

**NATIONAL
RESTAURANT
ASSOCIATION**

1200 Seventeenth Street NW
Washington DC 20036-3997
Toll-free: (800) 474-5156
Local: (202) 331-5900
Fax: (202) 979-5374
Web site: www.restaurant.org

**POLITICAL ACTION
COMMITTEE**

June 7, 2000

Reports Analysis Division
Federal Election Commission
Washington, DC 20463

Identification Number: C00003764

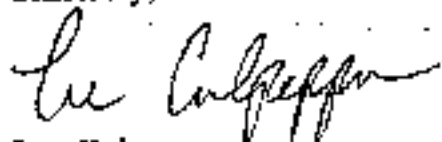
Reference: Amended May 2000 Report

To Whom it May Concern:

It has come to our attention that a disbursement in the amount of \$2,500 dated 4/4/00 was omitted from our May 2000 report.

Enclosed, please find the amended report from April 2000. If you have any questions, please contact Ann Williams in my office at 202/331-5907.

Sincerely,



Lee Culpepper
Treasurer

RECEIVED
FEC MAIL ROOM
2000 JUN 14 A 10:13

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 14 A 10:13

USE FEC MAILING LABEL
OR
TYPE OR PRINT

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

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 04/01/00 through 04/30/00		
6. (a) Cash on Hand January 1, 2000		\$ 224,537.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 139,332.39	
(c) Total Receipts (from Line 19)	\$ 25,582.88	\$ 57,887.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	\$ 164,926.27	\$ 282,425.27
7. Total Disbursements (from Line 30)	\$ 16,378.13	\$ 132,878.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 149,547.14	\$ 149,547.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20483 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)	\$ 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 Leo Culpepper	Date 6-7-00
Signature of Treasurer <i>Leo Culpepper</i>	

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE National Restaurant Association Political Action Committee	REPORT COVERING PERIOD		
	FROM	TO	
	04/01/00	04/30/00	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	24,565.00	49,300.00	11(a)(1)
ii. Unitemized	817.88	6,660.47	11(a)(2)
iii. Total	25,382.88	55,960.47	11(a)(3)
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	26,382.88	55,960.47	11(d)
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Probates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	25,592.88	57,887.38	19
20. Total Federal Receipts	25,592.88	57,887.38	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			
c. Total Operating Expenditures	42.00	42.00	21(c)
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	1,860.00	2,860.00	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	1,860.00	2,860.00	28(d)
29. Other Disbursements			
30. Total Disbursements	15,378.13	132,878.13	30
31. Total Federal Disbursements	15,378.13	132,878.13	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	25,382.88	55,960.47	32
33. Total Contribution Refunds (from line 28d)	1,860.00	2,860.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	23,522.88	53,100.47	34
35. Total Federal Operating Expenditures	42.00	42.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures	42.00	42.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

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

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

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

A. Full Name, Mailing Address and ZIP Code Edward Iacino 6211 E. 42nd Avenue Denver, CO 80215	Name of Employer Seattle Fish Company Occupation President	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 1,300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,300.00	
B. Full Name, Mailing Address and ZIP Code William S. Hoppe 5278 Pinhurst Drive Boulder, CO 80301	Name of Employer Tam O'Shanter Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 325.00	
C. Full Name, Mailing Address and ZIP Code Dennis D. Ginther 420 Detroit Street Denver, CO 80206	Name of Employer <i>information requested</i> Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code M. William Gerrard 420 S. 5th Street LaCrosse, WI 54601	Name of Employer Gerrard Realty Corp. Occupation President	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code Anthony Varda 50 Cambridge Road Madison, WI 53704	Name of Employer <i>information requested</i> Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 200.00	
F. Full Name, Mailing Address and ZIP Code Richard Ayers 8225 E. Fairmount Drive Denver, CO 80231-1128	Name of Employer Restaurant Specialist, Inc. Occupation Restaurateur	Date (month, day, year) 04/19/00	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	
G. Full Name, Mailing Address and ZIP Code Richard Ayers 8225 E. Fairmount Drive Denver, CO 80231-1128	Name of Employer Restaurant Specialist, Inc. Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 665.00	

