

THE HY-VEE EMPLOYEES' PAC

A Political Action Committee

JAN 12 12 52 PM '94

1401 Osceola Avenue
Chariton, Iowa, 50049
Phone 515-774-2121

January 3, 1994

CERTIFIED MAIL

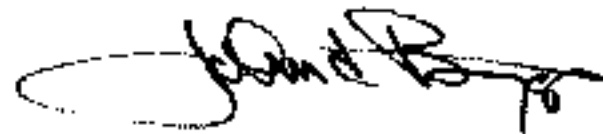
Federal Election Commission
1325 K Street N W
Washington D C 20463

Gentlemen:

Enclosed herewith is our Report of Receipts and Disbursements for a Political Committee other than an Authorized Committee, FEC Form 3X, covering the period from December 1, 1993, through December 31, 1993.

Yours very truly,

THE HY-VEE EMPLOYEES' PAC



John Briggs, Treasurer

JB/gg

enclosure

3 4 3 3 9 7 2 1 7 1 1

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

JAN 12 12 52 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Hy-Vee Food Stores, Inc. Political Action Committee ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1801 OSCOLOM AVE CITY, STATE and ZIP CODE Chariton, Iowa 50049	2. REC IDENTIFICATION NUMBER C 00243659 3. This committee qualified as a multi-candidate committee DURING THIS Reporting Period on (DATE)
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4. TYPE OF REPORT

- (a) April 15 Quarterly 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
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non election Year Only)
- Termination Report
- Twelve day report preceding election on _____ in the State of _____
- Thirteen 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>1-2-1-93</u> through <u>12-31-93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 18,437.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 26,423.58	
(c) Total Receipts (from Line 19)	\$ 379.00	\$ 11,955.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 26,802.58	\$ 30,392.50
7. Total Disbursements (from Line 30)	\$ 100.00	\$ 3,689.92
8. Cash on Hand at Close of Reporting Period (abstract Line 7 from (c) to (b))	\$ 26,702.58	\$ 26,702.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

For further information contact:
Federal Election Commission
555 F Street NW
Washington, DC 20543
Toll Free 800-421-9530
Local 202-724-3471

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: 1-3-94

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

[revised 1/1/91]

NAME OF COMMITTEE: **Hy-Vee Food Stores, Inc.
Employees' Political Action Committee**

REPORT COVERING PERIOD
FROM **12/1/93** TO **12/31/93**

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 (also Schedule A)		160.00	4,065.00
ii. Unitemized		219.00	7,890.00
iii. Total		379.00	11,955.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions		379.00	11,955.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
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		379.00	11,955.00
20. Total Federal Receipts		379.00	11,955.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		0.00	9.92
c. Total Operating Expenditures		0.00	9.92
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		100.00	3,680.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributor Refunds			
29. Other Disbursements			
30. Total Disbursements		100.00	3,689.92
31. Total Federal Disbursements		100.00	3,689.92
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		379.00	11,955.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from 32)		379.00	11,955.00
35. Total Federal Operating Expenditures			9.92
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures			9.92

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

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 Food Stores, Inc. Employees' Political Action Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Allen 805 Longview Council Bluffs, Iowa 51501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>Store Manager</u> Aggregate Year-to-Date > \$ 300.00	--	--
Ronald Pearson 2500 Jordan Green West Des Moines, Iowa 50265 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>President</u> Aggregate Year-to-Date > \$ 400.00	--	--
Rodney Bean 416 Centennial Drive Cherokee, Iowa 51012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>Director of Operations</u> Aggregate Year-to-Date > \$ 300.00	12-2-93	25.00
Charles Robertson 1032 N. Ninth St. Chariton, Iowa 50049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>VP</u> Aggregate Year-to-Date > \$ 300.00	12-2-93	25.00
Michael Wheeler 906 N.W. Campus Ridge Court Ankeny, Iowa 50021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>VP</u> Aggregate Year-to-Date > \$ 300.00	12-2-93	25.00
Terry Brown RR 1 Quail Ridge Sergeant Bluff, Iowa 51054 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>Store Manager</u> Aggregate Year-to-Date > \$ 300.00	12-7-93	25.00
Ken Butcher 1018 Campus Ridge Court Ankeny, Iowa 50021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee Food Stores, Inc. Occupation: <u>Store Manager</u> Aggregate Year-to-Date > \$ 280.00	12-7-93	20.00

SUBTOTAL of Receipts This Page (optional) 120.00

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 2 OF 3 FOR LINE NUMBER

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NAME OF COMMITTEE (in full)

Hy-Vee Food Stores, Inc. Employees' Political Action Committee

0403372175

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Frymyell 4937 Utah Drive Ames, Iowa 50010 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	--	--
Jamey Gifford 413 39th Street West Des Moines, Iowa 50265 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	--	--
Carter D Howe 1620 Bilgaria Ct NE Cedar Rapids, Iowa 52402 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	--	--
Richard Langston 2902 30th St. Old Oakwood Moline, Illinois Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	--	--
Brian Moon 159 Norwood Drive Council Bluffs, Iowa 51503 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 240.00	--	--
Scott Youngberg 203 Bonita Ave. Marshall, Mo 64258 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Store Manager Aggregate Year-to-Date > \$ 225.00	--	--
Charles Bell 900 N Grand Chariton, Iowa 50049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: VP Aggregate Year-to-Date > \$ 240.00	12-2-93	20.00

SUBTOTAL of Receipts This Page (optional) 20.00

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 3 OF 3
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 Food Stores, 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 Taylor 13116 Elmorte Jewwood, Kansas 66209 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy-Vee Food Stores, Inc. Occupation: Director of Operations Aggregate Year-to-Date > \$ 220.00	12-2-93	20.00
B. 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
C. 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
D. 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
E. 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
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)	20.00
TOTAL This Period (last page this line number only)	160.00

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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 Food Stores, 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
<i>CITIZENS FOR BOSWELL RR1, Box 130 DAVIS CITY, IOWA 50065</i>	<i>LEONARD L BOSWELL, IOWA STATE SENATOR, 44TH DIST. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>12-21-93</i>	<i>100.00</i>
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

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SUBTOTAL of Disbursements This Page (top row)	<i>100.00</i>
TOTAL This Period (last page this line number only)	<i>100.00</i>

**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 <i>1-3-94</i>
<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
<i>Jm H</i>	<i>1-12-94</i>
PREPARER	DATE PREPARED

94035721778