

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
441, 5004

Nov 20 3 57 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Restaurant Association PAC	2. FEC IDENTIFICATION NUMBER C 0000 3764
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1200 17th Street, NW	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Washington, DC 20007	

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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/1/95 through 10/31/95		
6. (a) Cash on Hand January 1, 19 95		\$ 42,802.05
(b) Cash on Hand at Beginning of Reporting Period	\$ 139,403.67	
(c) Total Receipts (from Line 19)	\$ 121,643.21	\$ 351,559.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 261,046.88	\$ 394,361.39
7. Total Disbursements (from Line 30)	\$ 39,999.15	\$ 173,313.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 221,047.73	\$ 221,047.73
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 202-218-3420
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 Blaine Z. Graham	Date 11/20/95
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.

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

(revised 1/1/91)

NAME OF COMMITTEE National Restaurant Association PAC		REPORT COVERING PERIOD FROM 10/1/95 TO 10/31/95	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees		68,995.93	238,181.81
i. Itemized (use Schedule A)		44,397.63	82,280.85
ii. Unitemized		113,393.56	320,462.66
iii. Total (add i and ii) >		.00	.00
b. Political Party Committees		7,913.00	29,913.00
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		121,306.56	350,375.66
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.)		336.65	1,183.68
18. Transfers from Nonfederal Account for Joint Activity		.00	.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		121,643.21	351,559.34
20. Total Federal Receipts (subtract line 18 from line 19) >		121,643.21	351,559.34
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		.00	.00
ii. Non-Federal Share		.00	.00
b. Other Federal Operating Expenditures		186.10	1,763.77
c. Total Operating Expenditures (add a i, a ii, and b) >		186.10	1,763.77
22. Transfers to Affiliated/Other Party Committees		.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		39,813.05	171,549.89
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. Individuals/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	.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		39,999.15	173,313.66
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		39,999.15	173,313.66
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		121,306.56	350,375.66
33. Total Contribution Refunds (from line 28d)		.00	.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		121,306.56	350,375.66
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		186.10	1,763.77
36. Offsets to Operating Expenditures (from line 15)		.00	.00
37. Net Operating Expenditures (subtract line 36 from 35) >		186.10	1,763.77

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 1	Of 41
	For Blue Book 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
Wayne F Abele 2156 S. Sterling St. Morganton, NC 28655	Golden Corral Corp.	10/17/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 400.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dominic V Agostino 21 Amory Drive Wheeling, WV 26003	Aladdin Food Management Services, Inc.	10/24/95	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 200.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Alton 735 69th St Mercer Island, WA 98040	Consolidated Restaurants	10/28/95	295.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 795.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gene T Anon 7500 South Tanglewild Drive Raleigh, NC 27612	Golden Corral Corp.	10/10/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

EXAMPLE 1 TRIMMED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 3 of 41 Per line number 11a(1)
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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
Bob Anick 489 Peachtree St., Atlanta, GA 30308	Peasant Restaurants	10/24/95	423.95
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 423.95		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles Anderson 11245 Centaur Wake Forest, NC 27587	Golden Corral Corp.	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Keith Ashby 3010 East Chestnut Ave. Decatur, IL 62521 4535	Swartz Restaurant	10/30/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Ronald Harbee 7001 North Ridge Road Raleigh, NC 27615	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" 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)

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 41
	For Line Number 11a(d)	

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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
An P Barrett 541 Main St. Ringham, MA 02043	Gulley Hatch	10/20/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Jane Bean 834 Central Road Nye Beach, NH 03871	Gulley Hatch	10/26/95	320.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 320.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
E. Laxar Bell 2700 Timberwood Court Raleigh, NC 27613	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Lane H Benedict 22029 - 4th Ave. S.E. Bothell, WA 98021	Anthony's	10/18/95	300.00
Receipt for: <input checked="" 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)>

