

RECEIVED FEB 03 1997



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

JAN 29 1997

John Briggs, Treasurer
Hy-Vee Food Stores Inc. Employees'
Political Action Committee
5820 Westown Parkway
West Des Moines, IA 50266

Identification Number: C00243659

Reference: October Monthly Report (9/1/96-9/30/96)

Dear Mr. Briggs:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a political committee, other than a multi-candidate committee, from making a contribution to a candidate for federal office in excess of \$1,000 per election. Please refer to the Campaign Guide for information on how a committee qualifies for multicandidate status.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$1,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the contributor. In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on

Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

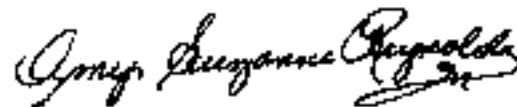
Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-Line 29 of the Detailed Summary Page discloses other disbursements during the reporting period. If this figure includes any disbursements to a payee, that aggregate greater than \$200 in the calendar year, please amend your report by itemizing the disbursements on Schedule B. 2 U.S.C. §434(b)(4)(H)(V)

-For future reporting, please be advised that only contributions to federal candidates and political committees should be itemized on a separate Schedule B supporting Line 23 of the Detailed Summary Page. Contributions to non-federal candidates and committees should be itemized on Schedule B supporting Line 29.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,



Amy Suzanne Reynolds
Reports Analyst
Reports Analysis Division

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEB 14 11 32 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Hy-Vee, Inc. Employees' Political Action Committee	2. FEC IDENTIFICATION NUMBER C 00243659
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5820 Westown Parkway	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE West Des Moines, IA 50266	

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>9-1-96</u> through <u>9-30-96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ <u>25,491.26</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>34,951.26</u>	
(c) Total Receipts (from Line 1B)	\$ <u>498.00</u>	\$ <u>12,708.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>35,449.26</u>	\$ <u>38,199.26</u>
7. Total Disbursements (from Line 3D)	\$ <u>18,050.00</u>	\$ <u>20,800.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>17,399.26</u>	\$ <u>17,399.26</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 800 E Street, NW Washington, DC 20463 Toll Free 800-424-6530 Local 202-219-3430
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

Signature of Treasurer: Date: 2-4-97

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

NAME OF COMMITTEE **Hy-Vee, Inc. Employees Political
Action Committee**

(revised 1/1/81)

	REPORT COVERING PERIOD		
	FROM 9-1-96	TO 9-30-96	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	120.00	720.00	11(b)
ii. Unitemized	378.00	4,988.00	11(a)
iii. Total (add i and ii) >	498.00	12,708.00	11(a)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(b)
d. Total Contributions (add a ii, b and c) >	498.00	12,708.00	11(c)
12. Transfers From Affiliated/Other Party Committees			11(d)
13. All Loans Received			12
14. Loan Repayments Received			13
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			14
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			15
17. Other Federal Receipts (Dividends, Interest, etc.)			16
18. Transfers from Nonfederal Account for Joint Activity			17
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	498.00	12,708.00	18
20. Total Federal Receipts (subtract line 18 from line 19) >	498.00	12,708.00	19
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	8,300.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements	12,050.00	12,500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	18,050.00	20,800.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	12,050.00	20,800.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	498.00	12,708.00	32
33. Total Contribution Refunds (from line 28c)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	498.00	12,708.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) 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, 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
Ronald Pearson 5534 Glen Oaks Pointe West Des Moines, Iowa 50266 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: CEO Aggregate Year-to-Date > \$		
John Aiken 1863 Longview Loop Council Bluffs, Iowa 51503 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$		
Terry Brown Route #1 Quail Ridge Sergeant Bluff, Iowa 51054 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$		
John Lanning 9260 N.W. 36th Street Polk City, Iowa 50226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$		
Scott Youngberg 203 Bonita Ave Marshall, Minn. 56258 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$		
Rodney Bean 8101 Wellington Blvd Johnston, Iowa 50131 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Assistant VP Aggregate Year-to-Date > \$ 225.00	9-3-96	25.00
Randy Edeker 4912 Singing Hills Blvd. Sioux City, Iowa 51106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: District Manager Aggregate Year-to-Date > \$ 225.00	9-3-96	25.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