SUBTOTAL of Receipts This Page (optional) **2,890.00**

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 **6**
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 Robert B. Hahn P.O. Box 61497 Denver, CO 80206-8497	Name of Employer Airport Services Inc. Occupation Executive	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 8 325.00	
B. Full Name, Mailing Address and ZIP Code Scott Jones 646 Bryant St Denver, CO 80204-4122	Name of Employer Robinson Dalry, Inc. Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 325.00	
C. Full Name, Mailing Address and ZIP Code Frank W. Bering, Jr. 2531 North 12th Street Grand Junction, CO 81501-8202	Name of Employer G.B. Gladstones Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 200.00	
D. Full Name, Mailing Address and ZIP Code Joe Fassler 1850 N. Central Avenue Phoenix, AZ 85004	Name of Employer ProDina, Inc./a VIAD Corp Occupation Restaurateur	Date (month, day, year) 04/19/00	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 5,000.00	
E. Full Name, Mailing Address and ZIP Code Don Curley 220 Worthington Mall Worthington, OH 43085	Name of Employer Franco's Occupation Restaurateur	Date (month, day, year) 04/19/00	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 > 5 500.00	
F. Full Name, Mailing Address and ZIP Code Ed Novak 1421 Oneida Street Denver, CO 80220	Name of Employer Broker Restaurants Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 1,000.00	
G. Full Name, Mailing Address and ZIP Code John D. Ziegler 7373 South Alton Way Englewood, CO 80112	Name of Employer Jackson's All-American Sports Grills Occupation Restaurateur	Date (month, day, year) 04/19/00	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 > 9 500.00	

SUBTOTAL of Receipts This Page (optional) **7,850.00**

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 6
FOR LINE NUMBER 11 a i

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

<p>A. Full Name, Mailing Address and ZIP Code Larry Griewach 7373 S. Alton Way Denver, CO 80112</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jackson's All American Sports Grille</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 326.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 325.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ron Livesay 5700 Wadsworth By-Pass Arvada, CO 80002</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goodberry's</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Bill McCormick 11837 SW Riverwood Rd. Portland, OR 97219-8453</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer McCormick & Schmick Management Group</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jon D Plamann 7318 Westbourne Madison, WI 53719-5079</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Plamann & Associates</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Michael Goldberg 14200 East Moncrieff Place Suite E Aurora, CO 80011-1604</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Beverage Distributors Corporation</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 325.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 325.00</p>
<p>F. Full Name, Mailing Address and ZIP Code John Guerin 450 25th Street Greeley, CO 80631-7196</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Meadow Gold Dairy</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,300.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 1,300.00</p>
<p>G. Full Name, Mailing Address and ZIP Code David McDougal 1324 A East 17th Avenue Denver, CO 80218-1527</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Dougal's Catering Service/National Caterers Assn.</p> <p>Occupation Restaurateur</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 04/19/00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional) 9,150.00

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 5
FOR LINE NUMBER 11 a 1

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David McDougal 1324 A East 17th Avenue Denver, CO 80218-1527	Dougal's Catering Service/National Caterers Assn.	04/19/00	325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 1,325.00	
Tom Garrett P.O. Box 774199 Steamboat Springs, CO 80477-4199	La Montana Southwestern & Mexican Restaurant	04/18/00	650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 650.00	
Geoff Bailey 801 Corporate Circle Golden, CO 80401-6630	Arby's/The Bailey Company	04/18/00	650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 650.00	
Pete Meersman 430 East 7th Avenue Denver, CO 80203-3800	Colorado Restaurant Association	04/19/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 400.00	
Tom Flanagan 824 Spyglass Circle Louisville, CO 80027-3246	Outback Steakhouse	04/19/00	650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 650.00	
Lea Culver 540 Water St. Prairie du Sac, WI 53678	Culver Franchising System	04/19/00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur	Aggregate Year-to-Date > \$ 200.00	
Karen Kristopell-Parker 7800 E. Hampden Ave. Denver, CO 80231	The Fresh Fish Company	04/19/00	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	