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 41
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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
Joni Brskebill 1009 Calibre Creek Pkwy Roswell, GA 30076	Longhorn Steaks	10/24/95	141.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 329.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joni Brskebill 1009 Calibre Creek Pkwy Roswell, GA 30076	Longhorn Steaks	10/24/95	188.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 329.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jinny W Britt PO Box 893 Greerwood, SC 29646	Blazers Restaurant	10/17/95	288.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 450.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
For A Brunvand PO Box 20 Waterville Valley, NH 03211	The Snowy Owl	10/26/95	160.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 800.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tor A Brundard PO Box 80 Waterville Valley, NH 03211 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	The Snowey Owl ----- Occupation Restaurateur Aggregate Year To Date: \$ 800.00	10/26/95	640.00
<input checked="" type="checkbox"/> Full Name, Mailing Address and Zip Code Russ Buhar 15 Springvale Avenue Boston, MA 02132 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Data Quest Investigations, Ltd. ----- Occupation President Aggregate Year To Date: \$ 300.00	10/20/95	200.00
<input type="checkbox"/> Full Name, Mailing Address and Zip Code Wayne M Bunting 337 Meadowood Drive Burlington, NC 27215 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Cafe Concepts, Inc. ----- Occupation Restaurateur Aggregate Year To Date: \$ 350.00	10/17/95	350.00
<input type="checkbox"/> Full Name, Mailing Address and Zip Code Bill Burnett 8215 Roswell Rd., #200 Atlanta, GA 30350 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Longhorn Steaks ----- Occupation Restaurateur Aggregate Year To Date: \$ 283.00	10/24/95	283.00

SUBTOTAL of Receipts This Page (optional)

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 4
	For Line Number 11(a)	

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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
Luis Caseres 1204 Druid Knoll Dr. Atlanta, GA 30319	Longhorn Steaks	10/24/95	306.99
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 306.99		

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 \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Campbell 3007 N Shallowford Rd., #5 Charlotte, GA 30341	Longhorn Steaks	10/24/95	471.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 471.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George R Chapdelaine 205 Portland Street Boston, MA 02114	Pizzeria Regina/Be'l Cantu	10/30/95	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		

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

SCHEDES A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 7 of 41
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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 Charland 7908 Tylerton Dr. Raleigh, NC 27613	Golden Corral Corp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Richard C Chase 9817 Gralyn Road Raleigh, NC 27613	Golden Corral Corp.	10/10/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> <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
Peter Christie 15-A Chespike Road Westborough, MA 01581 9775	Massachusetts Restaurant Assn.	10/23/95	1500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Assn. Exec. Aggregate Year To Date \$ 1500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Susan A Cook 18 Mattakesett Ln Norwell, MA 02061	Hampshire House	11/20/95	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)

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s)	Page	Of
for each category of the	8	41
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	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
Lawrence J Corbeil 735 Commercial Street Braintree, MA 02184	Hampshire House	10/20/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Conchiarino 3055 Prosperity Avenue Fairfax, VA 22031 2280	Guest Services	10/24/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> <input 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
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David R Coverl 5511 Rawls Road Tampa, FL 33625	MORRISON'S INC.	10/17/95	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)

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SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 9	Of 41
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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
Michael P Curtin Jr. 631 Lincoln Ave. Falls Church, VA 22046	Dixie Grill	10/13/95	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
Larry Curtis 8235 S.W. Creekside Place Beaverton, OR 97005	Shari's Management Corporation	10/03/95	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General <input checked="" 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
Joseph Curzi, Jr. 18 Kingston Road Waltham, MA 02154	Linco & Laundry Sales, Inc.	10/20/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Sales 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
John Day 2781 Lockmore Drive Raleigh, NC 27608	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 300.00		

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A - ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 10	Of 41
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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
Joseph M DeKosa 1270 Orchard Lane Elm Grove, WI 53122	DeKosa Corporation	10/30/95	1300.33
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation: Restaurateur		Aggregate Year To Date: \$ 2500.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul J Derba One Griffin Way Chelsea, MA 02150	James J. Derba, Inc.	10/26/95	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	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John L Dixon Way 58, North Wilson, NC 27893	Silver Lake Oyster Bar	10/17/95	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
James Dresher 1400 Muirfield Close Bel Air, MD 21015	Garden Corral Corp.	10/10/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation: Restaurateur		Aggregate Year To Date: \$ 250.00	

