The Coca-Cola Company	10/16/96	267.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 267.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Brian Kahn 6100 Emmanuel Drive, SW Atlanta, GA 30378	Empire Distributors	10/16/96	445.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 445.00		

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 10	of 18
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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
Roger Kahn 1100 Spring Street, NE Atlanta, GA 30309	Empire Distributors	10/16/96	222.50
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 222.50		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George I Khoury 141 Spring Street Lexington, MA 02173	Rathern Company	10/16/96	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Supplier 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
Anthony LaBocca 2101 Bennett Street Atlanta, GA 30309	<i>Frotelli Di Napoli</i>	10/15/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation <i>Restaurateur</i> Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary A Link 2071 Peachtree Road Atlanta, GA 30309	MacArthur's Restaurant	10/15/96	450.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 450.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A TERMINED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 11	Of 17
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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
George W McKerron Sr. 8215 Roswell Rd. #200 Atlanta, GA 30350	Longhorn Steaks	10/16/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurant Aggregate Year To Date: \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George W McKerron Jr. 8215 Roswell Road Building 200, Suite 200 Atlanta, GA 30350	Longhorn Steaks	10/16/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Ginair McKerron 8215 Roswell Road Atlanta, GA 30350	Longhorn Steaks	10/16/96	5000.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Amber McKerron 8215 Roswell Road Atlanta, GA 30350	Longhorn Steaks	10/16/96	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 2500.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 12	Of 18
	For Line Number 114(i)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Catherine McRarrow 8215 Roswell Road Atlanta, GA 30350	Longhorn Steaks	10/16/96	2500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Jeffery S Mead 205 Broadway Cambridge, MA 02139	Tofias Fleisman, Shapiro & Co.	10/20/96	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 300.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Max Nissan 3283 Breston Cir Atlanta, GA 30319	Atlanta's Finest	10/16/96	267.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 267.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rick Orlando 1777 Grand Avenue Cleveland, OH 44104	Orlando Baking Company	10/10/96	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)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 13	Of 18
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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
Jessica Pacheco 135 Norrweasey Blvd Boston, MA 02107	Boston Globe	10/09/96	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas J Pearce 101 Northway Court Raleigh, NC 27615	National Chain Marketing	10/04/96	600.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 600.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim L Peterson P.O. Box 1338 Goliad, TX 77963 1338	Bojangles	10/04/96	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
Virginia Pfife 589 S Chillicothe Rd Aurora, OH 44202 8843	Aurora Farms Amish Style Restaurant	10/10/96	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)

TOTAL This Period (last page this line number only)

SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 14	Of 18
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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Don Salvucci 99 Riverport St. Boston, MA 02132	Cavalier Wine Company	10/16/96	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
Varon W Shea 1608 Pleasant View Drive Wisconsin Dells, WI 53965	Holiday Inn	10/01/96	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
Don Sheldrake 14325 Isoll Road Santa Fe Springs, CA 90678	E.D.D. Investment Company	10/02/96	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
Sidney T Small 39 White Oaks Road Newton, MA 02168	Americlean Systems	10/09/96	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		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 15	Of 18
	Box 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
Harry K Steffey 511 W. Third Street Wiles, OH 44445 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Mahoning Valley Restaurant Assn. Assn. Executive Aggregate Year To Date: \$ 200.00	10/10/96	200.00
Paul F Thibault 5 Aldrin Road Plymouth, MA 02360 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Thibault Partners Restaurateur Aggregate Year To Date: \$ 200.00	10/16/96	200.00
Stuart Thompson P.O. Box 155 North Andover, MA 01845 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Thompson Consulting Restaurateur Aggregate Year To Date: \$ 200.00	10/09/96	200.00
Chris Tsaganis 782 Crescent Street Brockton, MA 02402 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Christo's Inc. Restaurateur Aggregate Year To Date: \$ 300.00	10/09/96	200.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) For each category of the Detailed Summary Page	Page 16	Of 18
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NAME OF COMMITTEE (In Full)
National RESTAURANT Association PAC

Full Name, Mailing Address and Zip Code William G Tullar PO Box 111 Grand Rivers, KY 42045	Name of Employer <i>Patti's 1880's Restaurant</i>	Date (month, day, year) 10/16/96	Amount of Each Receipt This Period 250.00
	Occupation <i>Restaurateur</i> Aggregate Year To Date: \$ 350.00		

Full Name, Mailing Address and Zip Code Robert Van GORDEL 560 Camrose Circle, NE Concord, NC 28025	Name of Employer <i>Concord Cafe</i>	Date (month, day, year) 10/04/96	Amount of Each Receipt This Period 190.00
	Occupation <i>Restaurateur</i> Aggregate Year To Date: \$ 190.00		

Full Name, Mailing Address and Zip Code Victoria West Post Office Box 2529 Covington, ME 04435	Name of Employer McDonald's of Covington	Date (month, day, year) 10/08/96	Amount of Each Receipt This Period 200.00
	Occupation Restaurateur Aggregate Year To Date: \$ 200.00		

Full Name, Mailing Address and Zip Code Merry Yanke 8555 Roswell Road Atlanta, GA 30350	Name of Employer Three Dollar Cafe	Date (month, day, year) 10/15/96	Amount of Each Receipt This Period 300.00
	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 17	Of 8
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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
Marcus Zinner 5525 South Othello Street Seattle, WA 98138	South Bound Red Robin Inn.	10/10/98	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	

SUBTOTAL of Receipts This Page (optional)

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 11a(1)

