

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 30 4 54 PM '98

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	2. FEC IDENTIFICATION NUMBER C 0000 3764
CITY, STATE and ZIP CODE Washington, DC 20036	3. <input checked="" type="checkbox"/> 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 _____
(Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>12/01/97</u> through <u>12/31/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 57,460.56
(b) Cash on Hand at Beginning of Reporting Period	\$ 248,182.67	
(c) Total Receipts (from Line 19)	\$ 61,960.25	\$ 547,980.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 310,142.92	\$ 605,441.34
7. Total Disbursements (from Line 30)	\$ 8,046.00	\$ 303,344.42
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 302,096.92	\$ 302,096.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9531 Local 202 219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		

Type or Print Name of Treasurer Elaine Z. Graham	Date 1-30-98
Signature of Treasurer 	

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

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FEC FORM 3X

(Revised 9/93)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC	REPORT COVERING PERIOD	
	FROM: 12/01/97	TO: 12/31/97
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).....	47,233.82	392,068.28
ii. Unitemized.....	8,300.34	114,961.77
iii. Total.....(add i and ii) >	55,534.16	507,030.05
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	5,946.10	32,346.10
d. Total Contributions.....(add iii, b and c) >	61,480.26	539,376.15
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5,000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	479.99	3,604.63
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
18. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	61,960.25	547,980.78
20. Total Federal Receipts.....(subtract line 18 from line 18) >	61,960.25	547,980.78
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	0.00	53,809.65
c. Total Operating Expenditures.....(Add a.i, ii, and b) >	0.00	53,809.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8,046.00	249,209.77
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.44(a)(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	0.00	325.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a, b, and c) >	0.00	325.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21 c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	8,046.00	303,344.42
31. Total Federal Disbursements.....(Subtract line 21 all from line 30) >	8,046.00	303,344.42
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	61,480.26	539,376.15
33. Total Contribution Refunds (from line 28d).....	0.00	325.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	61,480.26	539,051.15
35. Total Federal Operating Expenditures.....(add 21 aI and 21 b) >	0.00	53,809.65
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	0.00	53,809.65

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
1	1
FOR LINE NUMBER	
11 e	

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NAME OF COMMITTEE (in full)
 National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Friday's Hosp. Worldwide PAC P.O. Box 809062 Dallas, TX 75380-9062		Name of Employer Occupation	Date (Month day, Year) 12/31/97	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 Long John Silver's PAC Post Office Box 11988 Lexington, KY 40579-1988		Name of Employer Occupation	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 946.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 2,346.10		
C. Full Name, Mailing Address and Zip Code		Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code		Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code		Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code		Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code		Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
SUB TOTAL of Receipts This Page (Optional).....>				5,946.10
TOTAL this Period (Last page this line number only).....>				5,946.10

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Steve Caldeira 1008 North Royal Street Alexandria, VA 22314-1530		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 111.12
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$55.56)
		Aggregate Year-to-date > \$ 1,000.08		Semimonth)
B. Full Name, Mailing Address and Zip Code Elaine Graham Route 2, Box 66D Lovettsville, VA 22080		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$100.00)
		Aggregate Year-to-date > \$ 2,500.00		Semimonth)
C. Full Name, Mailing Address and Zip Code Dou Thoren 5340 Holmes Run Parkway #305 Sterling, VA 20165		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 41.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$20.83)
		Aggregate Year-to-date > \$ 499.92		Semimonth)
D. Full Name, Mailing Address and Zip Code Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181-5400		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$25.00)
		Aggregate Year-to-date > \$ 477.78		Semimonth)
E. Full Name, Mailing Address and Zip Code Larry Forth Jr. 1616 West Abingdon Drive #202 Alexandria, VA 22314-1011		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 41.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$20.83)
		Aggregate Year-to-date > \$ 499.92		Semimonth)
F. Full Name, Mailing Address and Zip Code Denise Roach 1701 Massachusetts Ave., NW #704 Washington, DC 20036-2135		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 27.78
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$13.89)
		Aggregate Year-to-date > \$ 250.02		Semimonth)
G. Full Name, Mailing Address and Zip Code Kathleen O'Leary 1200 Braddock Place, #201 Alexandria, VA 22314-1664		Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 52.64
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Deduction	(\$26.32)
		Aggregate Year-to-date > \$ 500.08		Semimonth)
SUB TOTAL of Receipts This Page (Optional).....>				524.86
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 i