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

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule(s)	Page	Of
For each category of the	11	41
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	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
Guss Dussin 0175 SW Hancock Street Portland, OR 97201 4299	The Old Spaghetti Factory	10/16/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 1250.00		
Guss Dussin 0175 SW Hancock Street Portland, OR 97201 4299	The Old Spaghetti Factory	10/26/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1250.00		
Van Eure PO Box 6357 Raleigh, NC 27628	The Angus Barn Ltd	10/24/95	188.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 388.00		
Joseph Pasaler Dial Corporate Center Dial Tower Phoenix, AZ 85071 1005	REBECCA, Inc.	10/17/95	175.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 1675.00		

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address 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
Sergio Pavelli 1507 N Dansford Court Marietta, GA 30062	La Grotta	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year To Date: \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ruth Fextel 711 North Broad New Orleans, LA 70119	Ruth Chris Steak House	10/25/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
R. D Fitch 3000 Pearrington Village Pearthington Village, NC 27312	Pearthington House	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurateur Aggregate Year To Date: \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dulie Flik 10 Sound Rd. Rye, NY 10580	Flik International Corp.	10/10/95	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		

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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
Donald A Flood PO Box 1224 Portsmouth, NH 03802 1224	Valley Hatch	10/26/95	160.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 310.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack Porter 2608 East Flamingo Road Las Vegas, NV 89121 5205	Muey's Restaurant & Saloon	10/15/95	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	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steven C Foster 340 Kingston Dr. Muskogee, OK 73099	Golden Corral Corp.	10/11/95	275.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR	Aggregate Year To Date: \$ 275.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ted M Fowler PO Box 29502 Raleigh, NC 27626	Golden Corral Corporation	10/13/95	2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 2500.00	

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NAME OF CONTRIBUTOR (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
Gary B Ghigliotti 156 Drinkwater Road Hampton Falls, NH 03844	Galley Hatch	10/26/95	160.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 160.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary B Ghigliotti 156 Drinkwater Road Hampton Falls, NH 03844	Galley Hatch	10/26/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 360.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Earl Goodson 1130 South 245th Place Seattle, WA 98193	Space Needle Corp.	10/18/95	295.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 295.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Herbert M Gould 9113 NE Juanita Dr. Bellevue, WA 98034	Anthony's RESTAURANT	10/13/95	600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 600.00		

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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
Edward P Grace, III 1275 Wampumock Trail PO Box 276 East Providence, RI 02915	Brighton Creek Steak Houses, Inc.	10/26/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 2500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen P Grenier 18 Elmwood Dr. Stratham, NH 03885	Galley Hatch	10/26/95	320.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 320.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry Griswold 675 Kipling Methuen, MA 02815	Jackson's Hole Sports Grill	10/02/95	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 425.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tommy Maddock 1215 Franklin Rd., Ste. 102H Raleigh, NC 27606	Bojangles	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 350.00		

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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
Ruth K Hall 4214 Orange Forest Dr. Jacksonville, FL 32210	Golden Corral Corp.	10/17/95	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
Harold E Halpern 2926 Riverchase Dr. NW Atlanta, GA 30327		10/29/95	678.31
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date \$ 678.31

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard J Hurwen PO Box 5278 Kansas City, KS 66119	Myron Green Cafeterias, Co.	10/17/95	300.00
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
Greg Hazard 2115 S 56th Street Tacoma, WA 98409	Tony Roma's/Pao West Food	10/13/95	590.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Occupation Restaurateur	Aggregate Year To Date \$ 590.00

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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 Henninger 166 N. Singingwood Street, NO.1 Grange, CA 92669	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
John Hartart PO Box 95 Portsmouth, NH 03801	Galley Hatch	10/26/95	320.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 320.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Hernandez 3065 Piedmont Road Atlanta, GA 30305	California Cafe	10/24/95	271.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 271.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert S Hayward 905 Darfield Drive Raleigh, NC 27615	Golden Corral Emp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 300.00		

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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
Doug R Higdon 2509 Windy Woods Drive Raleigh, NC 27607	Golden Corral Corp.	10/10/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jon Mildereth PO Box 7269 Riford, NH 03246	J.A. Mildereth Co.	10/26/95	800.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 800.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Monks 2707 Hillsboro Street Raleigh, NC 27605	Brownstone Hotel	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dynn B Hubbard P.O. Box 26 Cedar Grove, NC 27231	Golden Corral Corp.	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

