

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) 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 C00243659

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(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)

(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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

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

Election on

MM / DD / YYYY

in the State of

State

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

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

Election on

MM / DD / YYYY

in the State of

State

5. Covering Period

MM / DD / YYYY 05 / 01 / 2019

through

MM / DD / YYYY 05 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KELLER, JOSEPH, J, ,

Type or Print Name of Treasurer

Signature of Treasurer

KELLER, JOSEPH, J, ,

[Electronically Filed]

Date

MM / DD / YYYY 06 / 26 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2019"/> | | 103877.73 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 125332.40 | |
| (c) Total Receipts (from Line 19) | 12651.73 | 58606.40 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 137984.13 | 162484.13 |
| 7. Total Disbursements (from Line 31)..... | 0.00 | 24500.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 137984.13 | 137984.13 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

Write or Type Committee Name

HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

| I. 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)..... | 8982.25 | 29283.44 |
| (ii) Unitemized | 3669.48 | 29322.96 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 12651.73 | 58606.40 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 12651.73 | 58606.40 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 12651.73 | 58606.40 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 12651.73 | 58606.40 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 24500.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 0.00 | 24500.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 24500.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 12651.73 | 58606.40 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 12651.73 | 58606.40 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Check 3399 for the Republican Party of Iowa was incorretly date 5/7/19, but it was not wrote until 6/7/19.

Form/Schedule:

Transaction ID:

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. AGOSTINO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18136 MASON ST
 City ELKHORN State NE Zip Code 68022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PHARMACY INNOVATION/BUSIN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43070
 Amount of Each Receipt this Period 100.00
 Memo Item

B. AGOSTINO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18136 MASON ST
 City ELKHORN State NE Zip Code 68022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PHARMACY INNOVATION/BUSIN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43337
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ALLEN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 EAST STATE ST
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43071
 Amount of Each Receipt this Period 41.66
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 241.66 |
| 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: (check only one) | PAGE 8 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. ALLEN, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 EAST STATE ST
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43338
 Amount of Each Receipt this Period 41.66
 Memo Item

B. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 SUMMIT PLACE
 City INDIANOLA State IA Zip Code 50125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Asst General Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43072
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 SUMMIT PLACE
 City INDIANOLA State IA Zip Code 50125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Asst General Council
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43339
 Amount of Each Receipt this Period 50.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 141.66 |
| 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 9 OF 37
(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

A. ANDERSON, RIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2039 235TH ST
 City MARSHALLTOWN State IA Zip Code 50158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43160
 Amount of Each Receipt this Period 83.33
 Memo Item

B. BASCH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 WINDSOR CIRCLE
 City PAPILLION State NE Zip Code 68046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43165
 Amount of Each Receipt this Period 41.66
 Memo Item

C. BLUM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3720 STATE STREET
 City GRAND ISLAND State NE Zip Code 68803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43079
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 249.99
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: (check only one) | PAGE 10 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. BLUM, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3720 STATE STREET

| | | |
|----------------------|-------------|-------------------|
| City GRAND ISLAND | State NE | Zip Code 68803 |
|----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 31 | | 2019 |

Transaction ID : SA11AI.43346

Amount of Each Receipt this Period
125.00

Memo Item

B. BOOK, JENNIFER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2167 3RD AVE SW

| | | |
|-----------------|-------------|-------------------|
| City ALTOONA | State IA | Zip Code 50009 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.70

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 06 | | 2019 |

Transaction ID : SA11AI.43169

Amount of Each Receipt this Period
83.34

Memo Item

C. BURNS, RODNEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 305 HAWTHORNE DR

| | | |
|-----------------|-------------|-------------------|
| City NORWALK | State IA | Zip Code 50211 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
416.65

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 06 | | 2019 |

Transaction ID : SA11AI.43175

Amount of Each Receipt this Period
83.33

Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 291.67 |
| 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: (check only one) | PAGE 11 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. CARNEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 SE RIDGE CREST ST
 City GRIMES State IA Zip Code 50111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43178
 Amount of Each Receipt this Period 108.33
 Memo Item

B. CERNIN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3406 PENNY LANE
 City MARION State IA Zip Code 52302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP Operations, Eastern Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 466.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43181
 Amount of Each Receipt this Period 93.33
 Memo Item

