

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association Political Action Committee	2000 OCT 18 P 4: 16
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:
- | | | |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input checked="" type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ 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>09/01/00</u> through <u>09/30/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 224,537.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 245,398.66	
(c) Total Receipts (from Line 19)	\$ 79,819.54	\$ 334,570.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 325,218.20	\$ 559,107.89
7. Total Disbursements (from Line 30)	\$ 3,918.47	\$ 237,806.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 321,301.73	\$ 321,301.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20543 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer Lee Culpepper	Date 10-18-00
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. 5437g.

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FEC FORM 3X
(revised 9/98)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
National Restaurant Association Political Action Committee	FROM	TO	
	09/01/00	09/30/00	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	60,922.84	255,115.96	11(a)(1)
ii. Unitemized	13,620.70	50,285.21	11(a)(2)
iii. Total (add i and ii) >	74,543.54	305,411.17	11(a)(3)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	5,000.00	25,403.16	11(c)
d. Total Contributions (add a ii, b and c) >	79,543.54	330,814.33	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	519.22	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	1,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	276.00	2,236.45	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	79,819.54	334,670.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	79,819.54	334,670.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	203.00	1,167.36	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	203.00	1,167.36	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,713.47	216,908.80	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	3,160.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	3,160.00	28(d)
29. Other Disbursements	0.00	16,570.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,916.47	237,608.16	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	3,916.47	237,608.16	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	79,543.54	330,814.33	32
33. Total Contribution Refunds (from line 28d)	0.00	3,160.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	79,543.54	327,654.33	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	203.00	1,167.36	35
36. Offsets to Operating Expenditures (from line 15)	0.00	519.22	36
37. Net Operating Expenditures (subtract line 36 from 35) >	203.00	648.14	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **11 c**

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

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

A. Full Name, Mailing Address and ZIP Code Marriott PAC One Marriott Drive Washington, DC 20058-0001	Name of Employer	Date (month, day, year) 09/30/00	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 6,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) **5,000.00**

TOTAL This Period (last page this line number only) **5,000.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **16**
FOR LINE NUMBER **11 a 1**

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

<p>A. Full Name, Mailing Address and ZIP Code Michael Chlord 1601 Commercial, NE Albuquerque, NM 87102</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Southern Wine & Spirits</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/05/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Jacqueline Baca 279 Mariquita Road Corrales, NM 87048</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/05/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code John Johnstone 10555 Montgomery Blvd. NE Suite 90 Albuquerque, NM 87111-3857</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Garduno's Restaurants</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 09/05/00</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Thomas Warren 2500 N. 128th Street Brookfield, WI 53005-5234</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Alloto's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 320.00</p>	<p>Date (month, day, year) 09/06/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Sidney Feltenstein 6328 N. Bay Road Miami Beach, FL 33140</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Long John Silvers</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/08/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Michael J Scanlon 2412 Walnut Hill-Chilesburg Rd Lexington, KY 40515-1207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Applebee's International</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/08/00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Bea Wertheim 516 W 6th St Covington, KY 41011-1214</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Wertheim's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 09/08/00</p>	<p>Amount of Each Receipt this Period 400.00</p>

SUBTOTAL of Receipts This Page (optional) **5,200.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **2** OF **18**
FOR LINE NUMBER **11 a i**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bill Latham 805 South Whealley Suite 156 Ridgeland, MS 39157-5003	Amerigo Restaurant Corp.	08/08/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
Gene Cheshire P.O. Box 401 Somerset, KY 42502-0401	Dairy Queen	09/08/00	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	
John Currence 152 Courthouse Square Oxford, MS 38655-3914	City Grocery	09/08/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restauranteur	Aggregate Year-to-Date > \$ 500.00	
Gary Burns 564 Gumm Place Circleville, OH 43113	Golden Corral Corp.	08/12/00	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	
Irwin Roberts 4513 Creedmoor Rd. Raleigh, NC 27612-3811	Golden Corral Corp.	09/12/00	5.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 405.00	
Robert B Heyward 905 Darfield Drive Raleigh, NC 27615-1112	Golden Corral Corp.	09/12/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	
Lance Tranary 2220 Narrawood Street Raleigh, NC 27614	Golden Corral Corp.	09/12/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional) **2,355.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **16**
FOR LINE NUMBER **11 a 1**