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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
Dick Koltronic 4278 Highborn Drive Marietta, GA 30066	America's Fry Chicken	10/24/95	942.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date \$ 942.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeff Iverson P.O. Box 99010 Tacoma, WA 98499	C&I Company	10/11/95	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
David Carter 1018 Andrew Blvd San Antonio, TX 78207	MTC, Inc.	10/19/95	1,500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date \$ 1,500.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pam Karabason 1060 Peachtree Tree Rd. # 390 Atlanta, GA 30305	Buckhead Life Restaurant Group	10/21/95	942.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date \$ 942.00		

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address 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
	Occupation		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year To Date: \$		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Kavanaugh 5036 Eaton Lane Wauwakee, WI 53597	Esquire Club	10/30/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 450.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George T Khoury 171 Spring Street Lexington, MA 02173	Rathern Company	10/20/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurant Supplier 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
Joe Kidder 5583 Fallsbrook Trace Saworth, GA 30101	Longhorn Steaks	10/24/95	305.24
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 305.24		

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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
Bob Kinsey 3837 Evelyn Drive Salt Lake City, UT 84124	Sizzon, Burger King	10/20/95	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 550.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERT KING 1414 Wesley Walk NW Atlanta, GA 30327	Georgia Hospitality & Travel Assn.	10/24/95	236.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Association Executive Aggregate Year To Date: \$ 236.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gerald Kingen 3045 Pentlexoy Way SW Seattle, WA 98136	Happy Guests International	10/18/95	290.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: Restaurateur Aggregate Year To Date: \$ 290.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William C Kozar 213 Loft Lane, Apt. 106 Raleigh, NC 27609	Golden Corral Corp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation: RESTAURANT Aggregate Year To Date: \$ 300.00		

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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
Ralph Labnon 5617 S.E. Foxcross Place Durham, NH 03821	Town & Country Motor Inn	10/26/95	540.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ - 540.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William R Lackey 1533 Newtowne Plaza Statesville, NC 28677	Wag Lackey Supermarkets	10/17/95	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
Gus Ladar 216 N. Hampton Ave. Capital Heights, MD 20743	Wilkins coffee	10/16/95	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
Bruce Lau 15115 Shanrock Ln. Brookfield, WI 53005	Golden Corral Corp.	10/10/95	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 500.00		

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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
Dale Leviolotte 6204 Blossman Toledo, OH 43617	Leviolotte's	10/33/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Phil Lazenby 4421 Singletree Way Adelphi, GA 30101	Rio Bravo Grill	10/24/95	123.95
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 433.95		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jennifer LeMaster Box 4354 Dorsetmouth, OH 45662	Golden Corral	10/10/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Luddy 112 Wheaton Drive Youngville, NC 27586	Captive-Air Systems, Inc.	10/17/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurant Supplier Aggregate Year To Date \$ 1000.00		

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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
Michael Mancuso Watermill Center 800 South Street Waltham, MA 02154	American Express Travel Related Services	10/23/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Ronald S Merino 19859 NH 128th Court Woodinville, WA 98072	Golden Corral Corp.	10/18/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Peter Marks PO Box 6300 Dunstable, MA 02150	Paul W. Marks Company, Inc.	10/20/95	600.00
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
Alfred Mathis Sr. 740 A B1 Ave. Honolulu, HI 96817 8316	Mathis's Restaurant	10/03/95	985.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur	Aggregate Year To Date: \$ 985.00	

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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 Mazurek 7 Ridgewere Trana Atlanta, GA 30328	Carbo's Cafe	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ray McBride 104 Southern Ct. Winchester, KY 40391	Golden Corral Corp.	10/11/95	100.00
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
Ray McBride 104 Southern Ct. Winchester, KY 40391	Golden Corral Corp.	10/23/95	100.00
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
Robert McDevill PO Box 29502 Raleigh, NC 27626	Golden Corral Corp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 300.00		

