

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
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** 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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(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 09 01 2010 through 09 30 2010

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 Brummit

Signature of Treasurer Electronically Filed by John Brummit Date 10 18 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		55555.01
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	89783.77									
(c) Total Receipts (from Line 19)	1549.99	38778.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	91333.76	94333.76								
7. Total Disbursements (from Line 31)	74400.00	77400.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	16933.76	16933.76								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	410.00	7530.00
(ii) Unitemized	1139.99	31248.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1549.99	38778.75
(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)	1549.99	38778.75
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 Transfer (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))	1549.99	38778.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1549.99	38778.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	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.....	74400.00	77400.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	74400.00	77400.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74400.00	77400.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	1549.99	38778.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1549.99	38778.75
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

**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 6 / 43
	<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Brett Bremser		Date of Receipt
	Mailing Address 4019 139th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 01 / 2010
	City	State	Zip Code
	Yrbandale	IA	50323
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10240
Name of Employer Hy-Vee, Inc.		Occupation Store Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	<input type="text"/> 40.00
			payroll

B.	Full Name (Last, First, Middle Initial) John Diaz		Date of Receipt
	Mailing Address 1008 E 17th Street S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 07 / 2010
	City	State	Zip Code
	Newton	IA	50208
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10203
Name of Employer Hy-vee, Inc.		Occupation Store Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	<input type="text"/> 30.00
			payroll

C.	Full Name (Last, First, Middle Initial) Randy B Edeker		Date of Receipt
	Mailing Address 2955 Belfry Dr SW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 01 / 2010
	City	State	Zip Code
	Waukee	IA	50263
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10249
Name of Employer Hy-Vee, Inc.		Occupation Executive Vice President, Chief Operat	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	<input type="text"/> 50.00
			payroll

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 43
	<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.	Full Name (Last, First, Middle Initial) Laura S Fulton		Date of Receipt
	Mailing Address 9047 R57		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2010
	City	State	Zip Code
	Indianola	IA	50125
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10251
Name of Employer Hy-Vee, Inc.		Occupation Asst. Vice President, Operations (East)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
			payroll

B.	Full Name (Last, First, Middle Initial) Christopher Higginbotham		Date of Receipt
	Mailing Address 2710 tara Hills St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 07 / 2010
	City	State	Zip Code
	Council Bluffs	IA	51503
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10208
Name of Employer Hy-Vee, Inc.		Occupation Store Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 20.00
			payroll

C.	Full Name (Last, First, Middle Initial) Brent C Highfill		Date of Receipt
	Mailing Address 9805 Skyline Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2010
	City	State	Zip Code
	Johnston	IA	50131
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10253
Name of Employer Hy-Vee, Inc.		Occupation President, Florist Distributing, Inc./	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
			payroll

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 70.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 43
	<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.	Full Name (Last, First, Middle Initial) Mark Millsap		Date of Receipt
	Mailing Address 18330 W 160th Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2010
	City	State	Zip Code
	Olathe	KS	66062
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10266
Name of Employer Hy-Vee, Inc.		Occupation Asst. Vice President, Store Set-Up	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
			payroll

B.	Full Name (Last, First, Middle Initial) Andrew Nielsen		Date of Receipt
	Mailing Address 9401 Hickory Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2010
	City	State	Zip Code
	Urbandale	IA	50322
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10268
Name of Employer Hy-Vee, Inc.		Occupation Asst. Vice President, Importing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00
			payroll

C.	Full Name (Last, First, Middle Initial) Michael Skokan		Date of Receipt
	Mailing Address 501 52nd Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 01 / 2010
	City	State	Zip Code
	West Des Moines	IA	50265
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.10271
Name of Employer Hy-Vee, Inc.		Occupation Vice President, Financial Reporting, A	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	<input type="text"/> 50.00
			payroll

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 43
(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. Full Name (Last, First, Middle Initial)
Nathan Stewart

Mailing Address 5201 Lakecrest Drive

City State Zip Code
Shawnee KS 66218

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

Name of Employer Occupation
Hy-Vee, Inc. Store Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2010

