PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE 5820 WESTOWN PARKWAY ADDRESS (number and street) (Check if address is changed) WEST DES MOINES 50266 IΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jortner@hy-vee.com (Check if address is changed) Optional Second E-Mail Address Ifreeman@hy-vee.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00243659 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. JOHN ORTNER Type or Print Name of Treasurer JOHN ORTNER [Electronically Filed] 04 2014 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1 (Revised 06/2012)

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		X Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Comr		Page 3
	NC EMPLOYEES' POLITICAL ACTION COMMITT	
6. Name of Any C	connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership P	AC Sponsor
Hy-Vee, Inc.		
Mailing Address	5820 Westown Pkwy	
3		
	West Des Moines IA 50266	
	CITY STATE ZIP	CODE
_		CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leaders	hip PAC Sponsor
 Custodian of Re books and record 	ecords: Identify by name, address (phone number optional) and position of the person in possessi	ion of committee
Full Name	JOHN ORTNER	
Mailing Address	2204 MEADOW LANE	
3		
	WEST DES MOINES I IA 50265	1 1 1
Title or Position	CITY STATE ZIP (CODE
Treasurer		- 2800
	ne name and address (phone number optional) of the treasurer of the committee; and the name a gent (e.g., assistant treasurer).	nd address of
Full Name	JOHN ORTNER	
of Treasurer		
Mailing Address	2204 MEADOW LANE	

| WEST DES MOINES

Title or Position Treasurer CITY

50265

515

ZIP CODE

2800

267

STATE

Telephone number

. 20 (evised 02/2009)	Page 4
Full Name of Designated Antho Agent	ony Hensley	
Mailing Address	2226 SE Viriginia Ave	
	Topeka KS CITY STATE	66605 ZIP CODE
Title or Position Designated Agent		15 - 267 - 2800
safety deposit boxes or Name of Bank, Deposite	ory, etc.	
safety deposit boxes or Name of Bank, Deposite	maintains funds. ory, etc.	
safety deposit boxes or Name of Bank, Deposite	maintains funds. ory, etc.	
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