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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
George McKerran 8215 Howell Rd. #200 Atlanta, GA 30350	Lenghorn Steaks	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bernard McNally PO Box 212 Chillicothe, OH 45601	London Bridge, Inc	10/31/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
G. Dent Miller PO Box 733 Clarendon, NC 28610	Connor Management Co.	10/17/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John K Miller 430 S. Santa Rosa San Antonio, TX 78207	Bill Miller's Bar B.Q.	10/35/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1000.00		

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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
Gary J Mitchell 1234-38 Cambridge Cambridge, MA 02139	SEE RESTAURANT & DELICATESSEN	10/20/95	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
Wayne H Moss 40 Broad St. Boston, MA 02109 1307	EDC Seidman	10/20/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Houston Odon, Jr. 1436 Kenpsville Road Virginia Beach, VA 23460	Golden Currel Comp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General 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
Michael Glendez PO Box 20249 Raleigh, NC 27619	KIM RESTAURANTS, INC.	10/17/95	500.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation RESTAURATEUR Aggregate Year To Date: \$ 500.00		

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address 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
Bert Oatis 108 Pembroke Rd. Greensboro, NC 27408 7510	Tex Shirley's Pancake House Occupation Restaurateur Aggregate Year To Date: \$ 1000.00	10/10/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)			
Mark Oswald 967 King Road NW Atlanta, GA 30342	Liberty House Restaurant Co P Occupation Restaurateur Aggregate Year To Date: \$ 283.00	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)			
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date: \$		
Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Aggregate Year To Date: \$		

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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
Jesse H Parker P.O. Box 1175 Greenwood, SC 29648	Golden Corral Corp.	10/17/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bert Bedowitz P.O. Box 1187 Forest Park, GA 30051	Loughorn Steaks	10/24/95	350.71
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RESTAURTEUR Aggregate Year To Date: \$ 350.71		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joan B Perreault P.O. Box 435 Hilton, NH 03851	Miller Brewing Company	10/26/95	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
Jim L Peterson P.O. Box 1338 Goliad, TX 77963 1338	Pej's Cajitas	10/10/95	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		

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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
H. Howard Davis 217 West Saint Catherine Louisville, KY 40203	Dizzy Whizz Drive In	10/26/95	355.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 365.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Powell PO Box 4308 Wilmington, NC 28406	Shabbelle's	10/17/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles R Preston PO Box 367 Monrover, NC 28613	Master Outlet of America Inc.	10/17/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input 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
Dennis Quaintance PO Box 28226 Greensboro, NC 27439	Quaintance Weaver Inc.	10/17/95	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		

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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
Samuel K Rawls 1050 Wake Forest Road Raleigh, NC 27609	Peg Sam Foods, Inc.	10/17/95	150.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation Restaurateur		Aggregate Year To Date: \$ 350.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Keardon 3194 Custer Lake Dr. Marietta, GA 30064	Shillings on the Square	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation Restaurateur		Aggregate Year To Date: \$ 283.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Regas 1144 Wellington Drive Knoxville, TN 37919	Regas Brothers, Inc.	10/17/95	175.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation Restaurateur		Aggregate Year To Date: \$ 675.00	

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eric Reynolds 2500 Calvert St., NW Washington, DC 20008	Omni Shoreham Hotel	10/16/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Occupation Restaurateur		Aggregate Year To Date: \$ 350.00	

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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
Richard E Rivers 8215 Roswell Road Building 200 Atlanta, GA 30350	Longhorn Steaks	10/24/95	942.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 3442.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Irwin C Roberts 1001 Harvey Street Raleigh, NC 27607	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" 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
Jesse B Robinson PO box 4174 Chapel Hill, NC 27515	Golden Corral Corp.	10/10/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Doc W Rogers 5986 Financial Drive, Box 6459 Norcross, GA 30091	Waffle House, Inc.	10/24/95	471.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 471.00		

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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
Bob Russell 60 Whitlock Place, Suite F Marietta, GA 30064	Ernie's Restaurant Group	10/24/95	236.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 236.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim E Sabiston PO Box 2856 Rocky Mount, NC 27801	Golden Corral Corp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Anthony Scarponi 370 Lafayette Rd. Dorchester, MA 01901	Galley Hatch	10/26/95	160.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 210.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred J Schaack 724 Lafayette Road PO Box 232 Hampton, NH 03842	Hampton Beach Caslos Properties	10/26/95	800.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 800.00		

