

**WEST
HERITAGE
BANK**

HY-VEE COMPANY

MEMBER FDIC

1025 Braden, Chariton, IA 50049
 1-641-774-8581
 Internet Banking: www.mhbank.com
 24 Hour Account Information:
 In the Des Moines Area: 515-224-8311 or
 Toll Free: 1-800-482-9821

611 00001 01 PAGE: 1
 ACCOUNT: 256986 12/29/2006
 DOCUMENTS: 2

2007 JAN 20 AM 11:36

HYVEE INC
 EMPLOYEES PAC
 JOHN BRUMMIT 30
 5820 WESTOWN PKWY 1
 WEST DES MOINES IA 50266-8223 1

BE SURE TO CHECK OUT OUR TIME CERTIFICATE SPECIALS!!

COMMERCIAL CHECKING ACCOUNT 256986

DESCRIPTION	DEBITS	CREDITS	DATE	BALANCE
BALANCE LAST STATEMENT			11/30/06	5,725.88
DEPOSIT		882.15	12/07/06	6,608.03
CHECK # 1665	1,000.00		12/27/06	5,608.03
BALANCE THIS STATEMENT			12/29/06	5,608.03
TOTAL CREDITS (1)		882.15		
TOTAL DEBITS (1)	1,000.00			

YOUR CHECKS SEQUENCED

DATE	CHECK #	TRACE #	AMOUNT	DATE	CHECK #	TRACE #	AMOUNT
12/27	1665	0088005800	1,000.00				

--- ITEMIZATION OF NSF PAID AND RETURNED ITEM FEES ---

	THIS PERIOD	YEAR TO DATE
NSF PAID ITEM FEE:	.00	.00
NSF RETURNED ITEM FEE:	.00	.00
OVERDRAFT FEES:	.00	.00

- END OF STATEMENT -

27039350227

CHECKS OUTSTANDING

NO.	AMOUNT
TOTAL	\$

STATEMENT RECONCILIATION

1. STATEMENT BALANCE	5608.03
2. ADD DEPOSITS NOT CREDITED ON THIS STATEMENT	#
3. SUB TOTAL	5608.03
4. SUBTRACT CHECKS OUTSTANDING	#
5. BALANCE	5608.03

CHECKBOOK BALANCE	5608.03
PLUS INTEREST	#
LESS BANK CHARGES	#
LESS STATE TAX	#
ADJUSTED BALANCE	5608.03

How to balance your checkbook:

1. Subtract the monthly service charge and any other charges not previously deducted from your checkbook balance.
2. Add to your checkbook balance any automatic deposit and any interest paid.
3. List and total the amount of all deposits entered in your checkbook that are not shown on the statement in the space provided for "Deposits Not Credited."
4. Compare and check off each paid check against your checkbook record. List and total all checks you have not checked off in the space provided for "Checks Outstanding."
5. Perform the indicated steps in the "Statement Reconciliation" section.

If your checkbook and bank statement do not balance:

- Review last month's reconciliation to make sure any differences were corrected.
 - Check additions and subtractions in your checkbook.
 - Compare the amount of each check and deposit with the amount recorded in your checkbook and on this statement.
 - Make sure all outstanding checks have been recorded under "Checks Outstanding."
- Make sure that each paid check you received with your statement has been recorded in your checkbook.
- Make sure that all electronic fund transfers (if any) are listed.

Important information about your Ready Reserve

We calculate the finance charge on your Account by applying the "daily periodic rate" to the "average daily balance" of your Account. To get the "average daily balance" we take the beginning balance of your Account each day, add any new advances or loans, and subtract any payments or credits, credit insurance premiums that are due and unpaid finance charge. This gives us the daily balance. Then we add up all the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "average daily balance."

The FINANCE CHARGE shall be computed by taking the "average daily balance", multiplying by the number of days in the billing cycle, and applying the "daily periodic rate" of 0.0493% per day (corresponding ANNUAL PERCENTAGE RATE 18%) up to \$500.00 and 0.0411% per day (corresponding ANNUAL PERCENTAGE RATE 15%) on all sums owed in excess of \$500.00. If the monthly FINANCE CHARGE is less than \$0.50 and there was a loan balance outstanding during the billing cycle, a minimum monthly FINANCE CHARGE of \$0.50 will be imposed. If there was no loan balance outstanding during the billing cycle, no FINANCE CHARGE will be imposed. The FINANCE CHARGE will begin on the day the loan or advance is processed by us, and will continue to accrue until all loan balances are paid in full. There is no free period within which to pay the outstanding balance without incurring a FINANCE CHARGE.