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

A. Full Name, Mailing Address and ZIP Code John Rittenhouse 23 North Pine Street Seaford, DE 19973-1425	Name of Employer Golden Corral Restaurant #308 Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Bill C. Rowe Jr. 2907 N. Cypress Wichita, KS 67268	Name of Employer Willie C's Cafe Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code T. Dean Huckabee 1513 Sugarland Pky. Pleasant Hill, MO 64080	Name of Employer Golden Corral Corp. Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Mark Powell 4203 Armand View Drive Pasadena, TX 77505-4466	Name of Employer Golden Corral Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Bob Keenan P.O. Box 697 Bigfork, MT 59911-0697	Name of Employer Bigfork Inn Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 1,200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,200.00	
F. Full Name, Mailing Address and ZIP Code James H. Maynard P.O. Box 29552 Raleigh, NC 27626-0552	Name of Employer Investors Managment Corp./Golden Corral Corp. Occupation Restaurateur	Date (month, day, year) 09/12/00	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code Peggy Boyle 1543 E. Estrid Phoenix, AZ 85022	Name of Employer Padre Murphy's Occupation Restaurateur	Date (month, day, year) 09/27/00	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	

SUBTOTAL of Receipts This Page (optional) **7,750.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 15
FOR LINE NUMBER 11 a 1

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

<p>A. Full Name, Mailing Address and ZIP Code Suzy Elefante 873 S. Sea Shore Lane Tucson, AZ 86748</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Mama Louisa's Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Steve Gorski 15204 S. 14th Place Phoenix, AZ 85048</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Miller Brewing Company</p> <p>Occupation Sales Representative</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Michael Head 1951 E. Highway 69 Prescott, AZ 86301</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Outback Steakhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jennifer Linsky 2404 S. Wilson Street Tempe, AZ 85282</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Southern Wine & Spirits</p> <p>Occupation Sales Representative</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Craig McFarland 6510 E. Gelding Scottsdale, AZ 85254</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Anheuser-Busch</p> <p>Occupation Sales Manager</p> <p>Aggregate Year-to-Date > \$ 1,645.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 1,645.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Lex McGraw 4110 S. Houghton Road Tucson, AZ 85730</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer McGraw's Cantina</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mike Olson 3060 N. Ridgcrest, Unit 63 Mesa, AZ 85207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Outback Steakhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>

SUBTOTAL of Receipts This Page (optional) **3,845.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **5** OF **15**
FOR LINE NUMBER **11 a 1**

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

<p>A. Full Name, Mailing Address and ZIP Code Al Parkas 14441 W. Verde Lane Goodyear, AZ 85338</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Outback Steakhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Jeff Shelton 10851 N. Black Canyon Phoenix, AZ 85029</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Southwest Gas</p> <p>Occupation Marketing Executive</p> <p>Aggregate Year-to-Date > \$ 365.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 355.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Bill Wakley 3821 S. Vista Place Chandler, AZ 85248</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Island Oasis</p> <p>Occupation Sales Representative</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Brent Kyte 5902 East Pima Street Tucson, AZ 85712-4322</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pizza Hut of Arizona</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Michael Garvin 731 North Pheasant Drive Higley, AZ 85236</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Auto-Chlor System</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Patti Edgar 7800 E. Hampden Ave. Denver, CO 80231</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Fresh Fish Company</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 202.50</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 40.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Diane White 6650 Pecos Street Denver, CO 80221</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Auto-Chlor System</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 525.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 200.00</p>

SUBTOTAL of Receipts This Page (optional) **1,945.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **6** OF **18**
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 Political Action Committee

A. Full Name, Mailing Address and ZIP Code Alan Seidenfeld 6650 E. Euclid Place Englewood, CO 80111-4607	Name of Employer Data Host Corporation	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 310.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,610.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Ed Novak 1421 Oneida Street Denver, CO 80220	Name of Employer Broker Restaurants	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 250.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Roger Egan P.O. Box 1570 Tempe, AZ 85280-1570	Name of Employer McDuffy's Sportsbar, Inc.	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 1,500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Kelly Sample 18883 North 71st Lane Glendale, AZ 85308-5860	Name of Employer Arrowhead Enterprises	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 1,500.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Don Burton 1121 E. Sheldon Ave. Prescott, AZ 85017	Name of Employer JB's Restaurants	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 465.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 465.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code J. Knox Corbett 4338 E. Ebony Lane Tucson, AZ 85712	Name of Employer Arizona Pest Control	Date (month, day, year) 09/27/00	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):			
G. Full Name, Mailing Address and ZIP Code Ron Livassy 5700 Wadsworth By-Pass Arvada, CO 80002	Name of Employer Goodberry's	Date (month, day, year) 09/27/00	Amount of Each Receipt This Period 300.00
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 1,300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **4,625.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 16
FOR LINE NUMBER 11 a 1