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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
Don Sheldrake 14325 Isell Road Santa Fe Springs, CA 90670	S.D.D. Investment Company	10/06/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ralph Shere 2870 Pharr Court South Atlanta, GA 30305	Coach & Six (American)	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steven B Smith 120 W. Vintage Dr. Wauquesha, WI 53092	Golden Corral Corp.	10/10/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
Jeffrey Sparks 208 Ferry Pl Savannah, GA 31312	Golden Corral Corp.	10/13/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 1000.00		

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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
Teena L Strickland P.O. Box 19903 Jacksonville, FL 32249	Bonus Mar-13-12-w/ Grill	10/17/95	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
Gene SULLIVAN 900 Boylston St. Boston, MA 02115	Massachusetts Convention Center	10/23/95	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary General <input checked="" 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
Bill Swearingen 270 West Peachtree Ferry Rd Atlanta, GA 30305	The Abbey, The Mansion	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry Tate 8436 Framingham Ct. Raleigh, NC 27615	Golden Corral	10/20/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 400.00		

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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
Mark Thomas 505 Avignon Court Atlanta, GA 30350	Longhorn Steaks	10/24/95	283.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 283.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stuart Thompson P.O. Box 155 North Andover, MA 01845	Thompson Consulting	10/20/95	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		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard A. Urquhart, III 312 Oakwood Ave. Raleigh, NC 27601	Golden Corral Corp.	10/18/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Glenn Wiers 144 Beverly Road NE Atlanta, GA 30309	Houlihan's	10/24/95	424.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date: \$ 424.00		

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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
Alan Wasserman 2300 Lockbourne Road Columbus, OH 43207	N. Wasserman & Sons, Inc.	10/06/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input 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 Weber 106 Yeater Oaks Way East HF Greensboro, NC 27455 3133	OK! Brian's Corporation	10/17/95	525.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 525.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul A Weber 5503 Wingfoot Dr. Raleigh, NC 27615	Golden Corral Corp.	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <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
Diana Wang Ng 3800 NC. 85 South Hillsborough, NC 27278	Golden Corral Corp.	10/10/95	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		

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	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
Jacqueline White 88 Steiner Avenue Gettysburg, PA 17325	Debbin House	10/31/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 350.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Shannon White 1517 N. Granty Kansas City, MO 64151	Golden Corral	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary General <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
Peter White 1038 NW 59th Ave. Gainesville, FL 32653	Loughorn STEAKS	10/24/95	305.24
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 305.24		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Leith Wicker 1105 Winterwind Pl Raleigh, NC 27615	Regus Barn	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date \$ 350.00		

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

SCHEDULE A - INCOME RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	Page 39	Of 41
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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
T. Jerry Williams PO Box 6528 Raleigh, NC 27628	North Carolina Restaurant Assn.	10/27/95	400.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Association Exec. Aggregate Year To Date > \$ 400.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jerry Mordsworth PO Box 2856 Rocky Mount, NC 27802	MBM Corporation	10/10/95	2000.00
Receipt for: <input checked="" type="checkbox"/> Primary General <input checked="" type="checkbox"/> Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 2000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steve A Mordsworth PO Box 2856 Rocky Mount, NC 27802 2856	MBM Corporation	10/10/95	2000.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 2000.00		

Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peggy Wyatt 2204 Landings Way Raleigh, NC 27615	National Scale & Equipment Company, Inc.	10/17/95	350.00
Receipt for: <input checked="" type="checkbox"/> Primary General Other (specify)	Occupation Restaurateur Aggregate Year To Date > \$ 350.00		

SUBTOTAL of Receipts This Page (optional) >

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 40	Cf 41
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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
Frances H Yager 605 Dauphin St. Enterprise, AL 36330	Gelben Corp (A)	10/10/95	300.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 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
Richard Yates 8 E. Cota Street Santa Barbara, CA 93101	Palace Cafe	10/31/95	200.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> 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
William H Zeff, Jr. Route 16B Jackson, NH 03846	Christina Farm Inn	10/26/95	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Occupation Restaurateur	Aggregate Year To Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