In Case of Errors or Questions About Your Ready Reserve

If you think your statement is wrong, or if you need more information about a transaction on your statement, write us on a separate sheet at the address shown on the front page of this statement as soon as possible. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

1. Your name and account number.
2. The dollar amount of the suspected error.
3. Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item about which you are unsure.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

* This section applies only to consumer accounts with a credit limit of \$25,000 or less, unless the account is secured by real property. In no case does this section apply to business or agricultural accounts.

In Case of Errors or Questions About Your Electronic Fund Transfers **

Telephone us at 641-774-8581 or write us at the address shown on the front page of this statement as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- (1) Tell us your name and account number.
- (2) Describe the error or the transfer about which you are unsure and explain as clearly as you can why you believe there is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

If you tell us verbally, we may require that you send us your complaint or question in writing within 10 business days. We will tell you of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will recredit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete the investigation. If we ask you to put the complaint in writing and we do not receive it within 10 business days, we may not recredit your account.

** These procedures apply to certain consumer transactions as described in the Bank's Electronic Fund Transfer Agreements, or other electronic fund transfer agreements. Please refer to your particular EFT Agreement for further details.

Pre-authorized Credits

If you have arranged to have direct deposits (e.g. Social Security) made to your consumer account at least once every 60 days from the same person or company, you may call us (the telephone number is on the front of this statement) to find out whether the deposit has been made.



MEMBER FDIC

**FEC
FORM 3X**

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

2007 JUN 23 A 11:36

Office Use Only

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

Hy-Vee, 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

C 00243659

3. IS THIS REPORT NEW OR AMENDED
 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 _____ 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) |
|---|---------------------------------------|--|

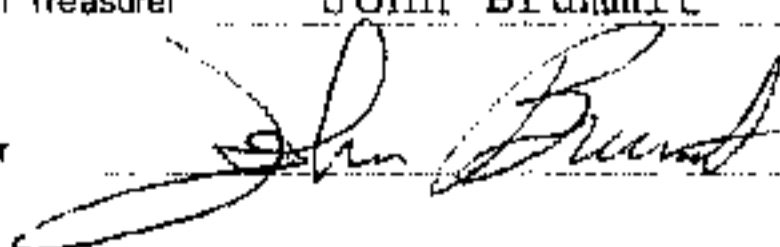
Election on 11 07 2006 in the State of IA

5. Covering Period 11 28 2007 through 12 31 2007

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



Date 01 18 2007

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									
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FEC FORM 3X
Rev. 12/2004

27039350229

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period: From: 11 28 2006 To: 12 31 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2006</u>		29,542.02
(b) Cash on Hand at Beginning of Reporting Period	5,725.88	
(c) Total Receipts (from Line 19)	802.15	26,281.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66,080.3	55,823.03
7. Total Disbursements (from Line 3f)	1,000.00	50,215.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5,608.03	5,608.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<i>[Signature]</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<i>[Signature]</i>	

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

27039350230

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period: From: 11 28 2006 To: 12 31 2006

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).....	23967	1095104
(ii) Unitemized.....	64248	1532997
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	88215	2628101
(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 33, page 5).....▶	88215	2628101
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))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	88215	2628101
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	88215	2628101

27039350231

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	1,000.00	50,200.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441b(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	0	15.00
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))	1,000.00	50,215.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,000.00	50,215.00

27039350232

**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)	88215	2628101
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	88215	2628101
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4	4
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4	4

27039350233

**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	OF	3
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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

Full Name (Last, First, Middle Initial) A. Hecne, Duane, C.			Date of Receipt M M . D D . Y Y Y Y		
Mailing Address 27410 50th Avenue			Amount of Each Receipt this Period -0-		
City Dixon	State IA	Zip Code 52745			
FEC ID number of contributing federal political committee. C					
Name of Employer 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 ▼ 200.00			