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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
Joe Brienza 2301 Jeff Davis Hwy. #1323 Arlington, VA 22202-3816	National Restaurant Association Occupation: Association Executive	Payroll Deduction	55.56 (\$27.78 Semimonthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.04		
John Elstro 5900 Park Lake Rd East Lansing, MI 48823-9720	Signatures American Grill Occupation: restaurateur	12/12/97	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 225.00		
Bill Naylor 500 South Sepulveda Blvd. #101 Los Angeles, CA 90049-3544	T.P. California Occupation: Restaurateur	12/12/97	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		
Jim Sellers 7812 Olde Hickory Lane Oklahoma City, OK 73116-3010	Sellers Marketing Co., Inc. Occupation: Restaurateur	12/17/97	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		
Judy Corchiarino 1600 N Oak Street, #1825 Arlington, VA 22209-2770	Guest Services, Inc. Occupation: Restaurateur	12/17/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 400.00		
Charles Jordan 15458 Journey Lane Glen Allen, VA 23059	Catercorp, Inc. Occupation: Restaurateur	12/17/97	375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 375.00		
Jeffrey D Hester 1011 Breckinridge Lane Winchester, VA 22601-6711	Hester Industries, Inc. Occupation: Restaurateur	12/17/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		

SUB TOTAL of Receipts This Page (Optional)> 3,155.56
TOTAL this Period (Last page this line number only)>

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 3 OF 14
FOR LINE NUMBER 11a1

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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
Mike McCallum 1315 N. Oak Street Wilsonville, OR 97013	Oregon Restaurant Association	12/17/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Vice President, Government Affairs	Aggregate Year-to-date > \$	500.00
Joseph Fassler 10002 North 55th Street Scottsdale, AZ 85253-1145	Restaura, Inc.	12/17/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurateur	Aggregate Year-to-date > \$	3,200.00
Ron Hart P.O. Box 681207 Franklin, TN 37068-1207	Tennessee Restaurant Association	12/19/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Association Executive	Aggregate Year-to-date > \$	250.00
Jack Ferguson P.O. Box 681207 Franklin, TN 37068-1207	Tennessee Restaurant Association	12/19/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Association Executive	Aggregate Year-to-date > \$	500.00
Jack Stout 2872 Airways Blvd Memphis, TN 38132-1110	Fred Gang's Restaurant	12/19/97	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
William Hall 110 North Market Street Chattanooga, TN 37405	Edson's	12/19/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation restaurateur	Aggregate Year-to-date > \$	250.00
Robert Cassidy 2839 Trelawny Clarksville, TN 37043	O'Charley's	12/19/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurateur	Aggregate Year-to-date > \$	1,000.00
SUB TOTAL of Receipts This Page (Optional).....>			3,500.00
TOTAL this Period (Last page this line number only).....>			

SCHEDULE A

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code James Eidson 5308 Ringgold Rd Chattanooga, TN 37412-3148		Name of Employer EIDSON RESTAURANT	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 700.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 700.00	
B. Full Name, Mailing Address and Zip Code J. Knox Corbett 4202 E. Megan Drive Tucson, AZ 85712-1430		Name of Employer Arizona Pest Control	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 410.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 410.00	
C. Full Name, Mailing Address and Zip Code Kelly Sample 18863 North 71st Lane Glendale, AZ 85308		Name of Employer Arrowhead Enterprises	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
D. Full Name, Mailing Address and Zip Code Ray Flores 3065 W. Glenn Point Tucson, AZ 85745-1001		Name of Employer El Charro Cafe	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
E. Full Name, Mailing Address and Zip Code Frank Redmond 1815 East Indiana School Road Phoenix, AZ 85016-5912		Name of Employer Frank Redmond Associates	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 300.00	
F. Full Name, Mailing Address and Zip Code Daniel Skultety 12010 South 46th Street Phoenix, AZ 85044-2461		Name of Employer Sadie's	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 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	
G. Full Name, Mailing Address and Zip Code J. Knox Corbett 4202 E. Megan Drive Tucson, AZ 85712-1430		Name of Employer Arizona Pest Control	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 710.00	