National Restaurant Association Political Action Cmte. C DDDD 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Elaine Z. Graham Route 2, Box 66D Lovettsville, VA 22080	National Restaurant Association	10/31/95	\$123.34
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive Aggregate Year-to-Date > \$ 916.40		
B. Full Name, Mailing Address and ZIP Code Don Thoren 5340 Holmes Run Parkway, #305 Alexandria, VA 22304	National Restaurant Association	10/31/95	\$41.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive Aggregate Year-to-Date > \$ 395.96		
C. Full Name, Mailing Address and ZIP Code Patti Stinger 115 South Patrick Street Alexandria, VA 22304	National Restaurant Association	10/31/95	\$43.48
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive Aggregate Year-to-Date > \$ 391.32		
D. Full Name, Mailing Address and ZIP Code Lee Culpepper 141 South Pickett Street Alexandria, VA 22304	National Restaurant Association	10/31/95	\$43.48
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive Aggregate Year-to-Date > \$ 391.32		
E. Full Name, Mailing Address and ZIP Code Christina Howard 9700 Chilcott Manor Way Vienna, VA 22181	National Restaurant Association	10/31/95	\$60.56
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Association Executive Aggregate Year-to-Date > \$ 371.14		
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)

TOTAL This Period (last page this line number only)

\$68,995.93

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC C 0000 3764

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Outback Steakhouse, PAC 550 N Reno St, Ste., 204 Tampa, FL 33609	PAC	10/24	1,413.00
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
Unigate Rests. Good Gov't Fund 3115 Weston Road LBT Dallas, TX 75225	PAC	10/24	1,500.00
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
Sizzler Int'l Good Gov't Fund 12655 W Jefferson Blvd Los Angeles, CA 90066	PAC	10/30	5,000.00
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)	
TOTAL This Period (last page this line number only)	7,913.00

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 C 0000 3764

A. Full Name, Mailing Address and ZIP Code Crestar NA P.O. Box 26150 Richmond, VA 23260	Name of Employer interest earned on cash equivalent fund	Date (month, day, year) 10/31/95	Amount of Each Receipt this Period 335.64
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
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)
TOTAL This Period (last page this line number only) 335.64

9 9 3 0 0 8 3 1 3 4

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21 (b)

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC C 0000 3764

A. 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
American Express 260 Vesey Street New York, NY 10285	credit card fees	10/31/95	186.10
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)

TOTAL This Period (last page this line number only)

186.10

5
3
1
3
2
8
0
0
3
0
3
0
3
9

SCHEDULE B ITEMIZED DISBURSEMENTS

Use separate schedule(s)	Page	Of
for each category of the	1	6
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Ney for Congress PO Box 499 St. Clairsville, OH 43950-	Cont. to Bob Ney (OH-18) ----- Disbursement for: P Primary General -- - - - - Other (specify)	10/11/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Smith for US Senate 2188 Twin Lake Dr. New Durham, NH 03855-	Cont. to Bob Smith (NH-5) ----- Disbursement for: P Primary General -- - - - - Other (specify)	10/31/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Neumann 3204 Washington Avenue Racine, WI 53405-	Cont. to Mark Neumann (WI-1) ----- Disbursement for: P Primary General -- - - - - Other (specify)	10/31/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Congress Committee P.O. Box 8534 Rolling Meadows, IL 60008-	Cont. to Phil Crane (IL-8) ----- Disbursement for: P Primary General -- - - - - Other (specify)	10/11/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Clay Shaw 2929 East Commercial Blvd. Suite 409 Fort Lauderdale, FL 33308-	Cont. to Clay Shaw (FL-22) ----- Disbursement for: P Primary General -- - - - - Other (specify)	10/11/95	2000.00

