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2003 DEC -8 P 12:11

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4MS

Hy-Vee, Inc. Employees' Political Action Committee

ADDRESS (number and street)

5900 Westown Parkway

Check if different than previously reported. (PCC)

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)

(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)

(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)

(c) 12-Day PRE-Election Report for the

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(d) 30-Day POST-Election Report for the

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

11/01/2003

through

12/30/2003

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 Brunmit

Signature of Treasurer

Date

12/03/2003

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

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period:

From:

11 01 2003

To:

11 30 2003

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

5. (a) Cash on Hand January 1, 2003		29,375.4
(b) Cash on Hand at Beginning of Reporting Period	22,742.43	
(c) Total Receipts (from Line 18)	259.98	2,5864.87
(d) Subtotal (add Lines 5(a) and 5(c) for Column A and Lines 5(a) and 5(c) for Column B)	23,002.41	28,802.41
7. Total Disbursements (from Line 30)	5	5,800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5(d))	23,002.41	23,002.41
9. Debt 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 noncandidate 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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Ny-Vee, Inc. Employees' Political Action Committee

Report Covering the Period:

From:

11 01 2003

To:

11 30 2003

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)	33.33	
(ii) Unitemized	226.65	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	259.98	25,864.87
(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 32, page 4)	259.98	25,864.87
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 36, page 4)		
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 Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	259.98	25,864.87
20. Total Federal Receipts (subtract Line 18 from Line 19)	259.98	25,864.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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), (ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		3,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §447a(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))		2,800.00
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 24, 25, 26, 27, 28(d), and 29)		5,800.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)		5,800.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE / OF 4	
	(check only one)			
	11a <input type="checkbox"/> 13	11b <input type="checkbox"/> 14	11c <input type="checkbox"/> 15	12 <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. Ron Pearson
Full Name (Last, First, Middle Initial)
Mailing Address: **5534 Glen Oaks Pointe**
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: **Chairman, CEO, CCO**
Receipt For: Primary General
Aggregate Year-to-Date: **1,000.00**

B. Billy Balmer
Full Name (Last, First, Middle Initial)
Mailing Address: **100 Lakeland Drive**
City: **Colum IA** State: **IA** Zip Code: **51241**
FEC ID number of contributing federal political committee: **C**
Name of Employer: **Hy-Vee, Inc.** Occupation: **Store Director**
Receipt For: Primary General
Aggregate Year-to-Date: **400.00**

C. John Hubler
Full Name (Last, First, Middle Initial)
Mailing Address: **2595 Silver Oak Trail**
City: **Marietta IA** State: **IA** Zip Code: **52302**
FEC ID number of contributing federal political committee: **C**
Name of Employer: **Hy-Vee, Inc.** Occupation: **Store Director**
Receipt For: Primary General
Aggregate Year-to-Date: **400.00**

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

Any individual who has been convicted of a felony or who is a person who has been...
I certify that the information furnished on this form is true and correct to the best of my knowledge and belief, and that I am not providing the information for the purpose of committing or aiding in the commission of a crime.

**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	<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	

PAGE 7 OF 9

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

A. Full Name (Last, First, Middle Initial)
Richard Surgens

Mailing Address
3008 Jordan Grove

City State Zip Code
West Des Moines IA 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: 60000

Date of Receipt: [] [] []

Amount of Each Receipt this Period: []

B. Full Name (Last, First, Middle Initial)
Lewis Spork

Mailing Address
1900 Cedar St. Apt. E-303

City State Zip Code
Des Moines IA 50311

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: 40000

Date of Receipt: [] [] []

Amount of Each Receipt this Period: []

C. Full Name (Last, First, Middle Initial)
James DeHoch

Mailing Address
RR1 Box 123

City State Zip Code
Mount Airy IA 50854

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: 36666

Date of Receipt: 11 06 2003

Amount of Each Receipt this Period: 3333

SUBTOTAL of Receipts This Page (optional): 3333

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

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

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

A. Rodney Bean

Full Name (Last, First, Middle Initial)
Mailing Address
504 Springfield Drive
City Marshalltown IA Zip Code 50158