50.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 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, 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
Charles Robertson 4112 River Oaks Dr. Des Moines, Iowa 50312	Hy, Vee, Inc.	9-3-96	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP	Aggregate Year-to-Date > \$ 225.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Wheeler 906 NW Campus Ridge Ct Ankeny, Iowa 50021	Hy Vee, Inc.	9-3-96	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP	Aggregate Year-to-Date > \$ 225.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andy McLain 3101 Crystal Drive Burlington, Iowa 52601	Hy Vee, Inc.	9-3-96	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation District Manager	Aggregate Year-to-Date > \$ 220.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Ross Lightfoot R.R. #2, Box 225 B Shenandoah, IA 51601	US Senate - Iowa	9-24-96	2,000.00
Greg Ganske 5206 Waterbury Road Des Moines, IA 50312	US House Iowa - 4th Dist.	9-24-96	1,000.00
Leonard Baswell RR #1, Box 130 Davis City, IA 50665	US House Iowa - 3rd Dist.	9-24-96	1,000.00
Jim Nossle 400 E. Delaware Manchester, IA 52057	US House Iowa - 2nd Dist.	9-24-96	500.00
Tom Latham 178 180th St Alexander, IA 50420	US House Iowa - 5th Dist.	9-24-96	500.00
Eisenhower Fund 521 E Locust Des Moines, IA 50309	Republican General Fund	9-24-96	500.00
Governors Senate Election Fund 2300 Grand Ave. Des Moines, IA 50312	Republican General Fund	9-24-96	500.00
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)

6,000.00

TOTAL This Period (last page this line number only)

6,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2 FOR LINE NUMBER 2

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, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REOWINE, JOHN 33533 S RIDGE RD SIOUX CITY, IA 51108	IOWA SENATE 2ND DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
KIBBIE, JOHN 4285 440TH AVE EMMETSBURG, IA 50536	IOWA SENATE 4TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
FRIEBE, BEAL 2106 100TH AVE ALGONA, IA 50511	IOWA SENATE 8TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
BARTZ, MARLIN 2081 410TH ST GRAFTON, IA 50440	IOWA SENATE 10TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
KEAFERN, DONALD 315 CLAY ST CEDAR FALLS, IA 50613	IOWA SENATE 12TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
ZIEMAN, LYLE 401 WILSON, BOX 368 POSTVILLE, IA 52162	IOWA SENATE 16TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
RIFE, JACK 804 FIFTH ST, BOX 877 DURANT, IA 52747	IOWA SENATE 20TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
CONNOLLY, MIKE 3458 DANIELS DUBUQUE, IA 52002	IOWA SENATE 18TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
LUNDBY, MARY 1240 14TH ST MARION, IA 52302	IOWA SENATE 26TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00

SUBTOTAL of Disbursements This Page (optional)

3,600.00

TOTAL This Period (last page has line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 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, 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
Mc Coy, Matt 1311 PORTER AVE DES MOINES, IA 50315	IOWA SENATE 34TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LANGSTON, RONALD 3301 KINGMAN BLVD DES MOINES, IA 50311	IOWA SENATE 36TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MAHONEY, D. GENE 9759 ELACREST DR CLIVE, IA 50325	IOWA SENATE 38TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GRONSTAL, MICHAEL 220 BENNETT AVE COUNCIL BLUFFS, IA 51503	IOWA SENATE 42ND DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ANGULO, JEFF 808 W JEFFERSON CRESTON, IA 50801	IOWA SENATE 44TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HEDGE, H. KAY RR #1 FREMONT, IA 52561	IOWA SENATE 48TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRAISE, GENE 1699 280TH AVE FT MADISON, IA 52627	IOWA SENATE 50TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	400.00
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)

2,800.00

TOTAL This Period (last page this line number only)

6,400.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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, 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
Jim Ross Lightfoot R.R. #2, Box 225 B Shenandoah, IA 51601	US Senate - Iowa Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	2,000.00
Greg Ganske 5206 Waterbury Road ; Des Moines, IA 50312	US House IOWA - 4TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	1,000.00
Leonard Baswell RR #1, Box 130 DAVIS CITY, IA 50065	US House IOWA - 3RD DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	1,000.00
Jim Nettle 400 E. Delaware Manchester, IA 52057	US House IOWA - 2ND DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	500.00
Tom Latham 178 180th St Alexander, IA 50420	US House IOWA - 5TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	500.00
Eisenhower Fund 521 E LOCUST Des Moines, IA 50309	Republican GENERAL FUND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	500.00
Governors Senate Election Fund 2300 Grand Ave. Des Moines, IA 50312	Republican GENERAL FUND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-24-96	500.00

SUBTOTAL of Disbursements This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

6,000.00

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

2-7-97

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

SLY
PREPARER

2-14-97
DATE PREPARED