

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER 2004 JUL 14 A 10:27 Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Hy-Vee, Inc. Employees Political Action Committee

ADDRESS (number and street)

5820 WESTOWN PARKWAY

Check if different than previously reported. (ACC)

West Des Moines

IA 50266

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00243659

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

- Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER)

(c) 12-Day PRE-Election Report for the:

- Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G), Runoff (30R), Special (30S)

Election on

in the State of

5. Covering Period

06 01 2004

through

06 30 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 Brumitt

Signature of Treasurer

[Handwritten Signature]

Date

07 09 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

Office Use Only

FEC FORM 3X (Revised 1/01)

**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:

06 01 2004

To:

06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		238,155.55
(b) Cash on Hand at Beginning of Reporting Period	348,128.4	
(c) Total Receipts (from Line 19)	76,314	1,301,043
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35,575.98	368,259.8
7. Total Disbursements (from Line 30)	900.00	2,150.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	346,759.8	346,759.8
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)		



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

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

Hy-Vee, Inc. Employees' Political Action Committee

Report Covering the Period: From: 06/01/2004 To: 06/30/2004

L 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)	<u>0</u>	
(ii) Unitemized	<u>76,314</u>	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	<u>76,314</u>	<u>130,104.3</u>
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)	<u>76,314</u>	<u>130,104.3</u>
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)	<u>76,314</u>	<u>130,104.3</u>
20. Total Federal Receipts (subtract Line 18 from Line 19)		

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	500.00
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) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	400.00	1650.00
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	900.00	2150.00
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	900.00	2150.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	763.14	13010.43
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	763.14	13010.43
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE / OF	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 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 committee.

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 ▼

500.00

Date of Receipt

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Billy Bulman

Mailing Address

100 Lakeview Drive

City Columa 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 ▼

200.00

Date of Receipt

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. John Hybler

Mailing Address

2895 Silver Oak Trail

City Marion 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 ▼

200.00

Date of Receipt

Amount of Each Receipt this Period

200.00

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: PAGE 2 OF 2
(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. Lewis Snook

Mailing Address

1004 Waterfront Drive

City Ankeny

State 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 ▼

2000.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

0

Full Name (Last, First, Middle Initial)

B. Richard Jurgens

Mailing Address

3008 Jordan Drive

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

President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

0

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 ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 02/95)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Hy-Vee, Inc. Employees' Political Action Committee

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
6-22-04	ID# CK# 1246	Boswell for Congress PO Box 6220 Des Moines, IA 50309	Contribution (1)	\$ 500.00
6-25-04	ID# 662 CK# 1247	Rents for State House Committee 2740 S. Glass St. Sioux City, IA 51106	Contribution (1)	480.00
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$900.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:
(1) campaign purposes,
(2) constituency expenses, and
(3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 58.8(3)(f).)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)							
	<input type="checkbox"/> 21b <input type="checkbox"/> 26	<input type="checkbox"/> 22 <input type="checkbox"/> 27	<input type="checkbox"/> 23 <input type="checkbox"/> 28a	<input type="checkbox"/> 24 <input type="checkbox"/> 28b	<input type="checkbox"/> 25 <input type="checkbox"/> 28c	<input type="checkbox"/> 29	PAGE / OF /	

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

A. Full Name (Last, First, Middle Initial) Boswell for Congress Date of Disbursement 06/22/2004

Mailing Address PO Box 6220

City Des Moines IA State IA Zip Code 50309 Amount of Each Disbursement this Period 50000

Purpose of Disbursement Contribution Category/Type OLL

Candidate Name Leonard Boswell

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

State: _____ District: _____

B. Full Name (Last, First, Middle Initial) Christopher Rants for State House Com. Date of Disbursement 06/25/2004

Mailing Address 2740 S. Glass St.

City Sioux City IA State IA Zip Code 51106 Amount of Each Disbursement this Period 40000

Purpose of Disbursement Contribution Category/Type OLL

Candidate Name Christopher Rants

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

State: IA District: 54

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: _____


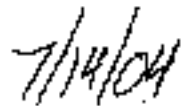
SUBTOTAL of Disbursements This Page (optional) _____

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

90000

**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) 7/19/04
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<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
 PREPARER	 DATE PREPARED