

**THE HY-VEE EMPLOYEES' PAC**

A Political Action Committee

FEDERAL ELECTION COMMISSION

5820 Westown Parkway  
West Des Moines IA 50266

JUN 6 10 17 AM '95

515-267-2800

June 1, 1995

**CERTIFIED MAIL**

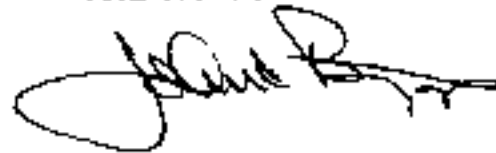
Federal Election Commission  
1325 K Street N W  
Washington, DC 20463

Gentlemen:

Enclosed herewith is our Report of Receipts and Disbursements for a Political Committee other than an Authorized Committee, FEC Form 3X, covering the period from May 1, 1995, through May 31, 1995.

Yours very truly,

**THE HY-VEE EMPLOYEES' PAC**



John Briggs, Treasurer

JB/gg

enclosure

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

JUN 6 10 17 AM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Hy-Vee Food Stores, Inc. Employees' Political Action Committee		2. FEC IDENTIFICATION NUMBER C 00243659
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1801 Osceola Ave.		
CITY, STATE and ZIP CODE Chariton, Iowa 50049		
3. <input type="checkbox"/> 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:

<input type="checkbox"/> February 20	<input checked="" type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding \_\_\_\_\_ in the State of \_\_\_\_\_  
(Type of Election)

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
5. Covering Period <u>5-1-95</u> through <u>5-31-95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 14,199.58
(b) Cash on Hand at Beginning of Reporting Period	\$ 20,770.58	
(c) Total Receipts (from Line 19)	\$ 492.00	\$ 7,713.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 21,262.58	\$ 21,912.58
7. Total Disbursements (from Line 30)	\$ 200.00	\$ 850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 21,062.58	\$ 21,062.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 F Street, NW Washington, DC 20463 Toll Free 800-424-9536 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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  
John C. Briggs

Signature of Treasurer Date  
6-1-95

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Hy-Vee Food Stores, Inc. Employees' Political Action Committee	REPORT COVERING PERIOD FROM 5-1-95 TO 5-31-95	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A) .....	120.00	220.00
ii. Unitemized .....	372.00	7,443.00
iii. Total .....	492.00	7,713.00
..... (add i and ii) >		
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contributions .....	492.00	7,713.00
..... (add a, b and c) >		
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received .....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....		
18. Transfers from Nonfederal Account for Joint Activity .....		
19. Total Receipts .....	492.00	7,713.00
..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		
20. Total Federal Receipts .....	492.00	7,713.00
..... (subtract line 18 from line 19) >		
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share .....		
ii. Non-Federal Share .....		
b. Other Federal Operating Expenditures .....		
c. Total Operating Expenditures .....		
..... (add a, a ii, and b) >		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	200.00	850.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(f)) (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 a, b and c) >		
29. Other Disbursements .....		
30. Total Disbursements .....	200.00	850.00
..... (add 21c, 22, 23, 24, 25, 26, 27, 28a, and 29) >		
31. Total Federal Disbursements .....	200.00	850.00
..... (subtract line 21 a ii from line 30) >		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d) .....	492.00	7,713.00
33. Total Contribution Refunds (from line 28d) .....		
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	492.00	7,713.00
35. Total Federal Operating Expenditures .....		
..... (add 21 a i and 21 b) >		
36. Offsets to Operating Expenditures (from line 15) .....		
37. Net Operating Expenditures .....		
..... (subtract line 36 from 35) >		

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE / OF /  
FOR LINE NUMBER

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 uses, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Hy-Vee Food Stores, Inc. Employees' Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Pearson 5575 Glen Oaks Pointe West Des Moines, Iowa 50266 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores Inc. Occupation: President, CEO Aggregate Year-to-Date > \$ 300.00	N/A	0.00
Bob Kirsch 4820 Mordak Road NE Cedar Rapids, Iowa 52411 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	5-1-95	120.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ..... 120.00

TOTAL This Period (last page this line number only) ..... 120.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER

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)

Hy-Vee Food Stores Inc., Employees' Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Leonard Baswell RR1 Box 130 Davis City, Iowa	Baswell for Iowa Donate - 44th Dist	5-23-95	200.00
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) ..... 200.00

TOTAL This Period (last page this line number only) ..... 200.00

**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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>6-1-95</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<i>SHB.</i>	<i>6-6-95</i>
PREPARER	DATE PREPARED