Full Name (Last, First, Middle Initial) B. Bell, Charlie			Date of Receipt M M . D D . Y Y Y Y		
Mailing Address 12443 Douglas Parkway			Amount of Each Receipt this Period -0-		
City Urbandale	State IA	Zip Code 50323			
FEC ID number of contributing federal political committee. C					
Name of Employer Hy-Vee, Inc.		Occupation Store President			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00			

Full Name (Last, First, Middle Initial) C. Boisjolie, Paul, L			Date of Receipt M M . D D . Y Y Y Y		
Mailing Address 87654 Hwy 251			Amount of Each Receipt this Period -0-		
City Washn	State MN	Zip Code 55912			
FEC ID number of contributing federal political committee. C					
Name of Employer 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 ▼ 240.00			

SUBTOTAL of Receipts This Page (optional).....	-0-
TOTAL This Period (last page this line number only).....	

27039350234

**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 3	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Bulman, Billy		Date of Receipt M M . D D . Y Y Y Y
Mailing Address 100 Lakeview Drive		Amount of Each Receipt this Period -0-
City Calona	State Zip Code IL 51241	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer 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 ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Butcher, Kenneth		Date of Receipt M M . D D . Y Y Y Y
Mailing Address 7112 NE 44th Ct		Amount of Each Receipt this Period -0-
City Ankeny	State Zip Code IA 50021	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer 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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Chalstrom, Wade, D		Date of Receipt M M . D D . Y Y Y Y
Mailing Address 436 Primrose Dr		Amount of Each Receipt this Period -0-
City Hudson	State Zip Code IA 50643	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer 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 ▼ 200.00	

SUBTOTAL of Receipts This Page (optional).....▶	-0-
TOTAL This Period (last page this line number only).....▶	-0-

27039350235

**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 3 OF 3	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

A. Full Name (Last, First, Middle Initial)
Christenson, Michael

Mailing Address
1215 East Van Buren

City **Washington** State **IA** Zip Code **52353**

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

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

Receipt For:
 Primary General
 Other (specify) **240.00**

Aggregate Year-to-Date **240.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 07 / 2006

Amount of Each Receipt this Period
- 0 -

B. Full Name (Last, First, Middle Initial)
Chacker, Janet, D

Mailing Address
405 SE Delaware

City **Ankeny** State **IA** Zip Code **50021**

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

Name of Employer **Hy-Vee, Inc.** Occupation **Asst Vice President**

Receipt For:
 Primary General
 Other (specify) **200.04**

Aggregate Year-to-Date **200.04**

Date of Receipt
M M / D D / Y Y Y Y
12 / 07 / 2006

Amount of Each Receipt this Period
16.67

C. Full Name (Last, First, Middle Initial)
Delaney, Allen

Mailing Address
2109 E Briar Den Ct

City **Sioux Falls** State **SD** Zip Code **57108**

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

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

Receipt For:
 Primary General
 Other (specify) **200.00**

Aggregate Year-to-Date **200.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 07 / 2006

Amount of Each Receipt this Period
- 0 -

SUBTOTAL of Receipts This Page (optional) **16.67**

TOTAL This Period (last page this line number only)

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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 4 OF 5
	<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	

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

A. Full Name (Last, First, Middle Initial) Dell, Douglas, S

Mailing Address 655 Park Ave

City Brookings State SD Zip Code 57006

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 200.00

B. Full Name (Last, First, Middle Initial) Donnelly, Charles, R

Mailing Address 12532 Rugby Ct

City Dubuque State IA Zip Code 52002

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 200.00

C. Full Name (Last, First, Middle Initial) Irish, John, M

Mailing Address 3245 Lundy Lane

City Pettendorf State IA Zip Code 52722

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 210.00

Date of Receipt 12 07 2004

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) 15.00

TOTAL This Period (last page this line number only) 15.00

27059350237

**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 5 OF 13	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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) Dykes, Bradley

Mailing Address 607 Hillcrest Grand Ave

City Vankton State SD Zip Code 57079

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: M M / D D / Y Y Y Y 12 / 07 / 2006