Date of Receipt

Amount of Each Receipt this Period

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: 30000

B. Rose Kleyweg Mitchell

Full Name (Last, First, Middle Initial)
Mailing Address
5707 Pommel Court
City West Des Moines IA Zip Code 50266

Date of Receipt

Amount of Each Receipt this Period

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: 30000

C. John Lanning

Full Name (Last, First, Middle Initial)
Mailing Address
9260 NW 36th Street
City Palk City IA Zip Code 50226

Date of Receipt

Amount of Each Receipt this Period

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: 30000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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 9	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<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. Tacci Slaybaugh

Date of Receipt
 [] [] [] [] [] []

Mailing Address
4920 N. 142nd Street

City **Omaha** State **NE** Zip Code **68164**

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

Amount of Each Receipt this Period
4

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

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

Aggregate Year-to-Date **30000**

Full Name (Last, First, Middle Initial)
B. Scott Youngberg

Date of Receipt
 [] [] [] [] [] []

Mailing Address
3510 Rimrock Drive NE

City **Decorah** State **IA** Zip Code **52402**

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

Amount of Each Receipt this Period
6

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

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

Aggregate Year-to-Date **30000**

Full Name (Last, First, Middle Initial)
C. Charlie Bell

Date of Receipt
 [] [] [] [] [] []

Mailing Address
619 Park St. # 1312

City **Des Moines** State **IA** Zip Code **50309**

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

Amount of Each Receipt this Period
2

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

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

Aggregate Year-to-Date **22000**

SUBTOTAL of Receipts This Page (optional) **12**

TOTAL This Period (last page this line number only) **12**

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

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

FOR LINE NUMBER:		PAGE 3 OF 9	
<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)
Pavel Boisjolie

Mailing Address
82854 Hwy 251

City State Zip Code
Austin MN 55912

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
24000

Date of Receipt
[] [] [] [] [] []

Amount of Each Receipt this Period
[] [] [] [] [] []

B. Full Name (Last, First, Middle Initial)
Kenneth Ritcher

Mailing Address
1018 Camps Ridge Ct

City State Zip Code
Ankeny IA 50021

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
24000

Date of Receipt
[] [] [] [] [] []

Amount of Each Receipt this Period
[] [] [] [] [] []

C. Full Name (Last, First, Middle Initial)
Wade Chalstrom

Mailing Address
436 Primrose Dr.

City State Zip Code
Hudson IA 50643

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
24000

Date of Receipt
[] [] [] [] [] []

Amount of Each Receipt this Period
[] [] [] [] [] []

SUBTOTAL of Receipts This Page (optional) [] [] [] [] [] []

TOTAL This Period (last page this line number only) [] [] [] [] [] []

**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 6 OF 7	
<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	<input type="checkbox"/> 18	<input type="checkbox"/> 19	<input type="checkbox"/> 20

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

A. Michael Christensen

Full Name (Last, First, Middle Initial)
Mailing Address: **1215 East Van Buren**
City: **Washington** State: **IA** Zip Code: **52353**

Date of Receipt: [] [] []

Amount of Each Receipt this Period: [] [] []

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: **240.00**

B. Douglas Dell

Full Name (Last, First, Middle Initial)
Mailing Address: **655 Park Ave**
City: **Brockings** State: **SD** Zip Code: **57006**

Date of Receipt: [] [] []

Amount of Each Receipt this Period: [] [] []

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**

C. Randy Edeker

Full Name (Last, First, Middle Initial)
Mailing Address: **8103 W. 129th Terrace**
City: **Overland Park** State: **KS** Zip Code: **66213**

Date of Receipt: [] [] []

Amount of Each Receipt this Period: [] [] []

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date: **75.00**

SUBTOTAL of Receipts This Page (optional) [] [] []

