

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTIONS  
COMMISSION MAIL ROOM

JUL 20 11 45 AM

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

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

ADDRESS (number and street)  Check if different than previously reported  
5820 Westown Parkway

CITY, STATE and ZIP CODE  
West Des Moines, IA 50266

2. FEC IDENTIFICATION NUMBER  
C 00243659

3.  This committee has qualified as a multicandidate  
committee. (see FEC FORM 1M)

## 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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
54-99 through 5-31-99		
6. (a) Cash on Hand January 1, 1999		\$ 2,791.61
(b) Cash on Hand at Beginning of Reporting Period	\$ 14,410.97	
(c) Total Receipts (from Line 19)	\$ 5,706.33	\$ 17,075.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 20,117.30	\$ 19,867.30
7. Total Disbursements (from Line 30)	\$ 1,000.00	\$ 250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 19,117.30	\$ 19,117.30
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule G and/or Schedule D)	\$ 0	

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 W. Brunmit

Signature of Treasurer

*John W. Brunmit*

Date

7-16-99

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 6/93)

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

(revised 1/1/91)

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

REPORT COVERING PERIOD  
FROM **5-1-99** TO **5-31-99**

**I. Receipts**

	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	<del>5,000.00</del>	6,600.00	11(a)(i)
ii. Unitemized	706.33	10,475.69	11(a)(ii)
iii. Total (add i and ii) >	5706.33	17,075.69	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a, b and c) >	5706.33	17,075.69	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) >	5706.33	17,075.69	19
20. Total Federal Receipts (subtract line 18 from line 19) >	5706.33	17,075.69	20

**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, b, and c) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	-	(900.00)	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. Individual/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	1000.00	1650.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1000.00	750.00	30
31. Total Federal Disbursements (subtract line 21 a, ii from line 30) >	1000.00	750.00	31

**III. Net Contributions/Operating Expenditures**

32. Total Contributions (other than loans)(from line 11d)	5706.33	17,075.69	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	5706.33	17,075.69	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	5706.33	17,075.69	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE      OF       
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
Pearson, Ron 5534 Glen Oaks Pointe West Des Moines, IA 50266 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: Chairman, CEO, President Aggregate Year-to-Date > \$ 400.00		0
B. Full Name, Mailing Address and ZIP Code Hurwitz, Lou 5104 Brookview Drive West Des Moines, IA 50266 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Lerner Distributing Occupation: President Aggregate Year-to-Date > \$ 250.00		0
C. Full Name, Mailing Address and ZIP Code Spinelli, Stephen 320 NE Wicklow Court Lees Summit, MO 64064 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 > \$ 300.00		0
D. Full Name, Mailing Address and ZIP Code Jurgens, Ric 3008 Jordan Grove West Des Moines, IA 50266 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: V.P. Aggregate Year-to-Date > \$ 300.00		0
E. Full Name, Mailing Address and ZIP Code Waller, Kenneth 8024 Tiburon Place Johnston, IA 50131 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee, Inc. Occupation: V.P. - President PDI Aggregate Year-to-Date > \$ 250.00		0
F. Full Name, Mailing Address and ZIP Code Hy-Vee, Inc. 5820 Westown Parkway West Des Moines, Iowa 50266 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	 Occupation: Aggregate Year-to-Date > \$ 500.00	5-11-99	5,000.00
G. Full Name, Mailing Address and ZIP Code  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)	5000.00
TOTAL This Period (last page this line number only)	5,000.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7-16-95
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>JML</i> PREPARER	 7-20-95 DATE PREPARED