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial) Edeker, Randy, B

Mailing Address 2955 Belfry Dr SW

City Waukee State IA Zip Code 50263

FEC ID number of contributing federal political committee. C

Name of Employer Hy-Vee, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date 300.00

Date of Receipt: M M / D D / Y Y Y Y 12 / 07 / 2006

Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial) Hall, Barbara

Mailing Address 1219 W 15th St. South

City Newton State IA Zip Code 50208

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 225.00

Date of Receipt: M M / D D / Y Y Y Y 12 / 07 / 2006

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 25.00

TOTAL This Period (last page this line number only) 25.00

27039350238

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 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)

Hy-Vee, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Highfill, Brent, C

Mailing Address

4005 Skyline Circle

City

Johnston

State

IA

Zip Code

50131

FEC ID number of contributing federal political committee.

C

Name of Employer

Hy-Vee, Inc.

Occupation

Asst Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 07 2006

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Hausman, Freddie, L

Mailing Address

1105 Mallory Lane

City

Chariton

State

IA

Zip Code

50049

FEC ID number of contributing federal political committee.

C

Name of Employer

Hy-Vee, Inc.

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 07 2006

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Jurgens, Richard, N

Mailing Address

3006 Jordan Grove

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing federal political committee.

C

Name of Employer

Hy-Vee, Inc.

Occupation

President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,750.00

Date of Receipt

12 07 2006

Amount of Each Receipt this Period

0.00

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

27039350259

**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 7 OF 13
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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

Full Name (Last, First, Middle Initial) A. Mitchell, Rose		Date of Receipt
Mailing Address 5707 Pommel Court		
City West Des Moines	State IA	Zip Code 50266
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0
Name of Employer Hy-Vee, Inc	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Lanning, John		Date of Receipt
Mailing Address 9240 NW 3rd St		
City Polk City	State IA	Zip Code 50224
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0
Name of Employer 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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. McCann, Anthony, S		Date of Receipt
Mailing Address 179 59th St		12 07 2004
City West Des Moines	State IA	Zip Code 50266
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Hy-Vee, Inc	Occupation Asst Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	

27039350240

**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 8 OF 13

<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	

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

A. Full Name (Last, First, Middle Initial)
Millsap, Mark

Date of Receipt
12 07 2004

Mailing Address
16330 W 160th Terrace

City State Zip Code
Olathe KS 66062

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
25.00

Name of Employer
Hy-Vee, Inc.

Occupation
Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

B. Full Name (Last, First, Middle Initial)
Mason, Brian

Date of Receipt
12 07 2004

Mailing Address
159 Norwood Dr

City State Zip Code
Council Bluffs IA 51503

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
0

Name of Employer
Hy-Vee, Inc.

Occupation
Store Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

C. Full Name (Last, First, Middle Initial)
Nielsen, Andrew V

Date of Receipt
12 07 2004

Mailing Address
9401 Hickory Lane

City State Zip Code
Urbandale IA 50322

FEC ID number of contributing federal political committee.
C

Amount of Each Receipt this Period
20.00

Name of Employer
Hy-Vee, Inc

Occupation
Asst Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

SUBTOTAL of Receipts This Page (optional).....▶ **45.00**

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

27039350241

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 9 OF 13
	<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		

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

Full Name (Last, First, Middle Initial) A. Olson, Daniel, P		Date of Receipt
Mailing Address 2220 Aspen Lane		
City North Mankato	State MN	Zip Code 56003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer 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 ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Schmeiding, Daniel, J		Date of Receipt
Mailing Address 216 Chancery Ln		
City Mankato	State MN	Zip Code 56001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer 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 ▼ 200.00	

Full Name (Last, First, Middle Initial) C. Scott, James		Date of Receipt
Mailing Address 4501 94th St		
City Urbandale	State IA	Zip Code 50322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -0-
Name of Employer Hy-Vee, Inc.	Occupation Asst. Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....	-0-
TOTAL This Period (last page this line number only).....	

