

HAND DELIVERED

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

JUL 18 4 41 PM '97

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		
CITY, STATE and ZIP CODE Washington, DC 20036		

3. This committee has qualified as a multicandidate committee. (See FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report proceeding _____
(Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>06/01/97</u> through <u>06/30/97</u>		
8. (a) Cash on Hand January 1, 1997		\$ 57,460.56
(b) Cash on Hand at Beginning of Reporting Period.....	\$ 162,957.56	
(c) Total Receipts (from line 19).....	\$ 24,215.90	\$ 238,876.69
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B).....	\$ 187,173.46	\$ 296,337.25
7. Total Disbursements (from Line 30).....	\$ 32,046.90	\$ 141,310.69
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 8(d))..	\$ 155,126.56	\$ 155,126.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	

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

Type or Print Name Of Treasurer

Elaine Z. Graham

Signature of Treasurer

Date

7/20/97

NOTE: Submission of false, untruthful, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

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FEC FORM 3X

(Revised 8/93)

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: 06/01/97	TO: 06/30/97
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	21,044.44	183,306.04
ii. Unitemized.....	1,828.66	31,305.00
iii. Total.....(add i and ii) >	22,873.10	214,611.04
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	1,000.00	18,000.00
d. Total Contributions.....(add aii, b and c) >	23,873.10	232,611.04
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5,000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	342.80	1,265.65
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	24,215.90	238,876.69
20. Total Federal Receipts.....(subtract line 16 from line 19) >	24,215.90	238,876.69
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	13,900.00	15,168.45
c. Total Operating Expenditures.....(Add aii, and b) >	13,900.00	15,168.45
22. Contributions to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18,146.90	125,717.24
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a)(H) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees.....	0.00	325.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a, b, and c) >	0.00	325.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	32,046.90	141,210.69
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30) >	32,046.90	141,210.69
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	23,873.10	232,611.04
33. Total Contribution Refunds (from line 28d).....	0.00	325.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	23,873.10	232,286.04
35. Total Federal Operating Expenditures.....(add 21 a i and 21 b) >	13,900.00	15,168.45
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	13,900.00	15,168.45

SCHEDULE A

ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Stephen E. Elmont, YMP 14123 Denver West Pkwy. Golden, CO 80401	Name of Employer Boston Market, Inc.	Date (Month day, Year) 06/02/97	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 600.00		
B. Full Name, Mailing Address and Zip Code David McDougall 1324 A East 17th Avenue Denver, CO 80218	Name of Employer Dougal's Catering Service	Date (Month day, Year) 06/04/97	Amount of Each Receipt this Period 1,000.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
C. Full Name, Mailing Address and Zip Code Chad Treaster 1200 17th Street N.W Washington, DC 20036	Name of Employer National Restaurant Association	Date (Month day, Year) 06/04/97	Amount of Each Receipt this Period 500.00
	Occupation Association Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
D. Full Name, Mailing Address and Zip Code W L Pannill 209 E. Main Street Martinsville, VA 24112	Name of Employer Golden Corral Corp.	Date (Month day, Year) 06/06/97	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
E. Full Name, Mailing Address and Zip Code Tom Kelley 1019 Madison Avenue San Diego, CA 92116	Name of Employer Concept Hospitality Group	Date (Month day, Year) 06/12/97	Amount of Each Receipt this Period 500.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
F. Full Name, Mailing Address and Zip Code Robert Borchhoff P.O. Box 1006 Houston, TX 77063	Name of Employer Epic Restaurants, Inc.	Date (Month day, Year) 06/12/97	Amount of Each Receipt this Period 5,000.00
	Occupation Restaurateur		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 5,000.00		
G. Full Name, Mailing Address and Zip Code Stephen J Caldeira 1008 North Royal Street Alexandria, VA 22314	Name of Employer National Restaurant Association	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 111.12
	Occupation Association Executive	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 277.80		(\$55.56 Semimonth)
SUB TOTAL of Receipts This Page (Optional)>			8,111.12
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