Transaction ID: SA11AI.10274

Amount of Each Receipt this Period
20.00

payroll

B. Full Name (Last, First, Middle Initial)
Daniel Strait

Mailing Address 1613 29th St NW

City State Zip Code
Cedar Rapids IA 52405

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

Name of Employer Occupation
Hy-Vee, Inc. Store Set-up Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2010

Transaction ID: SA11AI.10275

Amount of Each Receipt this Period
25.00

payroll

C. Full Name (Last, First, Middle Initial)
Cynthia Sulzman

Mailing Address 906 meadowbrook Drive

City State Zip Code
Kearney MO 64060

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

Name of Employer Occupation
Hy-Vee, Inc. Director, Event Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2010

Transaction ID: SA11AI.10277

Amount of Each Receipt this Period
25.00

payroll

SUBTOTAL of Receipts This Page (optional) ► 70.00

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:	PAGE 10 / 43
	(check only one)	
<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.	Full Name (Last, First, Middle Initial) Collin Venenga		Date of Receipt
	Mailing Address 1312 Cityview drive		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Denison	IA	51442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Hy-Vee, Inc.		Occupation Store Director	Transaction ID: SA11AI.10223 Amount of Each Receipt this Period <input type="text" value="25.00"/> payroll
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

B.	Full Name (Last, First, Middle Initial) Kristin Williams		Date of Receipt
	Mailing Address 15238 Chalco Pointe Dr.		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	omaha	NE	68138
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Hy-Vee, Inc.		Occupation Pharmacy Supervisor	Transaction ID: SA11AI.10285 Amount of Each Receipt this Period <input type="text" value="25.00"/> payroll
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="410.00"/>

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Ako Abdul-Samad <hr/> Mailing Address 1506 18th Street <hr/> City Des Moines State IA Zip Code 50314 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 66 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10356 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2010
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dwayne Alons <hr/> Mailing Address 1314 7th Street <hr/> City Hull State IA Zip Code 51239 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10365 Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2010
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bill Anderson <hr/> Mailing Address 1138 Mason Avenue <hr/> City Pierson State IA Zip Code 51048 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 27 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10311 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

700.00

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

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Richard Anderson	Transaction ID: SB23.10366 Date of Disbursement 09 / 22 / 2010
	Mailing Address PO Box 157	Amount of Each Disbursement this Period 250.00
	City Clarinda State IA Zip Code 51632	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 97	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Richard Arnold	Transaction ID: SB23.10394 Date of Disbursement 09 / 23 / 2010
	Mailing Address Rt @ Box 156	Amount of Each Disbursement this Period 500.00
	City Russell State IA Zip Code 50238	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 72	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Beard	Transaction ID: SB23.10424 Date of Disbursement 09 / 28 / 2010
	Mailing Address 1592 Manawa Trail Rd	Amount of Each Disbursement this Period 250.00
	City Decorah State IA Zip Code 52101	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Deborah Berry</p> <p>Mailing Address 241 Madison St</p> <p>City Waterloo State IA Zip Code 50703</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 22</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10346 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Dennis Black</p> <p>Mailing Address 5239 E 156th Street S.</p> <p>City Grinnell State IA Zip Code 50112</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 27</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10302 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Nancy Boettger</p> <p>Mailing Address 926 Ironwood Road</p> <p>City Harlan State IA Zip Code 51537</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 29</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10308 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

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

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.

Full Name (Last, First, Middle Initial)
Joe Bolkom

Transaction ID: SB23.10307
Date of Disbursement

Mailing Address 728 2nd Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

City Iowa City State IA Zip Code 52245

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

250.00

Candidate Name

Office Sought: House Senate President
State: IA District: 39
Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Bruce BRALEY FOR CONGRESS

Transaction ID: SB23.10435
Date of Disbursement

Mailing Address PO Box 390

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

City Waterloo State IA Zip Code 50704

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

1000.00

Candidate Name

Office Sought: House Senate President
State: IA District: 01
Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Terry Branstad

Transaction ID: SB23.10288
Date of Disbursement

Mailing Address 3590 109th st

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	1	0

City Urbandale State IA Zip Code 50322

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011
Category/
Type

20000.00

Candidate Name
Terry Branstad

Office Sought: House Senate President
State: District:
Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

21250.00

TOTAL This Period (last page this line number only)