27039350242

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

PAGE 10 OF 13

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

Full Name (Last, First, Middle Initial) A. <u>Sherlock, Kevin, T</u>		Date of Receipt
Mailing Address <u>2495 Grey Wolf</u>		
City <u>Hawatha</u>	State <u>IA</u>	Zip Code <u>52233</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>-0-</u>
Name of Employer <u>Hy-Vee, Inc.</u>	Occupation <u>Store Director</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>240.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Skokan, Michael, D</u>		Date of Receipt
Mailing Address <u>501 52nd St</u>		<u>12 07 2004</u>
City <u>West Des Moines</u>	State <u>IA</u>	Zip Code <u>50265</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>25.00</u>
Name of Employer <u>Hy-Vee, Inc.</u>	Occupation <u>Asst Vice President</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>300.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Slaybrough, Tacci</u>		Date of Receipt
Mailing Address <u>4920 N 142nd St</u>		
City <u>Omaha</u>	State <u>NE</u>	Zip Code <u>68114</u>
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>-0-</u>
Name of Employer <u>Hy-Vee, Inc.</u>	Occupation <u>Store Director</u>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>350.00</u>	

SUBTOTAL of Receipts This Page (optional).....▶	<u>25.00</u>
TOTAL This Period (last page this line number only).....▶	

27039350243

**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 11 OF 13

<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	

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NAME OF COMMITTEE (In Full)

Hy-Vee, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Snook, Lewis

Mailing Address

1900 Cedar St Apt E-303

City

Norwalk

State

IA

Zip Code

50211

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 ▼

400.00

Date of Receipt

12 07 2004

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Steinbach, Nicholas

Mailing Address

21935 Trailridge Blvd

City

Elk Horn

State

NE

Zip Code

68022

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 ▼

300.00

Date of Receipt

12 07 2004

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Stewart Jr, Raymond

Mailing Address

12804 Clark Street

City

Clive

State

IA

Zip Code

50325

FEC ID number of contributing federal political committee.

C

Name of Employer

Hy-Vee, Inc

Occupation

Sr. Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

12 07 2004

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

10.00

TOTAL This Period (last page this line number only)

27039350244

**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 3	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

Full Name (Last, First, Middle Initial) A. Sulzeman, Cynthia		Date of Receipt 12 07 2006
Mailing Address 906 Meadowbrook Dr		Amount of Each Receipt this Period 23.00
City Kearney	State Zip Code MO 64060	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 476.00
Name of Employer Hy-Vee, Inc	Occupation Supervisor	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00	

Full Name (Last, First, Middle Initial) B. Taylor, Ronald, P		Date of Receipt 12 07 2006
Mailing Address 555 Westwoods Dr		Amount of Each Receipt this Period 20.00
City Waukee	State Zip Code IA 50263	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Hy-Vee, Inc	Occupation Sr. Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Trader, Hubert, N		Date of Receipt 12 07 2006
Mailing Address 709 South Outlook Dr		Amount of Each Receipt this Period 0-
City Sioux Falls	State Zip Code SD 57106	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer 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 ▼ 200.00	

SUBTOTAL of Receipts This Page (optional).....	43.00
TOTAL This Period (last page this line number only).....	

27039350245

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

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

Full Name (Last, First, Middle Initial) A. Waldon Thomas		Date of Receipt M M . Y Y . Y Y
Mailing Address 8100 Heather Bow Ct		Amount of Each Receipt this Period 200.00
City Johnston	State Zip Code IA 50131	
FEC ID number of contributing federal political committee. C		
Name of Employer Hy-Vee, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M . Y Y . Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M . Y Y . Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	239.67

27039350246

**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"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

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

A.

Full Name (Last, First, Middle Initial)
Chet Culver Committee

Date of Disbursement
12 14 2006

Mailing Address
1217 W. St

City
West Des Moines State
IA Zip Code
50265

Purpose of Disbursement
Contribution

Candidate Name
Chet Culver

Office Sought: House Senate President
State: **IA** District:

Disbursement For: Primary General Other (specify) ▼

Category/Type
011

Amount of Each Disbursement this Period
1,000.00

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶ **1,000.00**

TOTAL This Period (last page this line number only).....▶ **1,000.00**

27039350247

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC 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"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1-19-07
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jms</i> PREPARER	1-23-07 DATE PREPARED

(3/2005)

27039350248