

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>National Restaurant Association Political Action Committee</b>	2. FEC IDENTIFICATION NUMBER C0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported  1200 17th Street, NW	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE  Washington, DC 20036	

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- |                                      |   |                                      |
|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20              | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20              | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input checked="" 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>7/1/93</u> through <u>7/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 32,904.08
(b) Cash on Hand at Beginning of Reporting Period	\$ 63,935.36	
(c) Total Receipts (from Line 19)	\$ 21,337.38	\$ 129,214.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 85,272.74	\$ 162,118.74
7. Total Disbursements (from Line 30)	\$ .00	\$ 76,846.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 85,272.74	\$ 85,272.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ .00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ .00	

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

Type or Print Name of Treasurer <b>Don Thoren, Assistant Treasurer</b>	Date <b>8/19/93</b>
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.

2 5 0 3 8 5 6 3 0 2 0

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 11/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM 7/1/93 TO 7/31/93	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
L. Itemized (use Schedule A) .....		11,406.18	75,049.02
i. Unitemized .....		9,731.50	32,390.75
ii. Total .....	(add i and ii) >	21,137.68	107,439.77
b. Political Party Committees .....		.00	.00
c. Other Political Committees (such as PACs) .....		.00	20,750.00
d. Total Contributions .....	(add a iii, b and c) >	21,137.68	128,189.77
12. Transfers From Affiliated/Other Party Committees .....		.00	.00
13. All Loans Received .....		.00	.00
14. Loan Repayments Received .....		.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....		.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....		199.70	1,024.89
18. Transfers from Nonfederal Account for Joint Activity .....		.00	.00
19. Total Receipts .....	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	21,337.38	129,214.66
20. Total Federal Receipts .....	(subtract line 18 from line 19) >	21,337.38	129,214.66
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....		.00	1,296.00
ii. Non-Federal Share .....		.00	.00
b. Other Federal Operating Expenditures .....		.00	.00
c. Total Operating Expenditures .....	(add a i, a ii, and b) >	.00	1,296.00
22. Transfers to Affiliated/Other Party Committees .....		.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		.00	75,400.00
24. Independent Expenditures (use Schedule E) .....		.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..		.00	.00
26. Loan Repayments Made .....		.00	.00
27. Loans Made .....		.00	.00
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....		.00	.00
b. Political Party Committees .....		.00	.00
c. Other Political Committees (such as PACs) .....		.00	.00
d. Total Contribution Refunds .....	(add a, b and c) >	.00	.00
29. Other Disbursements .....		.00	150.00
30. Total Disbursements .....	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	.00	76,846.00
31. Total Federal Disbursements .....	(subtract line 21 a ii from line 30) >	.00	76,846.00
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....		21,137.68	128,189.77
33. Total Contribution Refunds (from line 28d) .....		.00	.00
34. Net Contributions (other than loans)(subtract line 33 from 32) .....		21,137.68	128,189.77
35. Total Federal Operating Expenditures .....	(add 21 a i and 21 b) >	.00	1,296.00
36. Offsets to Operating Expenditures (from line 15) .....		.00	.00
37. Net Operating Expenditures .....	(subtract line 36 from 35) >	.00	1,296.00

2303856347

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 9
	For Line Number 11a(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 for such committee.

NAME OF COMMITTEE (In full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Aitken 2735 69th SE Mercer Island, WA 98040	Consolidated Restaurants	07/06/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Victor Argobright P.O. Box 07863 Columbus, OH 43207	Bob Evans Farms, Inc.	07/13/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ted Balaschri 785 Wave Street Monterey, CA 93940	Sardine Factory, Inc.	07/13/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
C. Bruce Brannon PO Box 12 Gallatinburg, TN 37738	Open Hearth Restaurant Inc.	07/06/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) > 2500.00

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	Of
	2	9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stanley Briggs 100 South West Temple  Salt Lake City, UT 84101	Utah Food and Catering	07/23/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Egic A Burnett 2000 Green Tree Road, No. 203 Fredericksburg, VA 22406	Bob Evans Farms, Inc.	07/13/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cal E Chandler Box 99010 Tacoma, WA 98499	Roam International, Ltd.	07/06/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lawrence J Cirina 902 North Blaircliff Circle Maryville, TN 37801		07/06/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Aggregate Year To Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) .....> 950.00

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 9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel E Evans 300 Bowen Road Canal Winchester, OH 43110	Bob Evans Farms, Inc.	07/13/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeff Feldman PO Box 59013 Knoxville, TN 37950		07/29/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date > \$ 300.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Gifford 225 West Washtenaw Lansing, MI 48933	Michigan Restaurant Association	07/30/93	180.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input type="checkbox"/> Other (specify)	Occupation Association Executive Aggregate Year To Date > \$ 520.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert D Goodrich PO Box 2767 Zanesville, OH 43702 2767	Wendy's Management Group, Inc.	07/23/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurant Management Aggregate Year To Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) .....> 830.00

