

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 2	Of 9
	For Line Number 11a(i)	

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
James A Collins PO Box 92092 Los Angeles, CA 90009	Collins Foods International,	06/01/93	1200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 1200.00		

Full Name ,Mailing Address and Zip Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt This Period
Walter Conti Route 611 & 313 Doylestown, PA 18901	Conti Cross Keys Inn	06/07/93	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
J. Craig Dickens 8 River Bend Circle Exeter, NH 03833		06/30/93	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation 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
Brad Etkins 3513 Berlin Turnpike Newington, CT 06111	Ruths Chris Steakhouse	06/23/93	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date> \$ 200.00		

SUBTOTAL of Receipts This Page (optional)> 2500.00

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