SUBTOTAL of Disbursements This Page (optional).....>

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 6
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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Major Owens P.O. Box 2265 Brooklyn, NY 11202-	Cont. to Major OWENS (NY-11) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General - - - - - <input type="checkbox"/> Other (specify)	10/30/95	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mark Foley PO Box 19536 West Palm Beach, FL 33416-	Cont. to Mark Foley (FL-16) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General - - - - - <input type="checkbox"/> Other (specify)	10/31/95	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Sam Johnson PO Box 516145 Dallas, TX 75251-	Cont. to Sam Johnson (TX-3) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General - - - - - <input type="checkbox"/> Other (specify)	10/11/95	3000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gordon Smith For U.S. Senate 5285 SW Meadows Road Suite 181 Lake Oswego, OR 97035-	Cont. to Gordon SMITH (WA-8) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Special</i>	10/11/95	5000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hastings for Congress Cmte PO Box 2926 Pasco, WA 99302-	Cont. to "Doc" Hastings (WA-4) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General - - - - - <input type="checkbox"/> Other (specify)	10/11/95	1000.00

SUBTOTAL of Disbursements This Page (optional) _____

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 3	Of 6
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Woodlars Supporting Buyer for Congress PO Box 712 Monticello, LA 71960-	Cont. to Steve Buyer (IN-31)	10/11/95	500.00
	Disbursement for: P Primary General		
	Other (specify):		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jerry Solomon for Congress Committee 285 Broadway, Gaslight Square Saratoga Springs, NY 12866-	Cont. to Jerry Solomon (NY-22)	10/11/95	2000.00
	Disbursement for: P Primary General		
	Other (specify):		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Doolittle for Congress 220, Rocklin Road #5A Rocklin, CA 95677-	Cont. to Doolittle (CA-41)	10/11/95	1000.00
	Disbursement for: P Primary General		
	Other (specify):		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lincoln Diaz-Balart for Congress Cite. 2737 NW 41st St., #131 Miami, FL 33178-	Cont. to Diaz-Balart (FL-21)	10/11/95	1000.00
	Disbursement for: P Primary General		
	Other (specify):		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McDonnell Senate Cmt. '96 P.O. Box 1496 Louisville, KY 40201-	Cont. to Mitch McDonnell (KY-S)	10/11/95	3000.00
	Disbursement for: P Primary General		
	Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....>

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Crapo for Congress Cante. 1171 West State Street Boise, ID 83702-	Cont. to Mike Crapo (ID-2) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/31/95	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kethercutt for Congress PO Box 1925 Spokane, WA 99210-	Cont. to Kethercutt (WA-5) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/11/95	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peterson for Congress 362 Cypress Rd. Saint Cloud, MN 56303-	Cont. to C. Peterson (MN-7) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/31/95	500.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Randy Tate for Congress 33743 9th Avenue South Federal Way, WA 98003-	Cont. to Randy Tate (WA-9) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/11/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Red Hot & Blue Express 3314 Wilson Blvd Arlington, VA 22201-	Cont. to Greg Laughlin (TX-14) <i>RECEIVED</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	10/31/95	813.05 <i>(IN-KIND)</i>

SUBTOTAL of Disbursements This Page (optional).....>

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

SCHEDULE B ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	Page 5	Of 6
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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rick White for Congress PO Box 8156 Kirkland, WA 98054-	Cont. to Rick White (WA-1) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/11/95	2000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
 	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)		

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rich Sybert for Congress CELO, Box 8572 Chabagosa, CA 91372-	Cont. to Rich Sybert (CA-24) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/23/95	1000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Campbell for US House 3000 Sand Hill Road Bldg. 3 Rm 143 Menlo Park, CA 94025-	Cont. to Tom Campbell (CA-5) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/11/95	5000.00

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wally Herger for Congress Calif P.O. Box 2223 Marysville, CA 95901-	Cont. to Wally Herger (CA-2) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	10/31/95	500.00

SUBTOTAL of Disbursements This Page (optional)

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 6	of 6
	For Line Number 23	

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NAME OF COMMITTEE (In Full)
 National Restaurant Association PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Eisen For Congress P.O. Box 387 Cadott, WI 54727-	Cont. to Dave Eisen (WI-7)		2000.00
	Disbursement for: (P) Primary (General)		
	Other (specify)	10/23/95	

9 5 0 3 0 0 8 3 1 0 1

SUBTOTAL of Disbursements This Page (optional).....>

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