

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2008 DEC -2 PM 12: 24
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

K-I-V-A-I-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 -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 0 0 3 3 7 9 6 4

3. IS THIS REPORT ☒ NEW (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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 1 1 / 0 4 / 2 0 0 8 in the State of KY V A TN

5. Covering Period 1 0 / 0 1 / 2 0 0 8 through 1 1 / 2 4 / 2 0 0 8

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

Robert L. Neeley

Date

1 1 / 2 4 / 2 0 0 8

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

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FEC FORM 3X
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 1 0 / 0 1 / 2 0 0 8 To: MM / DD / YYYY 1 1 / 2 4 / 2 0 0 8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYYYY 2 0 0 8		2 3 7 6 2 7 0
(b) Cash on Hand at Beginning of Reporting Period.....	2 1 6 5 2 7 0	
(c) Total Receipts (from Line 19)	1 6 7 5 0 0	4 9 6 5 0 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2 3 3 2 7 7 0	2 8 7 2 7 7 0
7. Total Disbursements (from Line 31)	4 0 0 0 0 0	9 4 0 0 0 0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1 9 3 2 7 7 0	1 9 3 2 7 7 0
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 0	

☐ 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:

1 0 / 0 1 / 2 0 0 8

To:

1 1 / 2 4 / 2 0 0 8

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).....

1 6 7 5 0 0

4 9 6 5 0 0

(ii) Unitemized

0 0

0 0

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

1 6 7 5 0 0

4 9 6 5 0 0

(b) Political Party Committees

0 0

0 0

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

0 0

0 0

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

1 6 7 5 0 0

4 9 6 5 0 0

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 0

0 0

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

1 6 7 5 0 0

4 9 6 5 0 0

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

1 6 7 5 0 0

4 9 6 5 0 0

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:
- (a) Allocated Federal/Non-Federal Activity (from Schedule H4)
- (i) Federal Share
- (ii) Non-Federal Share.....
- (b) Other Federal Operating Expenditures
- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ►
22. Transfers to Affiliated/Other Party Committees.....
23. Contributions to Federal Candidates/Committees and Other Political Committees.....
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....
26. Loan Repayments Made.....
27. Loans Made.....
28. Refunds of Contributions To:
- (a) Individuals/Persons Other Than Political Committees
- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ►
29. Other Disbursements
30. Federal Election Activity (2 U.S.C. §431(20))
- (a) Allocated Federal Election Activity (from Schedule H6)
- (i) Federal Share
- (ii) "Levin" Share.....
- (b) Federal Election Activity Paid Entirely With Federal Funds
- (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... ►
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1,675,000	4,965,000
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,675,000	4,965,000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☒ 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 Rd

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

Exec. VP Operations-Knoxville Div.

Receipt For:

☐ Primary ☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

1 2 5 0 0

Date of Receipt

MM / DD / YYYY
1 0 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

1 2 5 0 0

Full Name (Last, First, Middle Initial)

B. Carter, Kevin M.

Mailing Address

129 Pearson Rd

City

Treadway

State

TN

Zip Code

37881

FEC ID number of contributing
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

Store Manager

Receipt For:

☐ Primary ☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

5 0 0 0 0

Date of Receipt

MM / DD / YYYY
1 0 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

5 0 0 0 0

Full Name (Last, First, Middle Initial)

C. Neeley, Robert L.

Mailing Address

P.O. Box 171

City

Abingdon

State

VA

Zip Code

24212

FEC ID number of contributing
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

Sr. VP Finance & Administration

Receipt For:

☐ Primary ☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

5 0 0 0 0

Date of Receipt

MM / DD / YYYY
1 0 / 1 4 / 2 0 0 8

Amount of Each Receipt this Period

5 0 0 0 0

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

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

K-VA-T Food Stores, Inc. FOODPAC

Full Name (Last, First, Middle Initial)

A. Smith, Steven C.

Mailing Address

1904 Lake Road

City

Abingdon

State

VA

Zip Code

24211

FEC ID number of contributing
federal political committee.

C

Name of Employer

K-VA-T Food Stores, Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General

☒ Other (specify) ▼

Contribution to Fund

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

11 / 19 / 2008

Amount of Each Receipt this Period

1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

1,675.00

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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

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

K-VA-T Food Stores, Inc. FOODPAC

Full Name (Last, First, Middle Initial)

A.

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2008

Friends of Mark Warner

Mailing Address

1029 North Royal Street

City

State

Zip Code

Alexandria

VA

22314

Purpose of Disbursement

General Election

Candidate Name

Mark Warner

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: **VA**

District:

11
Category/
Type

Amount of Each Disbursement this Period

2,000.00

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2008

Coleman for Senate Recount Fund

Mailing Address

680 Transfer Road, Suite A

City

State

Zip Code

St. Paul

MN

55114

Purpose of Disbursement

Recount Fund

Candidate Name

Norm Coleman

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

State: **MN**

District:

11
Category/
Type

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2008

Chambliss for Senate

Mailing Address

3200 Cobb Galleria Parkway, Suite 210

City

State

Zip Code

Atlanta

GA

30339

Purpose of Disbursement

General Run-off Election

Candidate Name

Saxby Chambliss

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

State: **GA**

District:

11
Category/
Type

Amount of Each Disbursement this Period

1,000.00

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

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

4,000.00

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Federal Election Commission
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<input type="checkbox"/> No Postmark	
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Next Business Day Delivery <input type="checkbox"/>	
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(3/2005)

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