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**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Royd Chambers <hr/> Mailing Address 1001 7th Street <hr/> City Sheldon State IA Zip Code 51201 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10340 Date of Disbursement 09 / 15 / 2010
	Amount of Each Disbursement this Period 100.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dennis Cohoon <hr/> Mailing Address Box 157 <hr/> City Burlington State IA Zip Code 52601 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 88 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10387 Date of Disbursement 09 / 23 / 2010
	Amount of Each Disbursement this Period 100.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Peter Cownie <hr/> Mailing Address 686 58th Place <hr/> City West Des Moines State IA Zip Code 50266 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 60 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10401 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

450.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Betty De Boef Mailing Address 10972 170th Street City What Cheer State IA Zip Code 50268 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 76 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10440 Date of Disbursement 09 / 30 / 2010
	Amount of Each Disbursement this Period 250.00 011 Category/Type
B. Full Name (Last, First, Middle Initial) David Deyoe Mailing Address 911 Shagbark Drive City Nevada State IA Zip Code 50201 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10370 Date of Disbursement 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00 011 Category/Type
C. Full Name (Last, First, Middle Initial) Bill Dix Mailing Address PO Box 220 City Shell Rock State IA Zip Code 50670 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10325 Date of Disbursement 09 / 10 / 2010
	Amount of Each Disbursement this Period 1000.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Cecil Dolecheck <hr/> Mailing Address PO Box 157 <hr/> City Clarinda State IA Zip Code 51632 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 97 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10388 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
B. Full Name (Last, First, Middle Initial) Jack Drake <hr/> Mailing Address 52462 Juniper Rd <hr/> City Lewis State IN Zip Code 51544 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 57 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10305 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
C. Full Name (Last, First, Middle Initial) Robert Dvorsky <hr/> Mailing Address 412 6th Street <hr/> City Coralville State IA Zip Code 52241 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10422 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.

Full Name (Last, First, Middle Initial)
Greg Forristall

Transaction ID: SB23.10389
Date of Disbursement

Mailing Address 11917 370th Street

M M / D D / Y Y Y Y
09 / 23 / 2010

City State Zip Code
Macedonia IA 51549

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 98

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
JEFF FORTENBERRY

Transaction ID: SB23.10432
Date of Disbursement

Mailing Address 1610 N. Street

M M / D D / Y Y Y Y
09 / 29 / 2010

City State Zip Code
Lincoln NE 68508

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: NE District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Julian Garrett

Transaction ID: SB23.10333
Date of Disbursement

Mailing Address 19978 115th Ave

M M / D D / Y Y Y Y
09 / 13 / 2010

City State Zip Code
Indianola IA 50125

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 73

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Mary gaskill <hr/> Mailing Address 509 E. 4th St <hr/> City Ottumwa State IA Zip Code 52501 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name William May <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 06	Transaction ID: SB23.10292 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) CHARLES E GRASSLEY <hr/> Mailing Address PO BOX 1000 <hr/> City DES MOINES State IA Zip Code 50304 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name CHARLES E GRASSLEY <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 00	Transaction ID: SB23.10405 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sam GRAVES FOR CONGRESS <hr/> Mailing Address 2345 Grand, Suite 2400 <hr/> City Kansas City State MO Zip Code 64108 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 06	Transaction ID: SB23.10434 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3100.00
TOTAL This Period (last page this line number only) ▶	_____

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.

Full Name (Last, First, Middle Initial)
Sandra Greiner

Transaction ID: SB23.10313
Date of Disbursement

Mailing Address 1005 Hwy 92

/ /

City Keota State IA Zip Code 52248

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 45

Disbursement For: 2010
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Michael Gronstal

Transaction ID: SB23.10364
Date of Disbursement

Mailing Address 220 Bennett Ave

/ /

City Council Bluffs State IA Zip Code 51503

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 50

Disbursement For: 2010
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Hagenow Iowa House

Transaction ID: SB23.10355
Date of Disbursement

Mailing Address 1915 69th Street

/ /

City Windsor heights State IA Zip Code 50322

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) David Heaton	Transaction ID: SB23.10306 Date of Disbursement 09 / 09 / 2010
	Mailing Address 510 E Washington Street	Amount of Each Disbursement this Period 250.00
	City Mt. Pleasant State IA Zip Code 52641	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 91	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Lisa Heddens	Transaction ID: SB23.10382 Date of Disbursement 09 / 23 / 2010
	Mailing Address 4541 513th Ave	Amount of Each Disbursement this Period 250.00
	City Ames State IA Zip Code 50014	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 46	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Robert Hogg	Transaction ID: SB23.10327 Date of Disbursement 09 / 10 / 2010
	Mailing Address 2750 Otis Road SE	Amount of Each Disbursement this Period 250.00
	City Cedar Rapids State IA Zip Code 52403	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

750.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.