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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 660 Lowettsville, VA 22070	National Restaurant Association	10/2/96	76.92
	Occupation: Assn. Executive	10/9/96	76.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,615.32	
Donald P. Thoren 5340 Holmes Run Parkway #305 Alexandria, VA 22304	National Restaurant Association	10/2/96	19.23
	Occupation: Assoc. Executive	10/9/96	19.23
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 403.83	
Lee Culpepper 341 S. Picclett Street Alexandria, VA 22304	National Restaurant Association	10/2/96	20.84
	Occupation: Assn. Executive	10/9/96	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 395.96	
Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181	National Restaurant Association	10/2/96	22.73
	Occupation: Assn. Executive	10/9/96	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 386.41	
Larry E. Firth, Jr. 1416 W. Abington Dr #202 Alexandria, VA 22314	National Restaurant Association	10/2/96	22.73
	Occupation: Assn. Executive	10/9/96	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 386.41	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 324.90
TOTAL This Period (last page this line number only) 43,160.90

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

A. Full Name, Mailing Address and ZIP Code Ohio Restaurateurs PAC 1525 Bethel Road Columbus, OH 43223 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 10/10/96	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and ZIP Code Jerrico Political Action Committee 101 Jerrico Drive Lexington, KY 40577 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Contribution Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year)	Amount of Each Receipt this Period 2,500.00
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)

TOTAL This Period (last page this line number only)

2,600.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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

Full Name, Mailing Address and Zip Code Baldacci for Congress 1996 Committee 79 Palm Street Bangor, ME 04401	Purpose of Disbursement CONT. to John Baldacci ME-2 Disbursement for: Primary G General Other (specify)	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 500.00
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Full Name, Mailing Address and Zip Code Bass Victory '96 Committee 136 North Main Street Suite 4 Coosford, NH 03301	Purpose of Disbursement cont. to Charlie Bass NH-2 Disbursement for: Primary G General Other (specify)	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 1000.00
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Full Name, Mailing Address and Zip Code Cyran for Congress Committee P.O. Box 8534 Rolling Meadows, IL 60008	Purpose of Disbursement cont. GO Phil Crane IL-6 Disbursement for: Primary G General Other (specify)	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 1000.00
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Full Name, Mailing Address and Zip Code Frelinghuysen for Congress 1711 Route 46 Parsippany, NJ 07054	Purpose of Disbursement cont. to R. Frelinghuysen NJ-11 Disbursement for: Primary G General Other (specify)	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 1000.00
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Full Name, Mailing Address and Zip Code Friends of Mark Foley PO Box 19536 West Palm Beach, FL 33416	Purpose of Disbursement CONT. to Mark Foley FL-15 Disbursement for: Primary G General Other (specify)	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 500.00
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SUBTOTAL of Disbursements This Page (optional).....

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 2	Of 3
	For Line Number	
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code Knollenberg for Congress Comm. 24901 Northwestern, Ste. 314-B Southfield, MI 48075-	Purpose of Disbursement cont. to Joe Knollenberg MI-11	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 500.00
Disbursement for: Primary <input type="checkbox"/> General			
Other (specify)			

Full Name, Mailing Address and Zip Code La Tourette for Congress Cate. 4900 Delevan Dr. Lyndhurst, OH 44124-	Purpose of Disbursement cont. to S. LaTourette OH-19	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 2000.00
Disbursement for: Primary <input type="checkbox"/> General			
Other (specify)			

Full Name, Mailing Address and Zip Code Lewis For Congress Committee P.O. Box 247 Redlands, CA 92373-	Purpose of Disbursement cont. to Jerry Lewis CA-40	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 1000.00
Disbursement for: Primary <input type="checkbox"/> General			
Other (specify)			

Full Name, Mailing Address and Zip Code Linder for Congress PO Box 942060 Atlanta, GA 30341-	Purpose of Disbursement cont. to John Linder CA-4	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 500.00
Disbursement for: Primary <input type="checkbox"/> General			
Other (specify)			

Full Name, Mailing Address and Zip Code McCreary for Congress 333 Texas Street Shreveport, LA 71101-	Purpose of Disbursement cont. to Jim McCreary LA-5	Date (month, day, year) 10/08/96	Amount of Each Disbursement This Period 500.00
Disbursement for: Primary <input type="checkbox"/> General			
Other (specify)			

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE H ITEMIZED DISBURSEMENTS

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Schiff for Congress PO Box 25185 Albuquerque, NM 87125-	cont. to Steve Schiff NM-1 Disbursement for: Primary <input checked="" type="checkbox"/> General Other (specify)	10/08/96	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sue Kelly for Congress 700 White Plains Road Suite 325 Scarsdale, NY 10583-	cont. to Sue Kelly NY 19 Disbursement for: Primary <input checked="" type="checkbox"/> General Other (specify)	10/08/96	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Todd Tishert for Congress P.O. Box 231 Goddard, KS 67052-	cont. to Todd Tishert KS-4 Disbursement for: Primary <input checked="" type="checkbox"/> General Other (specify)	10/08/96	1500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Upton for All of Us P.O. Box 490 St. Joseph, MI 49085-	cont. to Fred Upton MI-6 Disbursement for: Primary <input checked="" type="checkbox"/> General Other (specify)	10/08/96	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Walter Jones, Jr. for Congress 736 Post Office Box 99667 Raleigh, NC 27624-	cont. to Walter Jones NC-3 Disbursement for: Primary <input checked="" type="checkbox"/> General Other (specify)	10/08/96	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12,500.00

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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

Hand Delivered

DATE OF RECEIPT

10-24-96

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

PREPARED

MN

DATE PREPARED

10-25-96