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Elaine Graham Route 2, Box 66D Lovettsville, VA 22080	Name of Employer National Restaurant Association	Date (Month day, Year)	Amount of Each Receipt this Period 200.00 (\$100.00 Semimonth)
	Occupation Association Executive	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,200.00		
B. Full Name, Mailing Address and Zip Code Donald Thoren 5340 Holmes Run Parkway #305 Alexandria, VA 22304	Name of Employer National Restaurant Association	Date (Month day, Year)	Amount of Each Receipt this Period 41.66 (\$20.83 Semimonth)
	Occupation Association Executive	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 229.13		
C. Full Name, Mailing Address and Zip Code Larry Forth Jr. 1616 West Abingdon Drive #202 Alexandria, VA 22314	Name of Employer National Restaurant Association	Date (Month day, Year)	Amount of Each Receipt this Period 41.66 (\$20.83 Semimonth)
	Occupation Association Executive	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 229.13		
D. Full Name, Mailing Address and Zip Code C. Dennis Scott 9171 Towne Centre Dr., #575 San Diego, CA 92122	Name of Employer Buffets, Inc.	Date (Month day, Year) 06/16/97	Amount of Each Receipt this Period 5,000.00
	Occupation restaurateur	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 5,000.00		
E. Full Name, Mailing Address and Zip Code Ron Livesay 6772 Xenon Drive Arvada, CO 80004-2229	Name of Employer Goodberry's	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 900.00
	Occupation Restaurateur	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
F. Full Name, Mailing Address and Zip Code Horace Divine 7555 Elkhorn Mountain Littleton, CO 80127	Name of Employer University of Denver	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 400.00
	Occupation Restaurateur	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 400.00		
G. Full Name, Mailing Address and Zip Code Reid Pasko 1630 -8th Street Golden, CO 80401	Name of Employer Briarwood Inn	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 1,000.00
	Occupation restaurateur	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		

SLIP TOTAL of Receipts This Page (Optional).....>	7,583.32
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

A. Full Name, Mailing Address and Zip Code Larry N. Forehand 1135 Edgebrook Drive Houston, TX 77034	Name of Employer Casa Ole Restaurants, Inc.	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 2,500.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 2,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Kristi Forehand 1135 Edgebrook Dr Houston, TX 77034-1803	Name of Employer Casa Ole', Inc.	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 2,500.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 2,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Robert B. Hahn 1201 South Parker Rd. Ste.104 Post Office Box 61497 Denver, CO 80231-2154	Name of Employer Airport Services Incorporated	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 100.00
	Occupation Executive	Aggregate Year-to-date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Richard Ayers 8225 E. Fairmount Drive Denver, CO 80231	Name of Employer Restaurant Specialist, Inc.	Date (Month day, Year) 06/30/97	Amount of Each Receipt this Period 250.00
	Occupation Restaurateur	Aggregate Year-to-date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
SUB TOTAL of Receipts This Page (Optional).....>			5,350.00
TOTAL this Period (Last page this line number only).....>			21,044.44

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in full)
National Restaurant Association PAC

<p>A. Full Name, Mailing Address and Zip Code Hornel Foods Political Action Committee 1st Hornel Place Austin, MN 55912 3680</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 06/05/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>B. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>C. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>D. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>E. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>F. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>G. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		

<p>SUB TOTAL of Receipts This Page (Optional).....></p>	<p>1,000.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>	<p>1,000.00</p>

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 PAC

<p>A. Full Name, Mailing Address and Zip Code Crestar Bank NA Crestar Bank NA Post Office Box 26150 Richmond, VA 23260</p>	<p>Name of Employer Interest Earned</p> <p>Occupation</p>	<p>Date (Month day, Year) 06/30/97</p>	<p>Amount of Each Receipt this Period 342.80</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,263.65</p>		
<p>B. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>C. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>D. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>E. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>F. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>G. Full Name, Mailing Address and Zip Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>342.80</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p>342.80</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		21B

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NAME OF COMMITTEE (in Full)
 National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Wirthlin Worldwide 1363 Beverly Road McLean, VA 22101	Purpose of Disbursement Research Survey	Date (Month day, Year) 06/10/97	Amount of Each Disb. this Period 13,900.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		

