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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

File Use Only

1. NAME OF COMMITTEE (in full) **USE PREC MARKED LABEL OR TYPE OR PRINT** *Example: typing type over the lines.* **12FEAMS**

HyVee, Inc. Employees Political

Action Committee

ADDRESS (number and street) **5820 Westown Parkway**

Check if different than previously reported (AGG) **West Des Moines IA 50266**

2. FEC IDENTIFICATION NUMBER **CI 00243659**

CITY **IA** STATE **IA** ZIP CODE **50266**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

<input type="checkbox"/> April 15 Quarterly Report (Q1)	<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"/> July 15 Quarterly Report (Q2)	<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"/> October 15 Quarterly Report (Q3)	<input checked="" type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)
<input type="checkbox"/> January 31 Year-End Report (YE)				
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) (MY)				
<input type="checkbox"/> Termination Report (TER)				

(b) Monthly Report Due Dec

(c) 15-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (15P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on [] [] [] in the State of []

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


<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on [] [] [] in the State of []

5. Covering Period **03/01/2002** through **03/31/2002**

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 Brunitt**

Signature of Treasurer  Date **04/15/2002**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5417g.

**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

12 / 01 / 2002

To

12 / 31 / 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1. <u>2002</u>		<u>127,752.88</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>165,539.60</u>	
(c) Total Receipts (from Line 19)	<u>81,330.00</u>	<u>664,198.00</u>
(d) Subtotal (add Lines 5(b) and 5(c) for Column A and Lines 5(a) and 5(c) for Column B)	<u>173,672.26</u>	<u>194,172.60</u>
7. Total Disbursements (from Line 20)	<u>0</u>	<u>2050.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5(d))	<u>173,672.26</u>	<u>173,672.60</u>
9. Debts and Obligations Owed TO the Committee (Report all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Report all on Schedule C and/or Schedule D)	<u>0</u>	

This committee has qualified as a nationwide committee. (see FEC FORM 114)

For further information contact:

Federal Election Commission
888 E Street, NW
Washington, DC 20488

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 278 (Revised 1/01)

Page 3

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period

From

03 01 2002

To

03 31 2002

L 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)	0	664,198
(ii) Unitemized	81,330	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	81,330	
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Copy Totals to Line 32, page 4)	81,330	664,198
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 38, 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, 17, and 18)	81,330	664,198
20. Total Federal Receipts (subtract Line 16 from Line 19)	81,330	664,198

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 28 (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B 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		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441e(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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)		
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	0	0

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(e), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Effects to Operating Expenditures (from Line 16, 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 / OF /	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11a	<input type="checkbox"/> 12
<input type="checkbox"/> 12	<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 used 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

Full Name (Last, First, Middle Initial)

A. HAN PERCORA

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, COO

Receipt For:

Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

25000

Date of Receipt

MM	DD	YYYY

Amount of Each Receipt This Period

Amount
<u>25000</u>

Full Name (Last, First, Middle Initial)

B.

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

MM	DD	YYYY

Amount of Each Receipt This Period

Amount

Full Name (Last, First, Middle Initial)

C.

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

MM	DD	YYYY

Amount of Each Receipt This Period

Amount

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

202503-7551163

**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"/> 21a	<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"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30a	<input type="checkbox"/> 30b	<input type="checkbox"/> 30c	<input type="checkbox"/> 31	<input type="checkbox"/> 32

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)

Ky-Vac, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

MM	DD	YYYY
----	----	------

Amount of Each Disbursement this Period

Amount

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

MM	DD	YYYY
----	----	------

Amount of Each Disbursement this Period

Amount

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

MM	DD	YYYY
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Amount of Each Disbursement this Period

Amount

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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) 4-15-02
<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
<input type="checkbox"/> Electronic Filing	
<i>JM13</i> PREPARER	4-22-02 DATE PREPARED