SUBTOTAL of Receipts This Page (optional) **3,375.00**

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 8
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 Matt Larson 3601 W.10th St. Greeley, CO 80634	Name of Employer Stampede Steak Ranch Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 326.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 325.00	
B. Full Name, Mailing Address and ZIP Code Dennis McCann 7952 East Kenyon Drive Denver, CO 80237	Name of Employer information requested Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 650.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 650.00	
C. Full Name, Mailing Address and ZIP Code Diane White 5650 Pecos Street Denver, CO 80221	Name of Employer Auto-Chlor System Occupation Restaurateur	Date (month, day, year) 04/19/00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 325.00	
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):		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):		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):		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):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1,300.00
TOTAL This Period (last page this line number only)	24,585.00

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 Full)
National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Crestar Bank NA Post Office Box 26150 Richmond, VA 23260-6150	Name of Employer Interest Earned	Date (month, day, year) 04/30/00	Amount of Each Receipt this Period 210.00
	Occupation	Aggregate Year-to-Date > \$ 926.91	
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) **210.00**

TOTAL This Period (last page this line number only) **210.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
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
Culberson for Congress P.O. Box 58489 Houston, TX 77256	Culberson, U.S. HOUSE 7th TX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Primary Runoff U.S. House	04/04/00	2,500.00
John Lewis for Congress Committee 1520 Pinehurst Drive, SW Atlanta, GA 30311	John Lewis, U.S. HOUSE 5th GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	2,000.00
Simpson for Congress Box 1541 Boise, ID 83701	Mike Simpson, U.S. HOUSE 2nd ID Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Citizens for Tom Petri Post Office Box 270 Fond du Lac, WI 54936	Tom Petri, U.S. HOUSE 6th WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Jim Davis for Congress P.O. Box 2884 Washington, DC 20013	Jim Davis, U.S. HOUSE 11th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Jefferson Committee 850 Poldras Street Suite 2245 New Orleans, LA 70130	William J. Jefferson, U.S. HOUSE 2nd LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	1,000.00
Bill Thomas Campaign Committee P.O. Box 395 Bakersfield, CA 93302	Bill Thomas, U.S. HOUSE 21st CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	1,000.00
Linder for Congress Post Office Box 942060 Atlanta, GA 31141	John Linder, U.S. HOUSE 4th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Buck McKeon for Congress Post Office Box 2071 Santa Clara, CA 91386	Howard "Buck" McKeon, U.S. HOUSE 25th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00

SUBTOTAL of Disbursements This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Moran for Congress P.O. Box 2518 Alexandria, VA 22301	James P. Moran, U.S. HOUSE 8th VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Walden for Congress Post Office Box 1091 Hood River, OR 97031	Greg Walden, U.S. HOUSE 2nd OR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	1,000.00
Georgians for Isakson 6065 Roswell Rd Atlanta, GA 30309	Johnny Isakson, U.S. HOUSE 6th GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	1,000.00
David Vitter for Congress 2520 Metairie Road Metairie, LA 70001	David Vitter, U.S. HOUSE 1st LA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/12/00	500.00
Christina Howard 1200 17th Street NW Washington, DC 20007	in-kind luncheon contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	676.13 (In-Kind)
Common Sense Leadership PAC P.O. Box 15205 Washington, DC 20003	in-kind luncheon contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	676.13 (Memo In-Kind)

SUBTOTAL of Disbursements This Page (optional)

3,676.13

TOTAL This Period (last page this line number only)

12,676.13

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 28A

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Southern Wine & Spirits of NV 960 United Circle Sparks, NV 89431	Purpose of Disbursement Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 04/26/00	Amount of Each Disbursement This Period 250.00
B. Full Name, Mailing Address and ZIP Code Boca West Club, Inc. P.O. Box 3070 Boca Raton, FL 33431	Purpose of Disbursement Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 04/26/00	Amount of Each Disbursement This Period 1,610.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each 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)

1,860.00

TOTAL This Period (last page this line number only)

1,860.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 1
FOR LINE NUMBER 29

Any information copied from such Reports and Statements may not be 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 Iowa Hospitality Association 8525 Douglas Avenue Suite 47 Des Moines, IA 50322	Purpose of Disbursement Non-federal disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 04/03/00	Amount of Each Disbursement This Period 800.00
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)

800.00

TOTAL This Period (last page this line number only)

800.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 6-14-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>See</i> PREPARER	6-14-00 DATE PREPARED