Full Name (Last, First, Middle Initial)
Lance Horbach

Transaction ID: SB23.10375
Date of Disbursement

Mailing Address 1014 Oakland Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	0

City State Zip Code
tama IA 52339

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IA District: 40

B.

Full Name (Last, First, Middle Initial)
Wally Horn

Transaction ID: SB23.10319
Date of Disbursement

Mailing Address 101 Stoney Point Rd SW

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	0

City State Zip Code
Cedar Rapids IA 52404

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IA District: 17

C.

Full Name (Last, First, Middle Initial)
Hubert Houser

Transaction ID: SB23.10368
Date of Disbursement

Mailing Address 34697 Beechnut Road

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	0

City State Zip Code
Carson IA 51525

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: IA District: 49

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Bruce Hunter</p> <p>Mailing Address 452 Wilmers Ave</p> <p>City Des Moines State IA Zip Code 50315</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 62</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10342 Date of Disbursement: 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Daniel Huseman</p> <p>Mailing Address 6144 Y Ave</p> <p>City Auriela State IA Zip Code 51005</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 53</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10406 Date of Disbursement: 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Geri Huser</p> <p>Mailing Address 213 7th Street NW</p> <p>City Altoona State IA Zip Code 50009</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 42</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10304 Date of Disbursement: 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