SUB TOTAL of Receipts This Page (Optional)	2,910.00
TOTAL this Period (Last page this line number only)	

SCHEDULE A

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Joseph Passler 10002 North 55th Street Scottsdale, AZ 85253-1145	Name of Employer Restaura, Inc.	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 3,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Michael Olsen 2238 East Williams Drive Phoenix, AZ 85024	Name of Employer Outback Steakhouse	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Amy Yavva 6704 West Topeka Drive Glendale, AZ 85308	Name of Employer Outback Steakhouse	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Ronald Schroeder 1413 East Desert Broom Way Phoenix, AZ 85048	Name of Employer Miller Brewing Company	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
	Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code John Bruno 3721 East Topeka Drive Phoenix, AZ 85024	Name of Employer Grand Avenue Produce	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Paul Westhoff 6927 East Nightgale Star Scottsdale, AZ 85262	Name of Employer Westroc Contracting	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 1,300.00
	Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 1,300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Frank Fondrissi 6620 East Lewis Avenue Scottsdale, AZ 85257	Name of Employer Arizona Beverage	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 900.00
	Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
SUB TOTAL of Receipts This Page (Optional)>			3,700.00
TOTAL this Period (Last page this line number only)>			

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Troy Sikes 3491 West Baylor Lane Chandler, AZ 85226		Name of Employer Pro-Clean	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 300.00	
B. Full Name, Mailing Address and Zip Code Rich Chlate 512 W. Why Worry Lane Phoenix, AZ 85021-4510		Name of Employer Pro Clean	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurant Contractor	Aggregate Year-to-date > \$ 300.00	
C. Full Name, Mailing Address and Zip Code Mary Anne Allen 26805 North 70th Place Cave Creek, AZ 85331		Name of Employer The Sea Hut	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
D. Full Name, Mailing Address and Zip Code Margaret M Geraghty 1132 E. Kaler Phoenix, AZ 85020-4115		Name of Employer Prima	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
E. Full Name, Mailing Address and Zip Code Thomas Boyle 4338 West Bell Road #1 Glendale, AZ 85308		Name of Employer Padre Murphy's	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
F. Full Name, Mailing Address and Zip Code Larry Yancy 4132 Paradise Lane Phoenix, AZ 85023		Name of Employer Shamrock	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
G. Full Name, Mailing Address and Zip Code Leigh Kohrs 1507 East Mescal Phoenix, AZ 85020		Name of Employer Bill Johnson's Big Apple	Date (Month day, Year) 12/19/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
SUB TOTAL of Receipts This Page (Optional).....>				2,100.00
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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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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and Zip Code Richard Roark 23225 North 87th Avenue Peoria, AZ 85382-1884</p>	<p>Name of Employer Roark Construction</p> <p>Occupation Restaurant Contractor</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 225.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 225.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Gerald Ginger 419 E Crossville Rd Ste 201 Roswell, GA 30075-3080</p>	<p>Name of Employer Smith St. John of Georgia</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>C. Full Name, Mailing Address and Zip Code George Streeter 1467 Broad Street Augusta, GA 30901</p>	<p>Name of Employer Streeter Printing</p> <p>Occupation Restaurant Contractor</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Earl Swindle 2090 Kinsman Drive Marietta, GA 30062</p>	<p>Name of Employer Austin Nichols</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 300.00</p>		
<p>E. Full Name, Mailing Address and Zip Code E. Louis Van Dyke 294 North Cherokee Road Social Circle, GA 30025-2704</p>	<p>Name of Employer Blue Willow Inn Restaurant</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 400.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Greg Harris 305 Hartmann Drive Lebanon, TN 37088</p>	<p>Name of Employer Cracker Barrel Old Country Store</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/19/97</p>	<p>Amount of Each Receipt this Period 2,800.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 2,800.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Robert Latham 248 Pauahulu Kailua, HI</p>	<p>Name of Employer Haurez Sales</p> <p>Occupation Restaurant Contractor</p>	<p>Date (Month day, Year) 12/26/97</p>	<p>Amount of Each Receipt this Period 220.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 220.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>4,445.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In full)
 National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Paul Tokuda 45-208 Wind Kaneohe, HI 96744	Anheuser-Busch Sales of Hawaii	12/26/97	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurant Contractor	Aggregate Year-to-date > \$	220.00
Dewight Otani 584 Pomaele Street Kalihi, HI 96734	D. Otani Produce	12/26/97	660.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurant Supplier	Aggregate Year-to-date > \$	660.00
Carmen Cornelius 60 Beretania St., Apt. 1510 Honolulu, HI 96817	Auntie Pasta's	12/26/97	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurateur	Aggregate Year-to-date > \$	220.00
Thomas Silva 95-1050 Makalikai Street, 19-B Mililani, HI 96789	American Linen	12/26/97	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurant Contractor	Aggregate Year-to-date > \$	220.00
Barry O'Connell 4142 Round Top Honolulu, HI 96822-5020	HFM Foodservice	12/26/97	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurateur	Aggregate Year-to-date > \$	220.00
Kenneth Lum 5637 Haleloa Street Honolulu, HI 96821	Spaghetti! Spaghetti!	12/26/97	110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Restaurateur	Aggregate Year-to-date > \$	210.00
Dirk Soma 3029 Lowrey Ave., Apt. 2108 Honolulu, HI 96816-4496	Kapiolani Community College	12/26/97	220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Hospitality Educator	Aggregate Year-to-date > \$	220.00
SUB TOTAL of Receipts This Page (Optional).....>			1,870.00
TOTAL this Period (Last page this line number only).....>			

