

2011 JUL 25 AM 11:47

FEC  
FORM 3XREPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

K - V A - T F O O D S T O R E S , I N C F O O D P A C

ADDRESS (number and street)

P O B O X 1 1 5 8

Check if different  
than previously  
reported. (ACC)

A B I N G D O N

V A

2 4 2 1 2 - 1 1 5 8

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 3 3 7 9 6 4

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
0 1 0 1 2 0 1 1

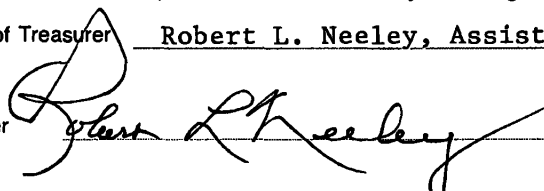
through

M M / D D / Y Y Y Y  
0 6 3 0 2 0 1 1

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 Robert L. Neeley, Assistant Treasurer

Signature of Treasurer



Date

M M / D D / Y Y Y Y  
0 7 1 9 2 0 1 1

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

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

K-VA-T Food Stores, Inc. FOODPAC

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2011

To:

MM / DD / YYYY  
06 / 30 / 2011

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	<div>2011</div>	<div>2362628</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>2362628</div>	
(c) Total Receipts (from Line 19) .....	<div>228500</div>	<div>228500</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>2591128</div>	<div>2591128</div>
7. Total Disbursements (from Line 31).....	<div>35000</div>	<div>35000</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>2556128</div>	<div>2556128</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>00</div>	



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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

K-VA-T Food Stores, Inc. FOODPAC

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2011

To:

MM / DD / YYYY  
06 / 30 / 2011

## **I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

### 11. Contributions (other than loans) From:

#### (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

7,800.00

7,800.00

(ii) Unitemized.....

1,505.00

1,505.00

(iii) TOTAL (add  
Lines 11(a)(i) and (ii)).....▶

2,285.00

2,285.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

2,285.00

2,285.00

### 12. Transfers From Affiliated/Other Party Committees.....

### 13. All Loans Received.....

### 14. Loan Repayments Received.....

### 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

### 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

### 17. Other Federal Receipts (Dividends, Interest, etc.).....

### 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account  
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

### 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

2,285.00

2,285.00

### 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

2,285.00

2,285.00



**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-**  
**penditures**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

2,285,000
00
2,285,000
1,000,000
00
1,000,000

2,285,000
00
2,285,000
1,000,000
00
1,000,000

11030640172

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 1  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

K-VA-T Food Stores, Inc. FOODPAC

Full Name (Last, First, Middle Initial)

A. Jones, Leslie J.

Mailing Address

7882 Scenic Oaks Road

City

Knoxville

State

TN

Zip Code

37938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

Store Oper Ex VP Knox Div

Receipt For:

☐ Primary

☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

2,600.00

Date of Receipt

06 / 29 / 2011

Amount of Each Receipt this Period

1,300.00

Full Name (Last, First, Middle Initial)

B. McSwain, Leslie R.

Mailing Address

2036 Queensbury Ct.

City

Kingsport

State

TN

Zip Code

37660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

District Manager

Receipt For:

☐ Primary

☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

2,600.00

Date of Receipt

06 / 29 / 2011

Amount of Each Receipt this Period

1,300.00

Full Name (Last, First, Middle Initial)

C. Widener, Paul H.

Mailing Address

16010 Brumley Gap Road

City

Abingdon

State

VA

Zip Code

24210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

Information Systems VP

Receipt For:

☐ Primary

☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

2,600.00

Date of Receipt

06 / 29 / 2011

Amount of Each Receipt this Period

1,300.00

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

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

7,800.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

K-VA-T Food Stores, Inc. FOODPAC

Full Name (Last, First, Middle Initial)

A. Bureau of Ethics and Campaign Finance  
Tennessee Registry of Election Finance

Mailing Address

404 James Robertson Parkway, Suite 104

City

State

Zip Code

Nashville

TN

37243

Purpose of Disbursement

Tennessee Annual PAC Registration Fee

Candidate Name

N/A

Office Sought:

☐ House

☐ Senate

☐ President

N/A

State:

District:

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

Tenn Annual PAC Registration Fee

Date of Disbursement

MM / DD / YYYY  
01 / 14 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

1000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

K-VA-T Food Stores, Inc. FOODPAC

Full Name (Last, First, Middle Initial)

A.

Morgan Griffith for Congress

Mailing Address

P.O. Box 361

City

State

Zip Code

Christiansburg

VA

24068-0361

Purpose of Disbursement

Campaign Fund-Raising Reception Federal Candidate

Candidate Name

Morgan Griffith

Office Sought:

☒

House

☐

Senate

☐

President

State: VA

District: 9th

Disbursement For:

☐

Primary

☐

General

☒

Other (specify) ▼

Contribution to Campaign

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2011

Amount of Each Disbursement this Period

2500.00

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2500.00



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/20/11
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
Jr 10 PREPARER	7/25/11 DATE PREPARED