

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL ROOM  
2001 JUN 11 A 10:26

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT Y

Example: If typing, type over the lines.

12FE4M5

HyVee, Inc. Employees Political  
Action Committee

ADDRESS (number and street)

5820 Westown Parkway

Check if different than previously reported (ACC)

West, Des, Moines

IA

50266

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00243659

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:

- 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

In the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

In the State of

5. Covering Period

05 01 2001

through

05 31 2001

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 Brummit

Signature of Treasurer

*John Brummit*

Date

06 09 2001

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 Only

FEC FORM 3X  
(Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period: From: 05 01 2001 To: 05 31 2001

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <u>2001</u>   |                         | <u>643534</u>                     |
| (b) Cash on Hand at<br>Beginning of Reporting Period  | <u>1726969</u>          |                                   |
| (c) Total Receipts (from Line 19)   | <u>90063</u>            | <u>1318498</u>                    |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B)      | <u>1817032</u>          | <u>1967032</u>                    |
| 7. Total Disbursements (from Line 30)   | <u>100000</u>           | <u>245000</u>                     |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d))                 | <u>1717032</u>          | <u>1717032</u>                    |
| 9. Debts and Obligations Owed TO<br>the Committee (itemize all on<br>Schedule C and/or Schedule D)  | <u>0</u>                |                                   |
| 10. Debts and Obligations Owed BY<br>the Committee (itemize all on<br>Schedule C and/or Schedule D) | <u>0</u>                |                                   |

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 20468

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

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period:

From:

05 01 2001

To:

05 31 2001

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 3333                          |                                   |
| (b) Itemized (use Schedule A) .....  | 86730                         |                                   |
| (c) Unitemized .....   | 90063                         | 1318498                           |
| (d) TOTAL (add Lines 11(a)(i) and (ii)) .....  |                               |                                   |
| (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 32, page 4) .....   | 90063                         | 1318498                           |
| 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 36, page 4) ..... |                               |                                   |
| 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 (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....                             | 90063                         | 1318498                           |
| 20. Total Federal Receipts (subtract Line 18 from Line 19) .....                                       | 90063                         | 1318498                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

| II. Disbursements  |          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 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 21(a)(i), (a)(ii), and (b)) .....                          |          |                               |                                   |
| 22. Transfers to Affiliated/Other Party Committees .....   |          |                               |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....          | 1,000.00 | 2,250.00                      |                                   |
| 24. Independent Expenditures (use Schedule E) .....  |          |                               |                                   |
| 25. Coordinated Expenditures Made by Party Committees (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 .....  |          | 200.00                        |                                   |
| 30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) .....           | 1,000.00 | 2,450.00                      |                                   |
| 31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) .....                      | 1,000.00 | 2,450.00                      |                                   |
| <b>III. Net Contributions/Operating Expenditures</b>   |          |                               |                                   |
| 32. Total Contributions (other than loans) (from Line 11(d), page 3) .....                       | 900.63   | 1,318,498                     |                                   |
| 33. Total Contribution Refunds (from Line 28(d)) .....   |          |                               |                                   |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) .....                   | 900.63   | 1,318,498                     |                                   |
| 35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....                |          |                               |                                   |
| 36. Offsets to Operating Expenditures (from Line 15, page 3) .....                               |          |                               |                                   |
| 37. Net Operating Expenditures (subtract Line 36 from Line 35) .....                             |          |                               |                                   |

**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 2  
(check only one)

|                              |                              |                              |                             |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 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)

Hy-Vee, Inc. Employees' Political Action Committee

**A. Full Name (Last, First, Middle Initial)**  
Ron Pearson

**Mailing Address**  
5534 Glen Oaks Pointe  
City: West Des Moines, IA State: Zip Code: 50266

**FEC ID number of contributing federal political committee:** C

**Name of Employer:** Hy-Vee, Inc. **Occupation:** Chairman, CEO, President

**Receipt For:**  
 Primary  General  Other (specify) **Aggregate Year-to-Date:** 500.00

**Date of Receipt**  
[ ] / [ ] / [ ]

**Amount of Each Receipt this Period**  
[ ]

**B. Full Name (Last, First, Middle Initial)**  
Billy Bulman

**Mailing Address**  
100 Lakeshore Drive  
City: Calumet, IL State: Zip Code: 51241

**FEC ID number of contributing federal political committee:** C

**Name of Employer:** Hy-Vee, Inc. **Occupation:** Store Director

**Receipt For:**  
 Primary  General  Other (specify) **Aggregate Year-to-Date:** 200.00

**Date of Receipt**  
[ ] / [ ] / [ ]

**Amount of Each Receipt this Period**  
[ ]

**C. Full Name (Last, First, Middle Initial)**  
John Hubler

**Mailing Address**  
2895 Silver Oak Trail  
City: Marion, IA State: Zip Code: 52302

**FEC ID number of contributing federal political committee:** C

**Name of Employer:** Hy-Vee, Inc. **Occupation:** Store Director

**Receipt For:**  
 Primary  General  Other (specify) **Aggregate Year-to-Date:** 200.00

**Date of Receipt**  
[ ] / [ ] / [ ]

**Amount of Each Receipt this Period**  
[ ]

**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: PAGE 2 OF 2

(check only one)

|                              |                              |                              |                             |                             |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 | <input type="checkbox"/>    |

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NAME OF COMMITTEE (in Full)  
Hy-Vee, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)  
Richard Jurgens

Mailing Address  
3008 Jordan Grove

City State Zip Code  
West Des Moines IA 50265

FEC ID number of contributing federal political committee  
C

Name of Employer  
Hy-Vee, Inc.

Occupation  
Sender V.P.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
[ ] [ ] [ ]

B. Full Name (Last, First, Middle Initial)  
Wes Sack

Mailing Address  
6001 Creston Ave #9

City State Zip Code  
Des Moines IA 50321

FEC ID number of contributing federal political committee  
C

Name of Employer  
Hy-Vee, Inc.

Occupation  
Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
23,333

Date of Receipt  
05 08 2001

Amount of Each Receipt this Period  
3,333

C. Full Name (Last, First, Middle Initial)  
Ken Waller

Mailing Address  
8024 Tiburon Place

City State Zip Code  
Johnston IA 50131

FEC ID number of contributing federal political committee  
C

Name of Employer  
Hy-Vee, Inc.

Occupation  
Sender V.P.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
[ ] [ ] [ ]

Amount of Each Receipt this Period  
[ ] [ ] [ ]

SUBTOTAL of Receipts This Page (optional) ..... 3333

TOTAL This Period (last page this line number only) ..... 3333

**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 / OF /

|                              |                             |                              |                              |                              |
|------------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|
| <input 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"/> 29c |

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NAME OF COMMITTEE (In Full)  
**Hy-Vee, Inc. Employees' Political Action Committee**

**A.**

Full Name (Last, First, Middle Initial)  
**Boswell for Congress**

Mailing Address  
**PO Box 823**

City **Indianola, Iowa** State **Iowa** Zip Code **50125**

Purpose of Disbursement  
**U.S. Congress - Iowa**

Candidate Name  
**Leonard Boswell**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**05 / 19 / 2001**

Amount of Each Disbursement this Period  
**100000**

Category/Type  
**Pol!**

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **100000**

TOTAL This Period (last page this line number only) ..... ▶ **100000**

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 (R/C)<br>6-5-01                    |
| <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<br>_____<br>and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing  |   |
| <i>set</i><br>PREPARER  | 6-11-01<br>DATE PREPARED                      |