SUB TOTAL of Disbursements this page (Optional)..... > 13,900.00

TOTAL this Period (Last page this line number only)..... > 13,900.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Boyd for Congress Post Office Box 15703 Tallahassee, FL 32317	Allan Boyd, U.S. HOUSE 2nd FL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/30/97	1,000.00
Combast Congressional Committie Post Office Box 10667 Lubbock, TX 79408	Larry Combast, U.S. HOUSE 19th TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/30/97	1,000.00
Lauch Faircloth for Senate 3800 Barrett Drive Suite 301 Raleigh, NC 27609	Lauch Faircloth, U.S. SENATE NC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/30/97	1,000.00
Friends of Newt Gingrich 1085 Holcomb Bridge Road Suite 190 A Roswell, GA 30076	Newt Gingrich, U.S. HOUSE 6th GA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/30/97	1,000.00
Nebraskans for Hagel 1125 South 103 Street Post Office Box 241497 Omaha, NE 68124	Chuck Hagel, U.S. SENATE NE Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '96 Debt Retirement	06/18/97	1,000.00
Ruben Hinojosa for Congress Post Office Box 1075 Mercedes, TX 78570	Ruben Hinojosa, U.S. HOUSE 15th TX Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/12/97	1,000.00
Hulshof for Congress Post Office Box 1621 Columbia, MO 65205	Kenny Hulshof, U.S. HOUSE 9th MO Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/30/97	500.00
Chris John for Congress, Inc. Post Office Box 971 Crowley, LA 70527-0971	Chris John, U.S. HOUSE 7th LA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/05/97	2,000.00
Re-Elect Nancy Johnson to Congress Post Office Box 1986 New Britain, CT 06050	Nancy L. Johnson, U.S. HOUSE 6th CT Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/16/97	1,000.00

SUB TOTAL of Disbursements this page (Optional).....> 9,500.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	2
FOR LINE NUMBER		23

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC

A. Full Name, Mailing Address and Zip Code Citizens for Kasich 2021 East Dublin - Granville Road #215 Columbus, OH 43229	Purpose of Disbursement John R. Kasich, U.S. HOUSE 12th OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/10/97	Amount of Each Disb. this Period 1,400.00
B. Full Name, Mailing Address and Zip Code Committee to Elect Mike McIntyre P.O. Box 1 Lumberton, NC 28358	Purpose of Disbursement Mike McIntyre, U.S. HOUSE 7th NC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Pickering for Congress Post Office Box 6440 Laurel, MS 39441	Purpose of Disbursement Clay Pickering, U.S. HOUSE 3rd MS Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 500.00
D. Full Name, Mailing Address and Zip Code Pryce for Congress 340 East Gay Street Columbus, OH 43215	Purpose of Disbursement Deborah Pryce, U.S. HOUSE 15th OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 2,500.00
E. Full Name, Mailing Address and Zip Code Red Hot & Blue 1600 Wilson Blvd Suite 704 Arlington, VA 22209	Purpose of Disbursement catered reception for Bill Redmond (NM-03) Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/10/97	Amount of Each Disb. this Period 746.90 (In-Kind)
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 Disb. this Period
G. Full Name, Mailing Address and Zip Code Volunteers for Shimkus 504 Summer Blvd Collinsville, IL 62234	Purpose of Disbursement John Shimkus, 20th IL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 500.00
H. Full Name, Mailing Address and Zip Code Wes Watkins for Congress Box WW Stillwater, OK 74076	Purpose of Disbursement Wes Watkins, U.S. HOUSE 3rd OK Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 1,000.00
I. Full Name, Mailing Address and Zip Code Wynn for Congress Post Office Box 5323 Capital Heights, MD 20791	Purpose of Disbursement Albert R. Wynn, U.S. HOUSE 4th MD Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 06/30/97	Amount of Each Disb. this Period 1,000.00

SUB TOTAL of Disbursements this page (Optional).....>	8,646.90
TOTAL this Period (Last page this line number only).....>	18,146.90

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

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

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PREPARER

7-20-97

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