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

SCHEDULE A ITEMIZED RECEIPTS

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Gene Gunn 155 Poo 'Poo' Pl. Kailua, HI 96734-3262		Name of Employer Entertainment One Pacific	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 1,100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 1,100.00	
B. Full Name, Mailing Address and Zip Code Mary Ann Davis 95-1508 Ainamakua Dr. #77 Mililani, HI 96789		Name of Employer Jack In The Box	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 440.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 440.00	
C. Full Name, Mailing Address and Zip Code Laura J. Blaho 1170 Luanapono Place Kailua, HI 96734		Name of Employer Rodeo Cantina	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 440.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation restaurateur	Aggregate Year-to-date > \$ 440.00	
D. Full Name, Mailing Address and Zip Code Kay K. Kami 803 McCully Street, #7 Honolulu, HI 96826		Name of Employer Hawaii Restaurant Association	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Aggregate Year-to-date > \$ 220.00	
E. Full Name, Mailing Address and Zip Code Kay K. Kami 803 McCully Street, #7 Honolulu, HI 96826		Name of Employer Hawaii Restaurant Association	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Association Executive	Aggregate Year-to-date > \$ 330.00	
F. Full Name, Mailing Address and Zip Code Edmund Wary 49 Pilipu Place Kailua, HI 96734-2120		Name of Employer AUNTIE PASTO'S	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 440.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 1,440.00	
G. Full Name, Mailing Address and Zip Code Coe Meyer 84-736 Mouna St. Waianae, HI 96792-1925		Name of Employer Tropical Carts of Hawaii	Date (Month day, Year) 12/26/97	Amount of Each Receipt this Period 440.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 440.00	
SUB TOTAL of Receipts This Page (Optional).....>				3,190.00
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 PAC