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

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

<p>A. Full Name, Mailing Address and ZIP Code Karen Mulholland 700 Main Street Louisville, CO 80027-1830</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Karen's Country Kitchen</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ralph O. Brennan 810 Blenville Street Suite 409 New Orleans, LA 70130-2307</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ralph Brennan Restaurant Group, LLC</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,600.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 1,500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Darrell Storkson P.O. Box 3080 Everett, WA 98203-1080</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Stork's Restaurant & Lounge</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Donald H Effe 808 West Main Street Mesa, AZ 85201-7105</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Landmark Restaurant</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,200.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 1,200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Matt McMahon 26604 N. 71 Place Cave Creek, AZ 86331-6930</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Outback Steakhouse</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 515.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 515.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Frad Rosenberg 4700 Golden Spring Circle Anchorage, AK 99507-4378</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Gourmet Ventures, Inc</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Maurice B. MacDonald 3300 Arctic Blvd Ste 201 Anchorage, AK 99503-4579</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer O'Brady's Burgers & Brew</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/27/00</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) **4,465.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **8** OF **16**
FOR LINE NUMBER **11a1**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James C. Anderson 737 West 5th Avenue Suite 110 Anchorage, AK 99518-2945	Alaska Glacier Brewhouse	09/27/00	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	
Brad Kuluris 1560 East LaVieva Lane Tempe, AZ 85284	Arby's, Inc.	09/27/00	415.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 415.00	
Jay W. Sutherland 701 West 41st Ave. #201 Anchorage, AK 99503-8604	Wendy's	09/27/00	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	
Parviz Moghimi 4243 W. Michelle Dr. Glendale, AZ 85308-2519	Parvessa Italian Rest	09/27/00	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	
James Groff 11225 N. 28th Dr. Phoenix, AZ 85029	The Argus Group	09/27/00	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	
Dave Perolis 6340 W. Sierra St. Glendale, AZ 85304	The Argus Group	09/27/00	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	
Doran Powell 38840 Boak Circle Anchorage, AK 99507	information requested	09/27/00	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	

SUBTOTAL of Receipts This Page (optional)	2,185.00
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 9 OF 18
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Troy Sikas 3491 West Baylor Lane Chandler, AZ 85226-7601	Pro-Clean	09/27/00	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NoRa Trevino 501 S. Mill Avenue Suite 201 Tempe, AZ 85281	Restaurants of America	09/27/00	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	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Watt 4662 East Monte Way Phoenix, AZ 85044	Island Oasis	09/27/00	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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Westhoff 4466 E. Andrea Drive Cave Creek, AZ 85331-2608	Westroc Contracting	09/27/00	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Contractor	Aggregate Year-to-Date > \$ 1,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Jontz 9514 Pebble Beach Drive, NE Albuquerque, NM 87111	information requested	09/28/00	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	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle Hughes 2301 Riddarkerk Circle Modesto, CA 95358	information requested	09/28/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Miller 430 South Santa Rosa San Antonio, TX 78207	Brazos de Santos Partners, Ltd.	09/28/00	375.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 375.00	

SUBTOTAL of Receipts This Page (optional) 4,275.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 16
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and ZIP Code James M.L. Wordsworth 8130 Watson Street McLean, VA 22102-4405	Name of Employer J.R's Stockyard's Inn Occupation Restaurateur	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Lee Gulpepper 341 South Pickett Street Alexandria, VA 22304-4746	Name of Employer National Restaurant Association Occupation Association Executive	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 800.00	
C. Full Name, Mailing Address and ZIP Code Jeffrey Wilson P.O. Box 1664 Roswell, NM 88201-3361	Name of Employer Cattle Baron Restaurants, Inc. Occupation President	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code John Conti 4023 Bardstown Road Louisville, KY 40218	Name of Employer John Conti Gourmet Coffee Shoppes Occupation Restaurateur	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Jack C Maler 9236 Shawnee Run Road Cincinnati, OH 45243-2823	Name of Employer Frisch's Restaurants Occupation Restaurateur	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 350.00	
F. Full Name, Mailing Address and ZIP Code Marilyn Benson Athey 220 Waterside Circle Suite 201 Marco Island, FL 34145	Name of Employer Athey & Associates Occupation Executive	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Dick McLaughlin P.O. Box 118 Lincolnton, ME 04849-9701	Name of Employer Lobster Pound Restaurant, Inc. Occupation Restaurateur	Date (month, day, year) 09/28/00	Amount of Each Receipt this Period 595.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 795.00	

