

THE HY-VEE EMPLOYEES' PAC

A Political Action Committee

RECEIVED
COMMUNICATIONS
DIVISION
AUG 2 1993

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

AUG 9 2 10 PM '93

August 2, 1993

CERTIFIED MAIL

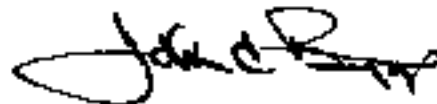
Federal Election Commission
1325 K Street N W
Washington, D.C. 20463

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 July 1, 1993, through July 31, 1993.

Yours very truly,

THE HY-VEE EMPLOYEES' PAC



John C. Briggs, Treasurer

JCB/gg

enclosure

9 3 0 3 6 2 6 J 4 7 5

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Aug 9 2 10 PM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

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

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>7-1-93</u> through <u>7-31-93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ <u>18,437.50</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>23,839.58</u>	
(c) Total Receipts (from Line 19)	\$ <u>2,176.00</u>	\$ <u>8,168.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>26,015.58</u>	\$ <u>26,605.50</u>
7. Total Disbursements (from Line 30)	\$ <u>700.00</u>	\$ <u>1,289.92</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>25,315.58</u>	\$ <u>25,315.58</u>
9. Debts and Obligations Owed TO 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 202-278-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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	Date
Signature of Treasurer 	8-2-93

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

FEC FORM 3X

(revised 1/1/91)

9 5 0 3 3 6 2 7

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

TO

I. Receipts

- 11. Contributions (other than loans) From:
 - a. Individual/Persons Other Than Political Committees
 - i. Itemized (use Schedule A) 175.00
 - ii. Unitemized 2,001.00
 - iii. Total (add i and ii) > 2,176.00
 - b. Political Party Committees
 - c. Other Political Committees (such as PACs)
 - d. Total Contributions (add a iii, b and c) > 2,176.00
- 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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) > 2,176.00
- 20. Total Federal Receipts (subtract line 18 from line 19) > 2,176.00

COLUMN A
Total This Period

COLUMN B
Calendar Year

175.00
2,001.00
2,176.00

525.00
7,643.00
8,168.00

2,176.00

8,168.00

2,176.00

8,168.00

2,176.00

8,168.00

II. Disbursements

- 21. Operating Expenditures:
 - a. Shared Federal/Non-Federal Activity (from Schedule H4)
 - i. Federal Share
 - ii. Non-Federal Share
 - b. Other Federal Operating Expenditures 9.92
 - c. Total Operating Expenditures (add a i, a ii, and b) > 9.92
- 22. Transfers to Affiliated/Other Party Committees
- 23. Contributions to Federal Candidates/Committees and Other Political Committees 700.00
- 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. Individual/Persons Other Than Political Committees
 - b. Political Party Committees
 - c. Other Political Committees (such as PACs)
 - d. Total Contribution Refunds (add a, b and c) >
- 29. Other Disbursements
- 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > 700.00
- 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > 700.00

III. Net Contributions/Operating Expenditures

- 32. Total Contributions (other than loans) (from line 11d) 2,176.00
- 33. Total Contribution Refunds (from line 28d)
- 34. Net Contributions (other than loans) (subtract line 33 from 32) 2,176.00
- 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > 9.92
- 36. Offsets to Operating Expenditures (from line 15)
- 37. Net Operating Expenditures (subtract line 35 from 34) > 9.92

2,176.00

8,168.00

2,176.00

8,168.00

9.92

9.92

9.92

9.92

2 5 0 3 8 5 6 J 2 7 0

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 Food Stores, 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
JOHN ALLEN 805 LONGVIEW COUNCIL BLUFFS, IA 51501 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	7-8-93	75.00
RONALD PEARSON 2500 JORDAN GROVE WEST DES MOINES, IA 50265 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: PRESIDENT, CEO Aggregate Year-to-Date > \$ 300.00	7-20-93	100.00
C. 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
D. 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
E. 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
F. 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
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

23038560297

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	175.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules 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 Food Stores, Inc. Employees' Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAUL TYRRELL CAMPAIGN 222 N. MILL NORTH ELLISH, IOWA	CONTRIBUTION TO PAUL TYRRELL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-2-93	100.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BIELEMAN FOR SENATE COMMITTEE P.O. Box 326 SULLY, IOWA 50251	CONTRIBUTION TO BILL BIELEMAN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-2-93	100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REPUBLICAN PARTY OF IOWA 521 E LOCUST DES MOINES, IOWA 50309	CONTRIBUTION TO EISENHOWER CLUB Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-28-93	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	700.00
TOTAL This Period (last page this line number only)	700.00

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

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Registered/Certified Mail

POSTMARKED

8/2/93

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

Eric Smith
PREPARER

8/9/93
DATE PREPARED

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