

**THE HY-VEE EMPLOYEES' PAC**

A Political Action Committee

1801 Osceola Avenue  
Chariton, Iowa, 50049  
Phone 515-774-2121

November 1, 1993

**CERTIFIED MAIL**

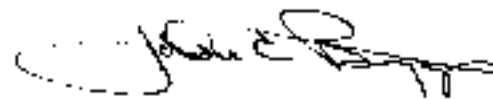
Federal Election Commission  
1325 K Street NW  
Washington, DC 20463

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 October 1, 1993, through October 31, 1993.

Yours very truly,

**THE HY-VEE EMPLOYEES' PAC**



John Briggs, Treasurer

JB/tl

enclosure

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FEDERAL ELECTION COMMISSION  
WASHINGTON, DC 20463

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) <b>Hy-vee Food Stores, Inc.                  Political Action Committee</b>	2. FEC IDENTIFICATION NUMBER <b>C 00243659</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1801 Osceola Ave</b>	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on (date).
CITY, STATE and ZIP CODE <b>Chariton, Iowa 50049</b>	

## 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:
- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     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 <u>10-1-93</u> through <u>10-31-93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 18,437.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 25,733.58	
(c) Total Receipts (from Line 19)	\$ 2,311.00	\$ 11,197.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 28,044.58	\$ 29,634.50
7. Total Disbursements (from Line 30)	\$ 2,000.00	\$ 3,589.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 26,044.58	\$ 26,044.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

For further information contact:  
 Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 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 C. Briggs**

Signature of Treasurer Date **11-1-93**

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

2 3 4 5 6 7 8 9

# 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 **10/1/93** TO **10/31/93**

	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A) .....	670.00	3,365.00
ii. Unitemized .....	1,641.00	7,832.00
iii. Total .....	2,311.00	11,197.00
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contributions .....	2,311.00	11,197.00
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 .....	2,311.00	11,197.00
20. Total Federal Receipts .....	2,311.00	11,197.00
<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 .....	0.00	9.92
c. Total Operating Expenditures .....	0.00	9.92
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,000.00	3,580.00
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 .....		
29. Other Disbursements .....		
30. Total Disbursements .....	2,000.00	3,589.92
31. Total Federal Disbursements .....	2,000.00	3,589.92
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d) .....	2,311.00	11,197.00
33. Total Contribution Refunds (from line 28d) .....		
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	2,311.00	11,197.00
35. Total Federal Operating Expenditures .....		9.92
36. Offsets to Operating Expenditures (from line 15) .....		
37. Net Operating Expenditures .....		9.92

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 2  
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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Allen 805 Longview Council Bluffs Iowa 51501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: Store Manager Aggregate Year-to-Date \$ 300.00	10-14-93	75.00
Ronald Pearson 2500 Jordan Grove West Des Moines, Iowa 50265 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: President Aggregate Year-to-Date \$ 400.00	10-27-93	100.00
Rodney Bean 416 Centennial Drive Cherokee, Iowa 51012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: Director of Operations Aggregate Year-to-Date \$ 250.00	10-4-93	25.00
Charles Robertson 1032 N. Sixth St. Chariton, Iowa 50049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: VP Aggregate Year-to-Date \$ 250.00	10-4-93	25.00
Michael Wheeler 906 N.W. Campus Ridge Court Ankeny, Iowa 50021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: VP Aggregate Year-to-Date \$ 250.00	10-4-93	25.00
Terry Brown RR 1 Quail Ridge Sergeant Bluff Iowa 51654 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores Iowa. Occupation: Store Manager Aggregate Year-to-Date \$ 250.00	10-14-93	25.00
Ken Butcher 1018 Campus Ridge Court Ankeny, Iowa 50021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Iowa. Occupation: Store Manager Aggregate Year-to-Date \$ 240.00	10-14-93	20.00

SUBTOTAL of Receipts This Page (optional)

295.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2  
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Fryxell 4937 Utah Drive Ames, Iowa 50010 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	10-14-93	60.00
Jamey Gifford 413 39th Street West Des Moines, Iowa 50265 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	10-14-93	60.00
Carter D Howe 1620 Bulgaria Ct NE Cedar Rapids, Iowa 52402 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	10-14-93	60.00
Richard Langston 2902 30th St. Old Oakwood Moline, Illinois 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	10-14-93	60.00
Brian Moon 159 Nowood Drive Council Bluffs, Iowa 51503 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	10-14-93	60.00
Scott Youngberg 203 Bonita Ave. Marshall, Mo 64258 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 > \$ 225.00	10-14-93	75.00
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) 375.00

TOTAL This Period (last page this line number only) 670.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Food PAC 800 Connecticut Ave NW Washington DC 20006-2701	Transfer to other PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other PAC	10-7-93	1,000.00
The Governor Branstad Comm 2020 Congress Ave Des Moines Iowa 50312	Contribution to Governor Branstad (State of Iowa) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-21-93	1,000.00
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)	2,000.00
TOTAL This Period (last page this line number only)	2,000.00

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.

Hand Delivered DATE OF RECEIPT

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED  
11-1-93

No Postmark

Postmark Illegible

Received from the House Office of Records and Registration DATE OF RECEIPT

Received from the Senate Office of Public Records DATE OF RECEIPT

Other (Specify): POSTMARKED  
\_\_\_\_\_  
and/or DATE OF RECEIPT

*JMH*  
PREPARER

11-4-93  
DATE PREPARED

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