

# **THE HY-VEE EMPLOYEES' PAC**

**A Political Action Committee**

RECEIVED  
FEDERAL ELECTION COMMISSION  
1155 Wisconsin Parkway  
West Des Moines, Iowa 50266  
Phone: 515-287-2800

1999 OCT -8 A 10: 56

October 4, 1999

## **CERTIFIED MAIL**

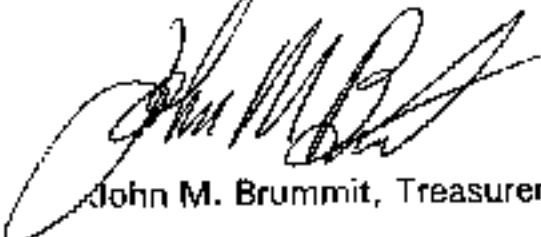
Federal Election Commission  
999 E Street N W  
Washington, DC 20463

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 September 1 through September 30, 1999.

Yours very truly,

**THE HY-VEE EMPLOYEES' PAC**



John M. Brummit, Treasurer

JMB/gg

Enclosure

**REPORT OF RECEIPTS AND DISBURSEMENTS**

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full)  
By-Vee, Inc. Employees' Political  
Action Committee

ADDRESS (number and street)  Check if different than previously reported  
5820 Westown Parkway

CITY, STATE and ZIP CODE  
West Des Moines IA 50266

2. FEC IDENTIFICATION NUMBER D 56  
C 00243659

3.  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 type="checkbox"/> June 20      | <input checked="" 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 \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 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	Sept 1 through Sept 30		
6. (a) Cash on Hand January 1, 19 99			\$ 2,791.61
(b) Cash on Hand at Beginning of Reporting Period		\$ 24,269.97	
(c) Total Receipts (from Line 10)		\$ 733.00	\$ 24,461.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 25,002.97	\$ 27,252.97
7. Total Disbursements (from Line 30)		\$ 600.00	\$ 2,850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 24,402.97	\$ 24,402.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9630  
Local 202-219-3420

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 M. Brumitt

Signature of Treasurer: *John M. Brumitt*

Date: 10-4-99

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

**FEC FORM 3X**  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE **Hy-Vee, Inc. Employees Political Action Committee**

REPORT COVERING PERIOD  
FROM **9-1-99** TO **9-30-99**

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
<b>11. Contributions (other than loans) From:</b>			
<b>e. Individuals/Persons Other Than Political Committees</b>			
<b>i. Itemized (use Schedule A)</b>	0	7,725.00	11(a)(i)
<b>ii. Unitemized</b>	733.00	16,736.36	11(a)(ii)
<b>iii. Total</b> (add i and ii) >	733.00	24,461.36	11(a)(iii)
<b>b. Political Party Committees</b>			11(b)
<b>c. Other Political Committees (such as PACs)</b>			11(c)
<b>d. Total Contributions</b> (add a iii, b and c) >	733.00	24,461.36	11(d)
<b>12. Transfers From Affiliated/Other Party Committees</b>			12
<b>13. All Loans Received</b>			13
<b>14. Loan Repayments Received</b>			14
<b>15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)</b>			15
<b>16. Refunds of Contributions Made to Federal Candidates and Other Political Committees</b>			16
<b>17. Other Federal Receipts (Dividends, Interest, etc.)</b>			17
<b>18. Transfers from Nonfederal Account for Joint Activity</b>			18
<b>19. Total Receipts</b> (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	733.00	24,461.36	19
<b>20. Total Federal Receipts</b> (subtract line 18 from line 19) >	733.00	24,461.36	20
<b>II. Disbursements</b>			
<b>21. Operating Expenditures:</b>			
<b>a. Shared Federal/Non-Federal Activity (from Schedule H4)</b>			
<b>i. Federal Share</b>			21(a)(i)
<b>ii. Non-Federal Share</b>			21(a)(ii)
<b>b. Other Federal Operating Expenditures</b>			21(b)
<b>c. Total Operating Expenditures</b> (add a i, a ii, and b) >			21(c)
<b>22. Transfers to Affiliated/Other Party Committees</b>			22
<b>23. Contributions to Federal Candidates/Committees and Other Political Committees</b>	0	100.00	23
<b>24. Independent Expenditures (use Schedule E)</b>			24
<b>25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</b>			25
<b>26. Loan Repayments Made</b>			26
<b>27. Loans Made</b>			27
<b>28. Refunds of Contributions To:</b>			
<b>a. Individuals/Persons Other Than Political Committees</b>			28(a)
<b>b. Political Party Committees</b>			28(b)
<b>c. Other Political Committees (such as PACs)</b>			28(c)
<b>d. Total Contribution Refunds</b> (add a, b and c) >			28(d)
<b>29. Other Disbursements</b>	600.00	27,500.00	29
<b>30. Total Disbursements</b> (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	600.00	28,500.00	30
<b>31. Total Federal Disbursements</b> (subtract line 21 a ii from line 30) >	600.00	28,500.00	31
<b>III. Net Contributions/Operating Expenditures</b>			
<b>32. Total Contributions (other than loans)(from line 11d)</b>	733.00	24,461.36	32
<b>33. Total Contribution Refunds (from line 28d)</b>			33
<b>34. Net Contributions (other than loans)(subtract line 33 from 32)</b>	733.00	24,461.36	34
<b>35. Total Federal Operating Expenditures</b> (add 21 a i and 21 b) >			35
<b>36. Offsets to Operating Expenditures (from line 15)</b>			36
<b>37. Net Operating Expenditures</b> (subtract line 36 from 35) >			37

**SCHEDULE A ITEMIZED RECEIPTS**

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, 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
Pearson, Ron 5534 Glen Oaks Pointe West Des Moines, IA 50266	Hy-Vee, Inc. Occupation Chairman, CEO, President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hurwitz, Lou 5104 Brookview Drive West Des Moines, IA 50266	Linear Distributing Occupation President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Spinelli, Stephen 320 NE Wicklow Court Lee's Summit, MO 64064	Hy-Vee, Inc. Occupation Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jurgens, Ric 3008 Jordan Grove West Des Moines, IA 50266	Hy-Vee, Inc. Occupation V.P.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Waller, Kenneth 8024 Tiburon Place Johnston, IA 50131	Hy-Vee, Inc. Occupation V.P. - President PDE		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 375.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hy-Vee, Inc. 5820 Wustown Parkway West Des Moines, Iowa 50266			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lewis Snack 6001 Creston Ave #9 Des Moines, IA 50321	Hy-Vee, Inc. Occupation Store Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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, 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
Annual Jefferson-Jackson Day Dinner 2116 Grand Ave Des Moines, IA 50265	Iowa Democratic Party General Fund	9-28-99	600.00
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)	600.00
TOTAL This Period (last page this line number only)	600.00

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 10-4-99
<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>Se1</i> PREPARER	10-8-99 DATE PREPARED