

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

2004 SEP 16 A 9:01

Office Use Only

1. NAME OF COMMITTEE (in full) USE FED MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. Hy-Vee, Inc. Employees' Political Action Committee

12FE4MS

ADDRESS (number and street) 6820 Westown Parkway West Des Moines IA 50266

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00243659

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 08 01 2004 through 08 31 2004

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 Brunant

Signature of Treasurer [Handwritten Signature] Date 09 09 2004

NOTE: Submission of false, omitted, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5487g.

**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:

08 01 2004

To:

08 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>		<u>23,815.55</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>39,437.43</u>	
(c) Total Receipts (from Line 19)	<u>7,381.4</u>	<u>189,100.2</u>
(d) Subtotal (add Lines 5(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>40,175.57</u>	<u>423,255.7</u>
7. Total Disbursements (from Line 30)	<u>200.00</u>	<u>2,350.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>39,975.57</u>	<u>399,755.7</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	



This committee was qualified as a multi-candidate committee. (see FEC Form 1M)

For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9580  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

**Ky-Vee, Inc. Employees' Political Action Committee**

Report Covering the Period:

From:

08 01 2004

To:

08 31 2004

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)	2500	
(ii) Unitemized	71314	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	73814	1851002
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(i), (b), and (c)) (Carry Totals to Line 32, page 4)	73814	1851002
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)	73814	1851002
20. Total Federal Receipts (subtract Line 18 from Line 19)	73814	1851002



**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) .....	738.14	18510.02
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	738.14	18510.02
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0	0

**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  11b  11c  12  
 13  14  15  16  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 organizations.

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

Full Name (Last, First, Middle initial)  
 A. Ron Pearson

Mailing Address  
5534 Glen Oaks Pointe

City West Des Moines State IA Zip Code 50266

FEC ID number of contributing federal political committee: C

Name of Employer: Hy-Vee, Inc. Occupation: Chairman

Receipt For:  
 Primary  General  
 Other (specify)   

Aggregate Year-to-Date 250.00

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

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle initial)  
 B. Billy Bulman

Mailing Address  
100 Lakewood Drive

City Colona State IL Zip Code 61241

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 300.00

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

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle initial)  
 C. John Hubler

Mailing Address  
2895 Silver Oak Trail

City Mason 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  
 Other (specify)   

Aggregate Year-to-Date 300.00

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

Amount of Each Receipt this Period  
300.00

SUBTOTAL of Receipts This Page (optional) 850.00

TOTAL This Period (last page this line number only) 850.00

**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)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (in full)

Hy-Vee, Inc. Employees' Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Lewis Snook

Mailing Address  
1004 Waterfront Drive  
City Ankeny IA Zip Code 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: 300.00

Date of Receipt

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
Richard Jurgens

Mailing Address  
3008 Jordan Drive  
City West Des Moines IA Zip Code 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: 450.00

Date of Receipt

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
Marcus Hall

Mailing Address  
1219 West 15th St South  
City Newton IA Zip Code 50208

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

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

FDCR LINE NUMBER: PAGE 3 OF 4  
(check only one)  
11a 11b 11c 12  
13 14 15 16 17

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NAME OF COMMITTEE (in Full)

Hy-Vee, Inc. Employees' Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rose Mitchell

Date of Receipt

Month: [ ] Day: [ ] Year: [ ]

Mailing Address

5707 Pammel Court

City

West Des Moines IA 50264

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 ▼

22,500

Full Name (Last, First, Middle Initial)

B. John Lansing

Date of Receipt

Month: [ ] Day: [ ] Year: [ ]

Mailing Address

9260 Ave 36th St

City

Polk City IA 50226

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 ▼

22,500

Full Name (Last, First, Middle Initial)

C. Tara Slaybaugh

Date of Receipt

Month: [ ] Day: [ ] Year: [ ]

Mailing Address

4930 N. 142nd Street

City

Omaha NE 68164

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 ▼

22,500

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)  
 11a  11b  11c  12  
 13  14  15  16  17  
 PAGE 4 OF 4

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NAME OF COMMITTEE (In Full)

*Hy-Vee Inc. Employees' Political Action Committee*

Full Name (Last, First, Middle Initial)

A. *Scott Youngberg*

Mailing Address

*3510 Rim Rock Drive NE*

City

*Cedar Rapids*

State

*IA*

Zip Code

*52402*

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

*08 03 2004*

Amount of Each Receipt this Period

*225.00*

Full Name (Last, First, Middle Initial)

B. *Randy Edeker*

Mailing Address

*2955 Bellary Dr SW*

City

*West Des Moines*

State

*IA*

Zip Code

*50265*

FEC ID number of contributing federal political committee.

*C*

Name of Employer

*Hy-Vee Inc.*

Occupation

*Asst. V.P.*

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

*200.00*

Date of Receipt

*08 03 2004*

Amount of Each Receipt this Period

*250.00*

Full Name (Last, First, Middle Initial)

C.

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 ▼

SUBTOTAL of Receipts This Page (optional)

*250.00*

TOTAL This Period (last page this line number only)

*250.00*

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(a) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)						PAGE 1 OF 1	
<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						

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

**A.**

Full Name (Last, First, Middle Initial) **Swati Dandekar Campaign** Date of Disbursement **08/16/2004**

Mailing Address **2731 38th Ave**

City **Marron** State **IA** Zip Code **52302** Amount of Each Disbursement this Period **2000**

Purpose of Disbursement **Contribution** Category/Type **Other**

Candidate Name **Swati Dandekar**

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **▼**

State: **IA** District: **36**

**B.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Disbursement \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Amount of Each Disbursement this Period \_\_\_\_\_

Purpose of Disbursement \_\_\_\_\_ Category/Type \_\_\_\_\_

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **▼**

State: \_\_\_\_\_ District: \_\_\_\_\_

**C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Disbursement \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Amount of Each Disbursement this Period \_\_\_\_\_

Purpose of Disbursement \_\_\_\_\_ Category/Type \_\_\_\_\_

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **▼**

State: \_\_\_\_\_ District: \_\_\_\_\_

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

TOTAL This Period (last page this line number only) \_\_\_\_\_

**2000**

**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
Swati Dandekar Campaign 2771 38th Ave Marian, IA 52302	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-16-04	200.00
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) .....

200.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 9-8-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> Postmark Illegible	Postmarked
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JS</i> PREPARER (5/2004)	9-16-04 DATE PREPARED