<p>A. Full Name, Mailing Address and Zip Code Tom Jones 657 Kapiolani Blvd. Honolulu, HI 96813-5129</p>	<p>Name of Employer Kyotaro Columbia Inn</p> <p>Occupation Restaurant Supplier</p>	<p>Date (Month day, Year) 12/26/97</p>	<p>Amount of Each Receipt this Period 220.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 220.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Bonnie Amenija 1942-C Lusitana Street Honolulu, HI 96813</p>	<p>Name of Employer Anheuser-Busch Sales of Hawaii</p> <p>Occupation Restaurant Contractor</p>	<p>Date (Month day, Year) 12/26/97</p>	<p>Amount of Each Receipt this Period 220.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 220.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Tom S Anderson 712 Horne Street Saint Charles, IL 60174-3704</p>	<p>Name of Employer Colonial Ice Cream Inc.</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/29/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Rob Gifford 225 W. Washtenaw St. Lansing, MI 48933-1506</p>	<p>Name of Employer Michigan Restaurant Association</p> <p>Occupation Association Executive</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 460.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 610.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Marion Zehnder 730 South Main Street Frankenmuth, MI 48734-1686</p>	<p>Name of Employer Zehnder's of Frankenmuth</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>F. Full Name, Mailing Address and Zip Code William A Zehnder 713 South Main Street Frankenmuth, MI 48734-1694</p>	<p>Name of Employer Bavarian Inn</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Susan Zehnder 9791 Van Cleave Road Frankenmuth, MI 48734-9614</p>	<p>Name of Employer Zehnder's of Frankenmuth</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>2,900.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

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 PAC

<p>A. Full Name, Mailing Address and Zip Code Ted Burke P.O. Box 2247 Santa Cruz, CA 95063-2247</p>	<p>Name of Employer Shadowbrook Restaurant</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Michael E. Hurst, FMP 1900 SE 15th Street Fort Lauderdale, FL 33316-3097</p>	<p>Name of Employer 15th Street Fisheries</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 2,500.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Larry Curtis 16280 NW Mission Oaks Drive Beaverton, OR 97006-6311</p>	<p>Name of Employer Shari's Management Corporation</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Jack D Knox 300 Crescent Court #1630 Dallas, TX 75201-1891</p>	<p>Name of Employer Cafe Pacific, Inc.</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Josef Betz 1333 Jones Street, #705 San Francisco, CA 94109-4115</p>	<p>Name of Employer House of Prime Rib</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 5,000.00</p>		
<p>F. Full Name, Mailing Address and Zip Code Tom Wiesner 3216 Ashby Avenue Las Vegas, NV 89102-1958</p>	<p>Name of Employer Big Dog's Hospitality Group</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Cameron Mitchell 2620 Hawthorn Road Columbus, OH 43221-3212</p>	<p>Name of Employer Cameron Mitchell Restaurants</p> <p>Occupation Restaurateur</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		

SUB TOTAL of Receipts This Page (Optional).....> **10,000.00**

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 PAC

<p>A. Full Name, Mailing Address and Zip Code Lester P Jensen 11717 12th NE Seattle, WA 98125-5007</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Marles, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-date > \$ 250.00</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Ruben Villavicencio 430 Kiolstad Placentia, CA 92870-1507</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer R & M Food Services</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-date > \$ 1,150.00</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Jay Haverstick 5017 Lausanne Dayton, OH 45458-3001</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Jay's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-date > \$ 500.00</p>	<p>Date (Month day, Year) 12/30/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and Zip Code David DeKock 2746 Rollside Court Byron Center, MI 49315-9466</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Sycor Frost-Park Pool Services</p> <p>Occupation Restaurant Contractor</p> <p>Aggregate Year-to-date > \$ 400.00</p>	<p>Date (Month day, Year) 12/31/97</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and Zip Code Dennis Garcelon 6400 Village Pkwy Ste 130 Dublin, CA 94568-3023</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Western Franchise Development, Inc.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Date (Month day, Year) 12/31/97</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>F. Full Name, Mailing Address and Zip Code Michael Jurdan 1475 Edgewood Berkley, MI 48072-2132</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Olga's Kitchen</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-date > \$ 500.00</p>	<p>Date (Month day, Year) 12/31/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Steven C. Norman 2007 Bon Drive Greenbrier, TN 37073</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Town & Country</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-date > \$ 500.00</p>	<p>Date (Month day, Year) 12/31/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>3,250.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Dudley Marvin 509 Linden Drive Harbor Springs, MI 49740		Name of Employer Stafford's Hospitality Inc.	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 250.00	
B. Full Name, Mailing Address and Zip Code Douglas Schmick 720 SW Washington, Ste. 550 Portland, OR 97205		Name of Employer McCormick & Schmick	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation restaurateur	Aggregate Year-to-date > \$ 2,500.00	
C. Full Name, Mailing Address and Zip Code Grant Deporter 33 W Kinzie St Chicago, IL 60610-4613		Name of Employer Harry Caray's	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 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	
D. Full Name, Mailing Address and Zip Code Patrick L O'Malley 155 North Michigan Avenue Suite 715 Chicago, IL 60601-7511		Name of Employer Canteen Corporation/Doral Plaza	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 500.00	
E. Full Name, Mailing Address and Zip Code Bob Leonard 2655 NE 189th Street Miami, FL 33180-2605		Name of Employer IHOP/FMS Management	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 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	
F. Full Name, Mailing Address and Zip Code Carol Dover Rt. 1, Box 3016 Panama, FL 32333		Name of Employer Florida Restaurant Association	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Executive Vice President	Aggregate Year-to-date > \$ 250.00	
G. Full Name, Mailing Address and Zip Code Spiru Voussinas 4000 Alton Road Miami Beach, FL 33140		Name of Employer Howard Johnson Hotel	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Restaurateur	Aggregate Year-to-date > \$ 300.00	
SUB TOTAL of Receipts This Page (Optional).....>				4,250.00
TOTAL this Period (Last page this line number only).....>				