TOTAL This Period (last page this line number only) [] [] []

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 9

<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

A. Full Name (Last, First, Middle Initial)
Terry Evans

Mailing Address
535 Middleton Blvd
City Waterloo State IA Zip Code 50701

FEC ID number of contributing federal political committee
C

Name of Employer
HyVee, Inc. Occupation Store Director

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
24000

Date of Receipt
[] [] []

Amount of Each Receipt this Period
[]

B. Full Name (Last, First, Middle Initial)
Anthony McCann

Mailing Address
179 59th St.
City West Des Moines State IA Zip Code 50266

FEC ID number of contributing federal political committee
C

Name of Employer
HyVee, Inc. Occupation President - PDI

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
22000

Date of Receipt
[] [] []

Amount of Each Receipt this Period
[]

C. Full Name (Last, First, Middle Initial)
Mark Millsep

Mailing Address
18330 W. 160th Terrace
City Olathe State KS Zip Code 66062

FEC ID number of contributing federal political committee
C

Name of Employer
HyVee, Inc. Occupation Store Director

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
22000

Date of Receipt
[] [] []

Amount of Each Receipt this Period
[]

SUBTOTAL of Receipts This Page (optional) []

TOTAL This Period (last page this line number only) []

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

Use separate schedule(s) for each category of the Detailed Summary Page		FORM LINE NUMBERS (check only one)		PAGE 2 OF 9	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e	<input type="checkbox"/> 11f
<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)

A. Full Name (Last, First, Middle Initial)
Brian Moen

Mail Address
159 Norwood Dr

City Council Bluffs State IA Zip Code 51503

FEC ID number of contributing federal political committee
0

Name of Employer
Hylco, Inc. Occupation
Store Director

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date
2400.00

Date of Receipt
[] [] []

Amount of Each Receipt this Period
2400.00

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

Mail Address
9401 Hickory Dr

City Wabasha State IA Zip Code 52522

FEC ID number of contributing federal political committee
0

Name of Employer
Hylco, Inc. Occupation
VP-FOI

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)
Dan Schmeling

Mail Address
216 Chancery LN

City Mankato State MN Zip Code 56001

FEC ID number of contributing federal political committee
0

Name of Employer
Hylco, 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

SUBTOTAL of Receipts This Page (optional) _____

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

Amount of Each Receipt this Period
200.00

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

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

A. Kevin Sherlock
 Full Name (Last, First, Middle Initial)
 Mailing Address: **241 New Salem Dr.**
 City: **Canton** State: **IL** Zip Code: **61520**
 Date of Receipt: [] / [] / []
 Amount of Each Receipt this Period: []
 FEC ID number of contributing federal political committee: []
 Name of Employer: **Hy-Vee, Inc.** Occupation: **Store Director**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **24000**

B. Raymond Stewart Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address: **12864 Clark Street**
 City: **Clive** State: **IA** Zip Code: **50325**
 Date of Receipt: [] / [] / []
 Amount of Each Receipt this Period: []
 FEC ID number of contributing federal political committee: []
 Name of Employer: **Hy-Vee, Inc.** Occupation: **Executive Vice President**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **21000**

C. Ron Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address: **555 Westwoods Dr.**
 City: **Waukegan** State: **IA** Zip Code: **50263**
 Date of Receipt: [] / [] / []
 Amount of Each Receipt this Period: []
 FEC ID number of contributing federal political committee: []
 Name of Employer: **Hy-Vee, Inc.** Occupation: **Vice President**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **22000**

SUBTOTAL of Receipts This Page (optional) []
 TOTAL This Period (last page this line number only) **33333**

**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"/> 28	<input type="checkbox"/> 29
<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28d	<input type="checkbox"/> 28e	<input type="checkbox"/> 28f	<input type="checkbox"/> 28g

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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 _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

Category/Type _____

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

Category/Type _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

Category/Type _____

SUBTOTAL of Disbursements This Page (optional) _____

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

Federal Election Commission

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