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 9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter F Haug West Acres Shopping Center Fargo, ND 58105	The Grainery	07/16/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Randall L Hicks 7507 Tullymore Drive Dublin, OH 43017	Bob Evans Farms, Inc.	07/13/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input checked="" type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark Hoffman 229 Thelma Drive Sheffield Lake, OH 44054	Bob Evans Farms Inc	07/13/93	250.00
Receipt for: <input checked="" type="checkbox"/> Primary     General <input checked="" type="checkbox"/>     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 250.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lester P Jensen 11717 12th NE Seattle, WA 98125	Marles, Inc.	07/06/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) .....> 900.00

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 5	Of 9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frederick C Jones PO Box 166 Gatlinburg, TN 37738		07/06/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General     Other (specify)	Occupation	Aggregate Year To Date	\$ 300.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark Kirkland 732 Oak Hill Road Mobile, AL 36609		07/28/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>     Other (specify)	Occupation	Aggregate Year To Date	\$ 300.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Komen 1018 North Northlake Way Seattle, WA 98103	Restaurants Unlimited Inc.	07/06/93	500.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>     Other (specify)	Occupation Restaurateur	Aggregate Year To Date	\$ 500.00

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charlynn Maxwell-Porter 1103 Parkway Gatlinburg, TN 37738	Maxwell's Fresh Seafood	07/06/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General     Other (specify)	Occupation Restaurateur	Aggregate Year To Date	\$ 300.00

SUBTOTAL of Receipts This Page (optional) .....> 1400.00

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 9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike McInnon 7310 Huckleberry, NW Olympia, WA 98502	Mergent Corporation  Occupation Restaurateur Aggregate Year To Date > \$ 300.00	  07/26/93	  300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)			
Patrick L O'Malley 203 North LaSalle Street #2100 Chicago, IL 60601	Canteen Corporation  Occupation Restaurateur Aggregate Year To Date > \$ 300.00	  07/26/93	  300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)			
Doug Peterson 929 South 289th Federal Way, WA 98003	Pete's Hospitality Co.  Occupation Restaurateur Aggregate Year To Date > \$ 500.00	  07/06/93	  500.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)			
Richard R Radloff 731 McGilvra Blvd. East Seattle, WA 09112	Red Robin  Occupation Restaurateur Aggregate Year To Date > \$ 300.00	  07/19/93	  300.00
Receipt for: <input checked="" type="checkbox"/> Primary     General     Other (specify)			

SUBTOTAL of Receipts This Page (optional) ..... 1400.00

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 9
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NAME OF COMMITTEE (In Full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Rosenberg PO Box 317 Randolph, MA 02368	Dunkin' Donuts, Inc.	07/15/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 600.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Don Salisbury 816 East Whittier Boulevard La Habra, CA 90631	El Cholo Restaurants	07/26/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 300.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Andrew C Scruggs 405 Shelbyville Road Knoxville, TN 37922		07/06/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)		Occupation Aggregate Year To Date > \$ 300.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eddie Sheldrake 2009 Las Lomas Lane Fullerton, CA 92633	Polly's Inc	07/26/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)		Occupation Restaurateur Aggregate Year To Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional) .....> 1800.00

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	Of
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NAME OF COMMITTEE (In full)  
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Sloms 7985 Santa Monica Boulevard Los Angeles, CA 90046	Mimis Cafe	07/26/93	100.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1100.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
✓ Father L Snyder 2706 Bayshore Drive Newport Beach, CA 92663	In-N-Out Burgers Inc.	07/26/93	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
✓ Marcus Zanner 3325 South Othello Street Seattle, WA 98118	South Sound Red Robin Inc.	07/19/93	300.00
Receipt for: <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/>   <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 300.00		

SUBTOTAL of Receipts This Page (optional) .....> 1400.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

9 OF 9  
FOR LINE NUMBER  
11a(i)

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee C0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Gorman 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$50.00 (\$25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 350.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Thoren 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$41.66 (\$20.83 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 291.62	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elaine Graham 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$47.60 (\$23.80 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 261.80	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Culpepper 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 282.49	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JoAnn Emerson 1200 17th Street, NW Washington, DC 20036	National Restaurant Association	semi-monthly payroll deduction	\$43.46 (\$21.73 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 282.49	
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)

\$ 226.18

TOTAL This Period (last page this line number only)

\$11,406.18

0  
3  
0  
3  
0  
5  
0  
3  
0  
3  
0  
3

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee C0000 3764

2 3 0 3 8 5 6 3 3 3 9

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
1st American Bank 740 15th Street, NW Washington, DC 20036	Interest received on investment--money market checking account	7/31/93	\$85.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
1st American Bank 11751 Pinnacle Drive McLean, VA 22102-3833	Interest received on cash equivalent fund	7/31/93	\$113.78
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
	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 > \$	

SUBTOTAL of Receipts This Page (optional) .....	\$199.70
TOTAL This Period (last page this line number only) .....	\$199.70

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

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

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

8/12/93

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records  
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

D.A.Q.  
 PREPARER

8/13/93  
 DATE PREPARED

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