

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2001 JAN 23 A 9:13

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> Hy-Vee, Inc. Employees' Political Action Committee	<b>2. FEC IDENTIFICATION NUMBER</b> C 00243659
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported  5820 Westown Parkway	<b>3.</b> <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:
- |                                      |                                       |  |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20            |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20           |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20           |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input checked="" type="checkbox"/> 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>11-21-00</u> through <u>12-31-00</u>		
6. (a) Cash on Hand January 1, 2000		\$ 30,731.97
(b) Cash on Hand at Beginning of Reporting Period	\$ 5,733.07	
(c) Total Receipts (from Line 19)	\$ 802.31	\$ 27,679.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 6,535.34	\$ 58,411.24
7. Total Disbursements (from Line 20)	\$ 100.00	\$ 51,975.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,435.34	\$ 6,435.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ —	For further information contact: Federal Election Commission 998 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-219-3420
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 <u>John M. Brummit</u>	Date
Signature of Treasurer 	<u>1-15-01</u>

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

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**FEC FORM 3X**  
(revised 5/93)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
Hy-Vee, Inc. Employees Political Action Committee		FROM	TO	
		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees:			
i.	Itemized (use Schedule A)	176.67	4996.67	11(a)(i)
ii.	Unitemized	625.64	22682.60	11(a)(ii)
ii.	Total (add i and ii) >	802.31	27,679.27	11(a)(ii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a, b and c) >	802.31	27,679.27	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	802.31	27,679.27	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	802.31	27,679.27	20
<b>II. Disbursements</b>				
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) >		25.90	21(c)
22.	Transfers to Affiliated/Other Party Committees		5,500.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees		8,500.00	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		5000.00	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) >		5000.00	28(d)
29.	Other Disbursements	100.00	32,950.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	100.00	51,975.90	30
31.	Total Federal Disbursements (subtract line 21 a, i from line 30) >	100.00	51,975.90	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d)	802.31	27,679.27	32
33.	Total Contribution Refunds (from line 28d)		5,000.00	33
34.	Net Contributions (other than loans)(subtract line 33 from line 32)	802.31	22,679.27	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >		25.90	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from line 35) >		25.90	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 5  
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
Ron Pearson 5534 Glen Oaks Pointe West Des Moines, IA 50266	Hy-Vee, Inc. CEO, Chairman, C.E.O., President	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen Spinelli 320 NE Wilklow Court Lee's Summit, MO 64064	Hy-Vee, Inc. Store Director	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Billy Bulman 100 Lakeview Drive Calena, IL 51241	Hy-Vee, Inc. Store Director	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Hubler 2895 Silver Oak Trail Marion, IA 52302	Hy-Vee, Inc. Store Director	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ric Jurgens 3008 Jordan Grove West Des Moines, IA 50266	Hy-Vee, Inc. Senior Vice President	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	600.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lewis Snook 6001 Creston Ave #9 Des Moines, IA 50301	Hy-Vee, Inc. Store Director	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kenneth Waller 8024 Tiburon Place Johnston, IA 50131	Hy-Vee, Inc. Vice President	—	—
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$	500.00	

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_

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 15 FOR LINE NUMBER

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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
John Allen 1863 Langston Loop Council Bluffs, IA 51503	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rodney Bean 8101 Wellington Blvd Johnston, IA 50131	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rose Kleywey Mitchell 5707 Pammel Court West Des Moines, IA 50266	Hy-Vee, Inc. Occupation: Vice President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Lowning 9260 N.W. 36th St. Polk City, IA 50226	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Scott Youngberg 7309 1st Ave. SW Cedar Rapids, IA 52405	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Randy Edaker 8103 W. 129th Terrace Overland Park, KS 66219	Hy-Vee, Inc. Occupation: Director of Operations	12-1-00	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles Robertson 1854 NW 150th Ct. Cline, IA 50325	Hy-Vee, Inc. Occupation: Vice President	12-1-00	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5  
FOR LINE NUMBER

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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
Rick Anderson 215 Yorktown Pike Mason City, IA 50401	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlie Ball 2912 Druid Hill Drive Des Moines, IA 50315	Hy-Vee, Inc. Occupation: Vice President	12-1-00	20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Boisjolie RR #4 Box 188 Austin, MN 55912	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Christensen 1215 East Van Buren Washington, IA 52353	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig Coughlin 2946 19th Ave N Fort Dodge, IA 50501	Hy-Vee, Inc. Occupation: Store Director	12-5-00	20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doug Doll 1416 3rd St. Brookings S.D. 57006	Hy-Vee, Inc. Occupation: Store Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony McCann 2230 Timbercreek Drive Marion, IA 52302	Hy-Vee, Inc. Occupation: Director of Operations	12-1-00	20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		

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

60.00

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 4 OF 5  
FOR LINE NUMBER

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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
Mark Millsap 18330 W. 160th Terrace Olathe, KS 66062	Hy-Vee, Inc. Occupation: Store Director	12-5-00	20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
Brian Moran 159 Norwood Council Bluffs, IA 51503	Hy-Vee, Inc. Occupation: Store Director	---	---
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
Dan Schmedding 15 Picadilly Place Mankato, MN 56001	Hy-Vee, Inc. Occupation: Store Director	---	---
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
Kevin Sheilock 1750 N. 4th Ave #6 Canton, IL 61520	Hy-Vee, Inc. Occupation: Store Director	---	---
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
Tim Sullivan 1311 Baldwin Harlan, IA 51537	Hy-Vee, Inc. Occupation: Store Director	---	---
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
Rebecca Swinton 4739 Pizarro Court Cedar Falls, IA 52641	Hy-Vee, Inc. Occupation: Store Director	---	---
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
Ron Taylor 555 Westwood's Dr. Waukee, IA 50263	Hy-Vee, Inc. Occupation: Vice President	12-1-00	20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		

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

40.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 5  
FOR LINE NUMBER

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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
Lena Thomson 1009 10th Ave SW Waverly, IA 50677 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Director Aggregate Year-to-Date > \$ 200.00	—	—
Kenneth Butler 1018 Campus Ridge CT Ankeny, IA 50021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Director Aggregate Year-to-Date > \$ 240.00	—	—
Allen Delaney 4101 Sugar Creek Pl Lincoln, NE 68156 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Store Director Aggregate Year-to-Date > \$ 200.00	12-5-00	16.67
Raymond Stewart Jr. 12864 Clark St. Clive, IA 50325 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Senior Vice President Aggregate Year-to-Date > \$ 220.00	12-1-00	10.00
Jeff Swartzendruber 2544 New 162nd Clive, IA 50325 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Asst Vice President Aggregate Year-to-Date > \$ 200.00	—	—
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

SUBTOTAL of Receipts This Page (optional) ..... 26.67  
 TOTAL This Period (last page this line number only) ..... 176.67

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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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
Citizens for Kuhn 2667 240th St. Charles City, IA 50616	Iowa House District 29 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-14-00	100.00
B. 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
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) .....

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

100.00