C. COLE, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 JULIA ANN DRIVE NW
 City CEDAR RAPIDS State IA Zip Code 52405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43184
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 301.66 |
| 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: (check only one) | PAGE 12 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. CONGER, SHANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2054 PALISADES LANE
 City WATERTOWN State SD Zip Code 57201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43185
 Amount of Each Receipt this Period 83.33
 Memo Item

B. CONWAY, BENJAMIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3840 BERKSHIRE AVE
 City AMES State IA Zip Code 50010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43186
 Amount of Each Receipt this Period 83.34
 Memo Item

C. CROCKER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2039 GOLFVIEW CIRCLE
 City CENTERVILLE State IA Zip Code 52544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP Operations; Eastern Central
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43089
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 266.67 |
| 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: (check only one) | PAGE 13 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. CROCKER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2039 GOLFOVIEW CIRCLE

| | | |
|---------------------|-------------|-------------------|
| City CENTERVILLE | State IA | Zip Code 52544 |
|---------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) AVP Operations; Eastern Central |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 31 | / | 2019 |

Transaction ID : SA11AI.43356

Amount of Each Receipt this Period
100.00

Memo Item

B. DASCHEL, TOM, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 S FALCON COURT

| | | |
|----------------|-------------|-------------------|
| City HINTON | State IA | Zip Code 51024 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 06 | / | 2019 |

Transaction ID : SA11AI.43188

Amount of Each Receipt this Period
84.00

Memo Item

C. Desaulniers, Christopher, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 S 19TH ST

| | | |
|-----------------|-------------|-------------------|
| City CLINTON | State IA | Zip Code 52732 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
516.65

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 06 | / | 2019 |

Transaction ID : SA11AI.43190

Amount of Each Receipt this Period
103.33

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 287.33 |
| 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: (check only one) | PAGE 14 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. DRAHEIM, MELISSA, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4074 STONE POINT DR NE
 City ROCHESTER State MN Zip Code 55906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 466.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43193
 Amount of Each Receipt this Period 93.33
 Memo Item

B. DYHRKOPP, CHRISTIAN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3563 39TH AVE
 City COLUMBUS State NE Zip Code 68601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43194
 Amount of Each Receipt this Period 83.33
 Memo Item

C. EDEKER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3703 133RD ST
 City URBANDALE State IA Zip Code 50322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Chariman of the Board, CEO, President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2083.35

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43092
 Amount of Each Receipt this Period 416.67
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 593.33 |
| 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: (check only one) | PAGE 15 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. EDEKER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3703 133RD ST
 City URBANDALE State IA Zip Code 50322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Chariman of the Board, CEO, President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.02

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43359
 Amount of Each Receipt this Period 416.67
 Memo Item

B. EWOLDT, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 N 169TH ST
 City OMAHA State NE Zip Code 68116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43197
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FRANCK, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6518 RIVER OAK CT
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, WESTERN DISTRICT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 516.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43203
 Amount of Each Receipt this Period 103.33
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 620.00 |
| 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: (check only one) | PAGE 16 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. FUHRMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5597 N RIDGE CIRCLE
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, EASTERN DISTR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.65

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43098
 Amount of Each Receipt this Period 103.33
 Memo Item

B. FUHRMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5597 N RIDGE CIRCLE
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, EASTERN DISTR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43365
 Amount of Each Receipt this Period 103.33
 Memo Item

C. FULLER, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 MAJESTIC CT NE
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 541.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43206
 Amount of Each Receipt this Period 108.33
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 314.99 |
| 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: (check only one) | PAGE 17 OF 37 |
| | <input checked="" 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 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. GOSCH, JEREMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 VALLEY OAKS DR
 City WINONA State MN Zip Code 55987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTHERN DIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43101
 Amount of Each Receipt this Period 110.00
 Memo Item

B. GOSCH, JEREMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 VALLEY OAKS DR
 City WINONA State MN Zip Code 55987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTHERN DIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43368
 Amount of Each Receipt this Period 110.00
 Memo Item

