

THE HY-VEE EMPLOYEES' PAC

A Political Action Committee

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

5820 Westown Parkway
West Des Moines, Iowa 50266
Phone: 515-287-2800

OCT 22 12 57 PM '96

October 18, 1996

CERTIFIED MAIL

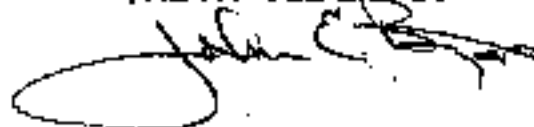
Federal Election Commission
999 E Street N W
Washington, DC 20463

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 October 1, 1996, through October 15, 1996.

Yours very truly,

THE HY-VEE EMPLOYEES' PAC



John Briggs, Treasurer

JB/gg

enclosure

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Oct 22 12 57 PM '96

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		
CITY, STATE and ZIP CODE West Des Moines, IA 50266		
3. <input type="checkbox"/> 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 GENERAL
(Type of Election)
election on 11-5-96 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>10-1-96</u> through <u>10-16-96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 25,491.26
(b) Cash on Hand at Beginning of Reporting Period	\$ 17,399.26	
(c) Total Receipts (from Line 1B)	\$ 2,755.00	\$ 15,463.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 20,154.26	\$ 40,954.26
7. Total Disbursements (from Line 3C)	\$ 6,100.00	\$ 26,900.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 14,054.26	\$ 14,054.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	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 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

10-11-96

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 9/93)

**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 10-1-96	TO: 10-16-96	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	1,020.00	1,740.00	11(a)(i)
ii.	Unitemized	1,735.00	13,723.00	11(a)(ii)
iii.	Total (add i and ii) >	2,755.00	15,463.00	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a ii, b and c) >	2,755.00	15,463.00	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) >	2,755.00	15,463.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	2,755.00	15,463.00	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 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	4,500.00	12,800.00	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	1,400.00	14,100.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,100.00	26,900.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,100.00	26,900.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	2,755.00	15,463.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	2,755.00	15,463.00	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) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 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, 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 > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Allen 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 > \$ 300.00	10-10-96	75.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
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 > \$ 300.00	10-10-96	75.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
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 > \$ 300.00	10-10-96	75.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Youngberg 203 Donita 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 > \$ 300.00	10-10-96	75.00
F. 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, 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 > \$ 250.00	10-1-96	25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randy Edeter 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 > \$ 250.00	10-1-96	25.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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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
Charles Robertson 4112 River Oaks Dr. Des Moines, Iowa 50312 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy, Vee, Inc. Occupation: VP	10-1-96 Aggregate Year-to-Date > \$ 250.00	25.00
Mike Wheeler 906 NW Campus Ridge Ct Ankeny, Iowa 50021 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: VP	10-1-96 Aggregate Year-to-Date > \$ 250.00	25.00
Andy McCann 3101 Crystal Drive Burlington, Iowa 52601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: District Manager	10-1-96 Aggregate Year-to-Date > \$ 240.00	20.00
Paul Boisjolie 507 North 4th Keokuk, IA 52632 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: Store Manager	10-10-96 Aggregate Year-to-Date > \$ 240.00	60.00
Kenneth Butcher 1018 Campus Ridge Ct. Ankeny, IA 50021 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: Store Manager	10-10-96 Aggregate Year-to-Date > \$ 240.00	60.00
Joe Frizzell 4937 Utah Ames, IA 50014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: Store Manager	10-10-96 Aggregate Year-to-Date > \$ 200.00	0.00
Jimmy Gifford 413 39th St West Des Moines, IA 50265 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hy Vee, Inc. Occupation: Store Manager	10-10-96 Aggregate Year-to-Date > \$ 240.00	60.00

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	250.00

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, 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 Halbmaier 208 Aurora Boone, Iowa 50036	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	Aggregate Year-to-Date: 240.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carter Dean Howe 1621 Sunrise Drive NE Solon, Iowa 52333	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	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
Richard Lampton 2912 30th St Moline, Ill 61265	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	Aggregate Year-to-Date: 240.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brian Moon 159 Kenwood Council Bluffs, IA	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	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
George Norton 576 Napa Valley Dr. Waukegan, IA 51263	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	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
Tim Sulliman 1311 Baldwin Hannibal, IA 51537	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	Aggregate Year-to-Date: 240.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rebecca Swinton 603 Fireside Dr Cedar Falls, IA 52601	Hy-Vee, Inc.	10-10-96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Store Manager	Aggregate Year-to-Date: 240.00	

SUBTOTAL of Receipts This Page (optional) 420.00

TOTAL This Period (last page this line number only) 1,020.00

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
CON GUTKNECHT FOR CONGRESS 1530 GREENVIEW DR SW ST 108 MIDWAY OFFICE PLAZA ROCHESTER, MN 55902	US HOUSE MINNESOTA - 1ST DIST Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-96	1,000.00
B. Full Name, Mailing Address and ZIP Code CHUCK HAGEL FOR US SENATE 7700 LEESBURG PIKE SUITE 307 N FALLS CHURCH, VA 22043	US SENATE NEBRASKA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-96	1,000.00
C. Full Name, Mailing Address and ZIP Code JOHN THUNE FOR CONGRESS P.O. Box 516 SIOUX FALLS, SD 57101	US HOUSE S DAKOTA - AT LARGE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-96	1,000.00
D. Full Name, Mailing Address and ZIP Code FMI FOODS 800 CONNECTICUT AVE NW WASHINGTON DC 20006	PAL TO PAL TRANSFER Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-96	1,500.00
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)

4,500.00

TOTAL This Period (last page this line number only)

4,500.00

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

10-17-96

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

MA
PREPARER

10-22-96
DATE PREPARED