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 14
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Jim Wordsworth 8130 Watston Street McLean, VA 22102-4405	Name of Employer JR's Stockyards Inn Occupation Restaurateur	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 1,438.40
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	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	1,438.40
TOTAL this Period (Last page this line number only).....>	47,233.82

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
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FOR LINE NUMBER	
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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150	Name of Employer Interest Earned	Date (Month day, Year) 12/31/97	Amount of Each Receipt this Period 479.99
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 3,604.63		
B. 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 > \$		
C. 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 > \$		
D. 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 > \$		
E. 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 > \$		
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 > \$		

SUB TOTAL of Receipts This Page (Optional).....>	479.99
TOTAL this Period (Last page this line number only).....>	479.99

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Davis for Congress Committee 6429 Downing Court Annandale, VA 22003	Thomas M. Davis, U.S. HOUSE 11th VA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/02/97	2,000.00
John Shadegg For Congress Post Office Box 45444 Phoenix, AZ 85064	John Shadegg, U.S. HOUSE 4th AZ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/11/97	500.00
BACHUS FOR CONGRESS 2110 MAGNOLIA WAY BIRMINGHAM, AL 35243	Spencer Bachus, U.S. HOUSE 6th AL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	500.00
Sam Brownback for Senate Post Office Box 2008 Topeka, KS 66601	Sam Brownback, U.S. SENATE KS Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	1,000.00
Andrews for Congress Committee Post Office Box 2314 Washington, DC 20013	Robert E. Andrews, U.S. HOUSE 1st NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	1,000.00
McNulty for Congress 44 Canal Center Plaza Suite 400 Alexandria, VA 22314	Michael R. McNulty, U.S. HOUSE 21st NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	500.00
David McIntosh for Congress Post Office Box 2424 Muncie, IN 47307	David M. McIntosh, U.S. HOUSE 2nd IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	500.00
JULIA CARSON FOR CONGRESS COMMITTEE 1 North Capitol Avenue Suite 211 INDIANAPOLIS, IN 46204	Julia Carson, U.S. HOUSE 10th IN Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	500.00
Wolf Canyon Brewing Post Office Box 22040 Santa Fe, NM 87502	In-kind catering for B. Redmond US HOUSE 3rd NM Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	546.00 (In-Kind)

SUB TOTAL of Disbursements this page (Optional).....>	7,046.00
TOTAL this Period (Last page this line number only).....>	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	2
FOR LINE NUMBER		23

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
New Mexicans for Bill Redmond Post Office Box 10193 Santa Fe, NM 87504	In-kind catering for B. Redmond US HOUSE 3rd NM Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	12/29/97	546.00 (Memo In-Kind)
B. Full Name, Mailing Address and Zip Code Santorum 2000 Post Office Box 10495 Pittsburgh, PA 15234	Rick Santorum, U.S. SENATE PA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000	12/29/97	1,000.00
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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	1,000.00
TOTAL this Period (Last page this line number only).....>	8,046.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-31-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JAS</i> PREPARER	<i>1-31-98</i> DATE PREPARED