C. GRIESEN BROCK, JOHN, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6405 S CRANE AVE
 City SIOUX FALLS State SD Zip Code 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43102
 Amount of Each Receipt this Period 150.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| 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: (check only one) | PAGE 18 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. GRIESEN BROCK, JOHN, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6405 S CRANE AVE
 City SIOUX FALLS State SD Zip Code 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43369
 Amount of Each Receipt this Period 150.00
 Memo Item

B. HARRISON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 SWEETWATER DR
 City DES MOINES State IA Zip Code 50320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, POS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43106
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HARRISON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 SWEETWATER DR
 City DES MOINES State IA Zip Code 50320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, POS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43372
 Amount of Each Receipt this Period 25.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| 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: (check only one) | PAGE 19 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. HELDENBRAND, MATTHEW, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 NE 87TH LANE
 City ANKENY State IA Zip Code 50023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43225
 Amount of Each Receipt this Period 83.34
 Memo Item

B. HOFELDT, BRANDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1103 Ridgewood Dr
 City Huxley State IA Zip Code 50124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43228
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Hoppman, Paul, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3728 S BEATRICE DR
 City INDEPENDENCE State MO Zip Code 64055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 583.30

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43229
 Amount of Each Receipt this Period 116.66
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 250.00 |
| 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: (check only one) | PAGE 20 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. JAMES, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1932 PLUM TREE ROAD

| | | |
|--------------------|-------------|-------------------|
| City BETTENDORF | State IA | Zip Code 52722 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 01 | | 2019 |

Transaction ID : SA11AI.43112

Amount of Each Receipt this Period
100.00

Memo Item

B. JAMES, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1932 PLUM TREE ROAD

| | | |
|--------------------|-------------|-------------------|
| City BETTENDORF | State IA | Zip Code 52722 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 31 | | 2019 |

Transaction ID : SA11AI.43378

Amount of Each Receipt this Period
100.00

Memo Item

C. KADING, TRACY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2155 COUNTRY CLUB DRIVE

| | | |
|--------------------|-------------|-------------------|
| City MASON CITY | State IA | Zip Code 50401 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Store Director |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 06 | | 2019 |

Transaction ID : SA11AI.43235

Amount of Each Receipt this Period
150.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| 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: (check only one) | PAGE 21 OF 37 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. KASKA, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 N 6TH ST
 City CHARITON State IA Zip Code 50049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, HY-VEE, INC, CEO MIDWEST HI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43114
 Amount of Each Receipt this Period 65.00
 Memo Item

B. KASKA, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 N 6TH ST
 City CHARITON State IA Zip Code 50049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, HY-VEE, INC, CEO MIDWEST H
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43380
 Amount of Each Receipt this Period 65.00
 Memo Item

C. KOPRIVA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2516 NE INNSBRUCK
 City ANKENY State IA Zip Code 50021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTH CENTRAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 516.70

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43237
 Amount of Each Receipt this Period 103.34
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 233.34 |
| 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: (check only one) | PAGE 22 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. LABS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 DRAKE DR
 City QUINCY State IL Zip Code 62305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43240
 Amount of Each Receipt this Period 83.33
 Memo Item

B. LAMMERS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3330 CABOT ROAD
 City QUINCY State IL Zip Code 62301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 516.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43241
 Amount of Each Receipt this Period 103.33
 Memo Item

C. LUDWIG, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 LEWIS COURT
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 458.30

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43122
 Amount of Each Receipt this Period 91.66
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 278.32 |
| 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: (check only one) | PAGE 23 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. LUDWIG, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 LEWIS COURT
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 549.96

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43388
 Amount of Each Receipt this Period 91.66
 Memo Item

B. MASTERSON, KRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46503 264TH STREET
 City HARTFORD State SD Zip Code 57033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 541.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43251
 Amount of Each Receipt this Period 108.33
 Memo Item

C. MERTES, TALLYAN, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 N 149TH AVE
 City OMAHA State NE Zip Code 68116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43253
 Amount of Each Receipt this Period 30.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 229.99 |
| 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: (check only one) | PAGE 24 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. MEZGER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 4th AVENUE N
 City DENISON State IA Zip Code 51442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43254
 Amount of Each Receipt this Period 83.33
 Memo Item