850.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) IOWA DEMOCRATIC PARTY</p> <p>Mailing Address 5661 Fleur Drive</p> <p>City Des Moines State IA Zip Code 50321</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10421 Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Iowa Grocers PAC</p> <p>Mailing Address 2540 106th Street Suite 102</p> <p>City Des Moines State IA Zip Code 50322</p> <p>Purpose of Disbursement PAC to PAC Candidate Name Iowa Grocers PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10286 Date of Disbursement 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) David Jacoby</p> <p>Mailing Address 2308 Northridge Drive</p> <p>City Coralville State IA Zip Code 52241</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 30</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10429 Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11250.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) David Johnson</p> <p>Mailing Address PO Box 279</p> <p>City Ocheyedan State IA Zip Code 51354</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10413 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ronald Jorgensen</p> <p>Mailing Address 5921 Pine View Dr</p> <p>City Sioux City State IA Zip Code 51106</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 54</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10415 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jeff Kaufmann</p> <p>Mailing Address 2125 Old Muscatone Rd</p> <p>City Wilton State IA Zip Code 52778</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 79</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10390 Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Keith Keith A Kreiman For Senate <hr/> Mailing Address 406 Parkview Dr <hr/> City Bloomfield State IA Zip Code 52537 <hr/> Purpose of Disbursement Contribution Candidate Name Keith A Kreiman Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 47 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10300 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Doris Kelley <hr/> Mailing Address 1922 Mayfair <hr/> City Waterloo State IA Zip Code 50701 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 20 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10359 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) John Kibbie <hr/> Mailing Address Po Box 190 <hr/> City Emmetsburg State IA Zip Code 50536 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10397 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Kevin Koester	Transaction ID: SB23.10335 Date of Disbursement 09 / 13 / 2010
	Mailing Address 3514 SW Edgewood Lane	Amount of Each Disbursement this Period 250.00
	City Ankeny State IA Zip Code 50023	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 70	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Bob Kressig	Transaction ID: SB23.10426 Date of Disbursement 09 / 28 / 2010
	Mailing Address 3523 Veralta Drive	Amount of Each Disbursement this Period 250.00
	City Cedar Falls State IA Zip Code 50613	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Steve Lukan	Transaction ID: SB23.10412 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1888 Smith	Amount of Each Disbursement this Period 250.00
	City New Vienna State IA Zip Code 50265	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 32	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) James Lykam</p> <p>Mailing Address 2906 W 35th Street</p> <p>City Davenport State IA Zip Code 52806</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 85</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10352 Date of Disbursement: 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kevin McCarthy</p> <p>Mailing Address 17024 255th Ave</p> <p>City Spirit Lake State IA Zip Code 51360</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 67</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10331 Date of Disbursement: 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Matt McCoy</p> <p>Mailing Address 110 35th Street</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 31</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10403 Date of Disbursement: 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Paul McKinley <hr/> Mailing Address 21884 483rd LN <hr/> City Chariton State IA Zip Code 50049 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 36 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10343 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Helen Miller <hr/> Mailing Address 1936 15th Ave North <hr/> City Fort Dodge State IA Zip Code 50501 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 49 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10384 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Linda Miller <hr/> Mailing Address 6766 Ridges Court <hr/> City Bettendorf State IA Zip Code 52722 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 82 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10350 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Larry Noble</p> <p>Mailing Address 8915 NW Polk City Drive</p> <p>City Ankeny State IA Zip Code 50023</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 35</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10337 Date of Disbursement: 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Jo Oldson</p> <p>Mailing Address 418 38th Place</p> <p>City Des Moines State IA Zip Code 50312</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 61</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10396 Date of Disbursement: 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Richard Olive</p> <p>Mailing Address 1264 Northridge Rd</p> <p>City Story City State IA Zip Code 50248</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10362 Date of Disbursement: 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Rick Olson</p> <p>Mailing Address 3012 E. 31st Ave.</p> <p>City Des Moines State IA Zip Code 50317</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 68</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10360 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Steve Olson</p> <p>Mailing Address 2731 221st Street</p> <p>City DeWitt State IA Zip Code 52742</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 83</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10351 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Tyler Olson</p> <p>Mailing Address PO Box 2389</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 38</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10324 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Eric Palmer	Transaction ID: SB23.10438 Date of Disbursement 09 / 30 / 2010
	Mailing Address 114 First Ave E	Amount of Each Disbursement this Period 250.00
	City oskaloosa State IA Zip Code 52577	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 75	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kraig Paulsen	Transaction ID: SB23.10400 Date of Disbursement 09 / 24 / 2010
	Mailing Address PO Box 250	Amount of Each Disbursement this Period 2500.00
	City Hiawatha State IA Zip Code 52233	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 35	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Janet Petersen	Transaction ID: SB23.10386 Date of Disbursement 09 / 23 / 2010
	Mailing Address 4300 Beaver Hills Drive	Amount of Each Disbursement this Period 250.00
	City Des Moines State IA Zip Code 50310	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 64	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Dawn Pettengill <hr/> Mailing Address PO Box 76 <hr/> City Mt. Auburn State IA Zip Code 52313 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 39 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10430 Date of Disbursement 09 / 28 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
B. Full Name (Last, First, Middle Initial) Brian Quirk <hr/> Mailing Address 1011 Sunset <hr/> City New hampton State IA Zip Code 50659 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10423 Date of Disbursement 09 / 28 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
C. Full Name (Last, First, Middle Initial) Scott Raecker <hr/> Mailing Address 9011 Iltis <hr/> City Urbandale State IA Zip Code 50322 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 63 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10402 Date of Disbursement 09 / 24 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

**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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Amanda Ragan <hr/> Mailing Address 20 Granite Court SE <hr/> City Mason City State IA Zip Code 50401 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10357 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
B. Full Name (Last, First, Middle Initial) Henry Rayhons <hr/> Mailing Address 2820 Oak Ave <hr/> City Independence State IA Zip Code 50644 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10371 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
C. Full Name (Last, First, Middle Initial) Michael Reasoner <hr/> Mailing Address 702 New York Ave <hr/> City Creston State IA Zip Code 50801 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 95 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10420 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF IOWA <hr/> Mailing Address 621 E. Ninth Street <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10339 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/Type 008
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kristen Running - Marquardt <hr/> Mailing Address 3515 Field Stone PL SW <hr/> City Cedar Rapids State IA Zip Code 52404 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 33 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10329 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Thomas Sands <hr/> Mailing Address 134 orchard lane <hr/> City Columbus Junction State IA Zip Code 52738 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 87 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10391 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) Thomas Schueller	Transaction ID: SB23.10410 Date of Disbursement 09 / 24 / 2010
	Mailing Address 503 W. platt Street	Amount of Each Disbursement this Period 100.00
	City maquoketa State IN Zip Code 52060	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Jason Schultz	Transaction ID: SB23.10431 Date of Disbursement 09 / 28 / 2010
	Mailing Address Box 75	Amount of Each Disbursement this Period 250.00
	City Scheswig State IA Zip Code 51461	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 56	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Joe Seng	Transaction ID: SB23.10344 Date of Disbursement 09 / 16 / 2010
	Mailing Address 4804 Northwest Blvd	Amount of Each Disbursement this Period 250.00
	City Davenport State IA Zip Code 52806	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 43	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

