

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2007 SEP 12 AM 11:33

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 (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:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of I A

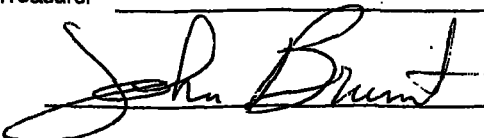
- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of I A

5. Covering Period 08 / 01 / 2007 through 08 / 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 09 / 07 / 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

695776607

**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: 08 / 01 / 2007 To: 08 / 31 / 2007

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand January 1, 2007	5608.03
(b) Cash on Hand at Beginning of Reporting Period.....	23122.78
(c) Total Receipts (from Line 19)	923.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	24045.93
7. Total Disbursements (from Line 31)	2300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24045.93
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

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

2/059522307

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period: From:

08 ' 01 ' 2007

To:

08 ' 31 ' 2007

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).....

86.33

41,653.3

(ii) Unitemized.....

836.82

165,725.7

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

923.15

20,737.90

(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).....▶

923.15

20,737.90

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)).....▶

923.15

20,737.90

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

923.15

20,737.90

2057756507

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

<p>21. Operating Expenditures:</p> <p> (a) Allocated Federal/Non-Federal Activity (from Schedule H4)</p> <p> (i) Federal Share</p> <p> (ii) Non-Federal Share.....</p> <p> (b) Other Federal Operating Expenditures</p> <p> (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))</p> <p>22. Transfers to Affiliated/Other Party Committees.....</p> <p>23. Contributions to Federal Candidates/Committees and Other Political Committees.....</p> <p>24. Independent Expenditures (use Schedule E)</p> <p>25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)</p> <p>26. Loan Repayments Made.....</p> <p>27. Loans Made.....</p> <p>28. Refunds of Contributions To:</p> <p> (a) Individuals/Persons Other Than Political Committees</p> <p> (b) Political Party Committees</p> <p> (c) Other Political Committees (such as PACs).....</p> <p> (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....</p> <p>29. Other Disbursements</p> <p>30. Federal Election Activity (2 U.S.C. §431(20))</p> <p> (a) Allocated Federal Election Activity (from Schedule H6)</p> <p> (i) Federal Share</p> <p> (ii) "Levin" Share</p> <p> (b) Federal Election Activity Paid Entirely With Federal Funds</p> <p> (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....</p> <p>31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..</p> <p>32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....</p>	<p>[Empty grid boxes for Column A data entry]</p>	<p>[Empty grid boxes for Column B data entry]</p> <p align="right">230000</p> <p align="right">230000</p>
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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)	923.15	20,737.90
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	923.15	20,737.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

27039522310

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

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

FOR LINE NUMBER: PAGE 2 OF 4
(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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) **Kleyweg-Mitchell Rose C**
 Mailing Address **5707 Pommel Court**
 City **West Des Moines IA** State **IA** Zip Code **50266**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Hy-Vee, Inc** Occupation **Asst VP**
 Receipt For: Primary General Other (specify) **Aggregate Year-to-Date**
225.00

Date of Receipt
M M / D D / Y Y Y Y
 Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial) **Lonning, John D**
 Mailing Address **9260 NW 36th St**
 City **Polk City IA** State **IA** Zip Code **50226**
 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
 Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial) **Plagge, Jeffrey L**
 Mailing Address **2703 NE Hansbrock Dr**
 City **Ankeny IA** State **IA** Zip Code **50021**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **Hy-Vee, Inc** Occupation **Asst VP**
 Receipt For: Primary General Other (specify) **Aggregate Year-to-Date**
240.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2007
 Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **300.00**
 TOTAL This Period (last page this line number only).....

27039522311

**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 4	
	<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) **Slay, Traci L.**
 Mailing Address **4920 N 142nd St**
 City **Omaha** State **NE** Zip Code **68164**
 Date of Receipt
 Amount of Each Receipt this Period
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **HyVee, Inc** Occupation **Store Director**
 Receipt For: Primary General Other (specify) **300.00**
 Aggregate Year-to-Date

B. Full Name (Last, First, Middle Initial) **Snook, Lewis W**
 Mailing Address **1004 Waterfront Dr**
 City **Ankeny** State **IA** Zip Code **50027**
 Date of Receipt **08 06 2007**
 Amount of Each Receipt this Period **33.33**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **HyVee, Inc** Occupation **Store Director**
 Receipt For: Primary General Other (specify) **333.33**
 Aggregate Year-to-Date

C. Full Name (Last, First, Middle Initial) **Staffer, Dick C**
 Mailing Address **5411 Ponderosa Drive**
 City **West Des Moines** State **IA** Zip Code **50266**
 Date of Receipt
 Amount of Each Receipt this Period **0**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **HyVee, Inc.** Occupation **Staff**
 Receipt For: Primary General Other (specify) **600.00**
 Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)..... **33.33**
 TOTAL This Period (last page this line number only).....

21577565N17

**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 4	
	<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) Sulzman, Cythra E		Date of Receipt MMDDYY 08 02 2007
Mailing Address 906 Meadowbrook Dr		Amount of Each Receipt this Period 23.00
City Kearney	State MO	
Zip Code 64060		
FEC ID number of contributing federal political committee. C		
Name of Employer HyVee	Occupation Staff	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00	

B. Full Name (Last, First, Middle Initial)		Date of Receipt
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 ▼	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
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).....▶	23.00
TOTAL This Period (last page this line number only).....▶	86.37

21577565N17

**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
	<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) _____

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period _____

B.

Full Name (Last, First, Middle Initial) _____

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period _____

C.

Full Name (Last, First, Middle Initial) _____

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional)..... ▶ _____

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

2/059522514

**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
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <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)		Date of Receipt
Mailing Address		MM / DD / YYYY
City	State Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

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

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MM / DD / YYYY
City	State Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
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).....▶	
TOTAL This Period (last page this line number only).....▶	

27039522315

**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
<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

91577965A/7

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
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)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
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)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
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).....▶	
TOTAL This Period (last page this line number only).....▶	

**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)

<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

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....

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

Handwritten signature and amount

27039522317

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
9/7/07

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jms
 PREPARER

9/12/07
 DATE PREPARED

27039522318