SUBTOTAL of Receipts This Page (optional) **3,745.00**

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 11 OF 16
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dick McLaughlin P.O. Box 118 Lincolville, ME 04849-9701	Lobster Pound Restaurant, Inc.	09/28/00	595.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 1,390.00	
Dick McLaughlin P.O. Box 118 Lincolville, ME 04849-9701	Lobster Pound Restaurant, Inc.	09/28/00	595.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 1,985.00	
Mary Lee Higgins 1201 Dove St. Suite 475 Newport Beach, CA 92660-2812	Forbco Management Corporation	09/28/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 2,000.00	
John Kavanaugh 1026 North Sherman Avenue Madison, WI 53704	Kavanaugh Esquire Club	09/28/00	650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 660.00	
Gregory Masterson P.O. Box 168 Harrods Creek, KY 40027-0168	Captain's Quarters	09/28/00	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > 6 300.00	
Jamee Robinette 350 North McWhorter Street London, KY 40744-2222	Dairy Queen	09/28/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 250.00	
Ed Tinsley, III 3700 Rio Grande, NW Suite 6 Albuquerque, NM 87107	K-Bob's Steakhouse	09/28/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > 6 2,000.00	

SUBTOTAL of Receipts This Page (optional) **6,380.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 16
FOR LINE NUMBER 11 a

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

<p>A. Full Name, Mailing Address and ZIP Code Vivian M Vance 430 S. Santa Rosa San Antonio, TX 78207-4661</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Brazos de Santos</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 375.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 375.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Bradley Pollard Lowiston Rd., Route 26 Gray, ME 04038</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cole Farm Restaurant</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,190.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 1,190.00</p>
<p>C. Full Name, Mailing Address and ZIP Code John K. Miller 430 S. Santa Rosa Ave. San Antonio, TX 78207-4581</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bill Miller Bar-B-Q</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 375.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 375.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Balous T. Miller 430 S. Santa Rosa Ave. San Antonio, TX 78207-4581</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bill Miller Bar-B-Q</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 375.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 375.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Bob Vasilyev P.O. Box 1610 Oxford, MS 38655-1610</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Vasco Properties, Inc.</p> <p>Occupation restaurateur</p> <p>Aggregate Year-to-Date > \$ 260.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Randy Wadleigh 742 Stillwater Ave. Old Town, ME 04468-2157</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Governor's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 600.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Kevin Gornam 4582 Walnut Road, SE Buckeye Lake, OH 43008</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pizza Cottage</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 09/28/00</p>	<p>Amount of Each Receipt this Period 100.00</p>

SUBTOTAL of Receipts This Page (optional) **3,285.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 13 OF 18
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Angelo J. Mele 601 S. 23rd Street Arlington, VA 22202	Cafe Italia I, Inc.	09/28/00	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	
Kirk Kirkland 732 Oak Hill Rd. Mobile, AL 36608-5941	Kirk Kirkland's Barbecue, inc.	09/28/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation restaurateur	Aggregate Year-to-Date > \$ 500.00	
Robert T Larive 601 Union Street San Francisco, CA 94133-2812	Fior d'Italia	09/28/00	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	
James C Martine 3555 East Washington Avenue Madison, WI 53704-4158	Pedros Mexican Restaurant	09/28/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 600.00	
Ned Shadid 11300 Richaven Road Oklahoma City, OK 73182	Brass Apple/Ned's Catering	09/28/00	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 350.00	
Jinx Larive 601 Union Street San Francisco, CA 94133-2812	Fior d'Italia Ristorante	09/28/00	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	
Charles Pope 11802 Charley Bluff Road Milton, WI 53563	Buckhorn Supper Club	09/28/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional) **5,400.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 15
FOR LINE NUMBER 11 & 1