B. MICHAEL, TIMOTHY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51498 315TH AVE
 City RUSSELL State IA Zip Code 50238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43255
 Amount of Each Receipt this Period 83.33
 Memo Item

C. MILLS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19483 258TH AVE
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43258
 Amount of Each Receipt this Period 83.33
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 249.99 |
| 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: (check only one) | PAGE 25 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. MITCHELL, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2213 RODLYN
 City WEBSTER CITY State IA Zip Code 50595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43259
 Amount of Each Receipt this Period 83.33
 Memo Item

B. MOKOSAK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8214 W. 127TH PLACE
 City OVERLAND PARK State KS Zip Code 66212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43127
 Amount of Each Receipt this Period 83.33
 Memo Item

C. MOKOSAK, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8214 W. 127TH PLACE
 City OVERLAND PARK State KS Zip Code 66212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43393
 Amount of Each Receipt this Period 83.33
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 249.99 |
| 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: (check only one) | PAGE 26 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. NELSON, ANGELA, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 506 E RUSSELL

| | | |
|-------------------|-------------|-------------------|
| City JEFFERSON | State IA | Zip Code 50129 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Pharmacy Supervisor |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.65

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 01 | | 2019 |

Transaction ID : SA11AI.43129

Amount of Each Receipt this Period
83.33

Memo Item

B. NELSON, ANGELA, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 506 E RUSSELL

| | | |
|-------------------|-------------|-------------------|
| City JEFFERSON | State IA | Zip Code 50129 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) Pharmacy Supervisor |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 31 | | 2019 |

Transaction ID : SA11AI.43395

Amount of Each Receipt this Period
83.33

Memo Item

C. PETERSON, TONIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 3RD STREET S

| | | |
|------------------|-------------|-------------------|
| City HUMBOLDT | State IA | Zip Code 50548 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) Hy-Vee Inc | Occupation (for Individual) AVP, Recruiting |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | | 06 | | 2019 |

Transaction ID : SA11AI.43270

Amount of Each Receipt this Period
50.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 216.66 |
| 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: (check only one) | PAGE 27 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. REIF, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7515 GLYNOAKS DRIVE
 City LINCOLN State NE Zip Code 68516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : SA11AI.43276
 Amount of Each Receipt this Period
 83.33
 Memo Item

B. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4541 50th STREET
 City DES MOINES State IA Zip Code 50310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : SA11AI.43277
 Amount of Each Receipt this Period
 83.33
 Memo Item

C. RUSSELL, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2613 E HIGH ST
 City DAVENPORT State IA Zip Code 52803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2019
Transaction ID : SA11AI.43134
 Amount of Each Receipt this Period
 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 266.66 |
| 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: (check only one) | PAGE 28 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. RUSSELL, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2613 E HIGH ST
 City DAVENPORT State IA Zip Code 52803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43400
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SCHIPULL, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 E 39TH ST
 City SOUTH SIOUX CITY State NE Zip Code 68776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43281
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SESKER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5413 CAREY DRIVE
 City CEDAR FALLS State IA Zip Code 50613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43285
 Amount of Each Receipt this Period 83.34
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 233.34 |
| 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: (check only one) | PAGE 29 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. SHERIDAN, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3207 144TH ST
 City URBANDALE State IA Zip Code 50323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43289
 Amount of Each Receipt this Period 83.33
 Memo Item

B. SHERLOCK, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 251 ASHWOOD DRIVE
 City SYCAMORE State IL Zip Code 60178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43290
 Amount of Each Receipt this Period 41.67
 Memo Item

C. SHERLOCK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 MUDDY CREED
 City CORALVILLE State IA Zip Code 52241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, Food Service Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 833.35

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43135
 Amount of Each Receipt this Period 166.67
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 291.67 |
| 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 30 OF 37 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. SHERLOCK, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 MUDDY CREED
 City CORALVILLE State IA Zip Code 52241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, Food Service Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.02

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43401
 Amount of Each Receipt this Period 166.67
 Memo Item

B. SIMMONS, KENNETH, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 ARBOR CIRCLE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43291
 Amount of Each Receipt this Period 41.67
 Memo Item

C. SKOKAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35115 BURGUNDY CIRCLE
 City WAUKEE State IA Zip Code 50263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43136
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 508.34
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: (check only one) | PAGE 31 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. SKOKAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35115 BURGUNDY CIRCLE
 City WAUKEE State IA Zip Code 50263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43402
 Amount of Each Receipt this Period 300.00
 Memo Item

B. SPELTZ, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 390 RIVER BLUFF DR
 City WINDOM State MN Zip Code 56101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43292
 Amount of Each Receipt this Period 100.00
 Memo Item

C. STEENHOEK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 18TH ST
 City WINDOM State MN Zip Code 56101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43293
 Amount of Each Receipt this Period 83.33
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 483.33 |
| 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: (check only one) | PAGE 32 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. STEPHENS, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 VETERANS MEMORIAL DRIVE
 City CARLISLE State IA Zip Code 50047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43294
 Amount of Each Receipt this Period 83.33
 Memo Item

B. STEWART, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 REED COURT
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PERISHABLES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 916.65

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43143
 Amount of Each Receipt this Period 83.33
 Memo Item

C. STEWART, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 REED COURT
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PERISHABLES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.98

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43409
 Amount of Each Receipt this Period 83.33
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 249.99 |
| 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: (check only one) | PAGE 33 OF 37 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. STREIT, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 344 S 48TH STREET
 City WEST DES MOINES State IA Zip Code 50265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43298
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STREIT, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 WOODCHUCK LN
 City MACOMB State IL Zip Code 61455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43300
 Amount of Each Receipt this Period 60.00
 Memo Item

C. STREIT, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 WINCHESTER CIRCLE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43301
 Amount of Each Receipt this Period 83.34
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 193.34 |
| 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: (check only one) | PAGE 34 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. TODD, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5416 S 188TH ST
 City OMAHA State NE Zip Code 68135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : SA11AI.43312
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. VENENGA, COLLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3613 ITHACA AVE
 City SPIRIT LAKE State IA Zip Code 51360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : SA11AI.43315
 Amount of Each Receipt this Period
 83.34
 Memo Item

C. VONDRAK, DANIEL, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 CONISTON CR
 City SERGEANT BLUFF State IA Zip Code 51054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 466.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2019
Transaction ID : SA11AI.43317
 Amount of Each Receipt this Period
 93.33
 Memo Item

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|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 226.67 |
| 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: (check only one) | PAGE 35 OF 37 |
| <input checked="" 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 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. WEBB, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ROBIN HILL LANE
 City RED OAK State IA Zip Code 51566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43325
 Amount of Each Receipt this Period 83.33
 Memo Item

B. WERY, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9482 DEER VALLEY DR NE
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43328
 Amount of Each Receipt this Period 125.00
 Memo Item

C. WILLIAMS, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 DEVONWOOD DRIVE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, PHARMACY SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 01 / 2019
Transaction ID : SA11AI.43152
 Amount of Each Receipt this Period 75.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 283.33 |
| 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: (check only one) | PAGE 36 OF 37 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. WILLIAMS, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 DEVONWOOD DRIVE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, PHARMACY SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2019
Transaction ID : SA11AI.43418
 Amount of Each Receipt this Period 75.00
 Memo Item

B. WINBLADE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2409 N 7TH EAST
 City NEWTON State IA Zip Code 50208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43333
 Amount of Each Receipt this Period 41.67
 Memo Item

C. WIRTH, TRAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 JOY DRIVE
 City WATERLOO State IA Zip Code 50701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 06 / 2019
Transaction ID : SA11AI.43334
 Amount of Each Receipt this Period 25.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 141.67 |
| 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: (check only one) | PAGE 37 OF 37 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

A. WOODWARD JR, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6117 194TH AVE
 City OMAHA State NE Zip Code 68135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2019
Transaction ID : SA11AI.43155
 Amount of Each Receipt this Period 83.33
 Memo Item

B. WOODWARD JR, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6117 194TH AVE
 City OMAHA State NE Zip Code 68135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2019
Transaction ID : SA11AI.43421
 Amount of Each Receipt this Period 83.33
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 166.66 |
| TOTAL This Period (last page this line number only).....▶ | 8982.25 |