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)

PAGE 37 / 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Paul Shomshor <hr/> Mailing Address 3018 Avenue M <hr/> City Council Bluffs State IA Zip Code 51501 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10395 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jeff Smith <hr/> Mailing Address 1006 Brooks North Lane <hr/> City Okoboji State IA Zip Code 51355 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10392 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 100.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mark Smith <hr/> Mailing Address 816 Roberts Terrace <hr/> City Marshalltown State IA Zip Code 50158 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 43 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10376 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Roby Smith</p> <p>Mailing Address 2036 E 48th St</p> <p>City Davenport State IA Zip Code 52807</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 41</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10418 Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Charles Soderberg</p> <p>Mailing Address 8002nd Street SE</p> <p>City Le Mars State IA Zip Code 51031</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10310 Date of Disbursement 09 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sharon Steckman</p> <p>Mailing Address 1038 15th St. NE</p> <p>City Mason City State IA Zip Code 50401</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10373 Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Kurt Swaim <hr/> Mailing Address 504 North Davis <hr/> City Bloomfield State IA Zip Code 52537 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 94 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10408 Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Annette Sweeney <hr/> Mailing Address 21547 Hwy S27 <hr/> City Alden State IA Zip Code 50006 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10315 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Todd Taylor <hr/> Mailing Address 1416 A Ave NW <hr/> City Cedar Rapids State IA Zip Code 52405 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10321 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Dave Thede <hr/> Mailing Address 2343 hawthorne Ct <hr/> City Bettendorf State IA Zip Code 52722 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10348 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
B. Full Name (Last, First, Middle Initial) Roger Thomas <hr/> Mailing Address 17658 Domino Rd <hr/> City Elkader State IA Zip Code 52043 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 24 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10409 Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
C. Full Name (Last, First, Middle Initial) David Tjepkes <hr/> Mailing Address PO Box 12 <hr/> City Gowrie State IA Zip Code 50543 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 50 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10385 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Linda Upmeyer</p> <p>Mailing Address 2175 Pine Ave</p> <p>City Garner State IA Zip Code 50438</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 12</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10372 Date of Disbursement 09 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Jim Van Engelhoven</p> <p>Mailing Address 2309 Keokuk Dr</p> <p>City Pella State IA Zip Code 50219</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 71</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10317 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Nick Wagner</p> <p>Mailing Address 2785 Lansing Ct</p> <p>City Marion State IA Zip Code 52302</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 36</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10322 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

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"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Beth Wessel-Kroeschell <hr/> Mailing Address 518 Ash Ave <hr/> City Ames State IA Zip Code 50014 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 45 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10377 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
B. Full Name (Last, First, Middle Initial) nate Willems <hr/> Mailing Address 110 W. Market <hr/> City Lisbon State IA Zip Code 52253 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 29 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10427 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type
C. Full Name (Last, First, Middle Initial) Cindy Winckler <hr/> Mailing Address 6 Thode Court <hr/> City Davenport State IA Zip Code 52802 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 86 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10353 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/Type

SUBTOTAL of Disbursements This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Gary Worthan <hr/> Mailing Address 5647 105 Ave <hr/> City Storm Lake State IA Zip Code 50588 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 52 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10399 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 250.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Brad Zaun <hr/> Mailing Address 8108 Cobblestone Rd <hr/> City Urbandale State IA Zip Code 50322 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 32 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10417 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2010
	Amount of Each Disbursement this Period 2500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2750.00

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

74400.00