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathy Crawford P.O. Box 526 121 Main Street Yarmouth, ME 04086	Maine Course Hospitality Group	09/28/00	695.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Spouse	Aggregate Year-to-Date > \$ 595.00	
Claire Hyde 3321 Hassmer Avenue Metairie, LA 70002	Ruth's Chris Steak House	09/28/00	3,800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 3,800.00	
Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181-5400	National Restaurant Association	Payroll Deduction	65.22 (\$21.74 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 326.10	
Lee Culpepper 341 South Pickett Street Alexandria, VA 22304-4746	National Restaurant Association	Payroll Deduction	150.00 (\$50.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 950.00	
Kathleen O'Leary 1200 Braddock Place, #201 Alexandria, VA 22314-1864	National Restaurant Association	Payroll Deduction	88.19 (\$22.73 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 318.22	
Gay Westbrook 1255 New Hampshire Ave. NW Washington, DC 20038-2326	National Restaurant Association	Payroll Deduction	71.43 (\$23.81 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive	Aggregate Year-to-Date > \$ 333.34	
Ron Di Pietro 3550 Columbus Road, NE Canton, OH 44705-4406	Skyland Pines	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 288.50	

SUBTOTAL of Receipts This Page (optional) 4,768.34

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 **16**
FOR LINE NUMBER **11 a i**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ninia Downs 1525 Bethel Road Suite 201 Columbus, OH 43220-2611	Ladders to Success	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 8 218.50	
Donald Creech 3357 Somerset Road London, KY 40741	<i>Information requested</i>	09/30/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 5 600.00	
Denise Marie Fugo 1400 West 10th Street Cleveland, OH 44113-1215	Sammy's	08/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 3 1,618.50	
Charles J. Blosser 1526 Bethel Road Suite 301 Columbus, OH 43220-2064	Ohio Restaurant Association	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 9 218.50	
Dan Ostas 35 East Alexis Toledo, OH 43612-3734	el-Metador Restaurant	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 3 618.50	
Jay Haverstick 225 E Sixth Dayton, OH 45458-3001	Jay's Restaurant	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 6 268.50	
Cameron Mitchell 2620 Hanthorn Road Columbus, OH 43221-3212	Cameron Mitchell Restaurants	09/30/00	18.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur	Aggregate Year-to-Date > 4 518.50	

SUBTOTAL of Receipts This Page (optional) **711.00**

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 **16** OF **16**
FOR LINE NUMBER **11 a**

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

A. Full Name, Mailing Address and ZIP Code Randy Sokol P.O. Box 06185 Columbus, OH 43206-0185	Name of Employer Tea Jaye's Country Place Restaurant	Date (month, day, year) 09/30/00	Amount of Each Receipt this Period 18.50
	Occupation Restaurateur	Aggregate Year-to-Date > \$ 218.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	18.50
TOTAL This Period (last page this line number only)	60,922.84

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **17**

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

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Post Office Box 26160 Richmond, VA 23280-6150	Name of Employer Interest Earned	Date (month, day, year) 09/30/00	Amount of Each Receipt this Period 276.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$ 2,236.46	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
		Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional)	276.00
TOTAL This Period (last page this line number only)	276.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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

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

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA 1100 Connecticut Avenue, NW Washington, DC 20036	Purpose of Disbursement September Bank Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/30/00	Amount of Each Disbursement This Period 203.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	203.00
TOTAL This Period (last page this line number only)	203.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dooley for Congress 44 Canal Center Plaza Suite 400 Alexandria, VA 22314	Calvin Dooley, U.S. HOUSE 20th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/13/00	1,213.47
B. Full Name, Mailing Address and ZIP Code Kline for Congress P.O. Box 21632 Eagan, MN 56121	Kline, U.S. HOUSE 6th MN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/26/00	1,500.00
C. Full Name, Mailing Address and ZIP Code Blagojevich for Congress 3649 North Kedzie Avenue Chicago, IL 60618	Rod Blagojevich, U.S. HOUSE 5th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/26/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3,713.47

TOTAL This Period (last page this line number only)

3,713.47

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 10-18-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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	
J.G. PREPARER	10-18-00 DATE PREPARED