

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **5820 WESTOWN PARKWAY**  
Check if different than previously reported. (ACC) **WEST DES MOINES IA 50266**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00243659** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  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   /   /    through   /   /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
KELLER, JOSEPH, J, ,  
Type or Print Name of Treasurer

Signature of Treasurer KELLER, JOSEPH, J, , [Electronically Filed] Date   /   /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE**

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

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

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 05 / 01 / 2019 To: 05 / 31 / 2019

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

**DETAILED SUMMARY PAGE**  
of Disbursements

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

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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

**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 OF 36
<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. AGOSTINO, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18136 MASON ST  
 City ELKHORN State NE Zip Code 68022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PHARMACY INNOVATION/BUSIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	241.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	141.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 36
	<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. ANDERSON, RIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2039 235TH ST  
 City MARSHALLTOWN State IA Zip Code 50158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	249.99
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 36
<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. BLUM, DAVID, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3720 STATE STREET

City GRAND ISLAND	State NE	Zip Code 68803
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Store Director
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2019

**Transaction ID : SA11AI.43346**

Amount of Each Receipt this Period  
125.00

Memo Item

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

Mailing Address 2167 3RD AVE SW

City ALTOONA	State IA	Zip Code 50009
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43169**

Amount of Each Receipt this Period  
83.34

Memo Item

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

Mailing Address 305 HAWTHORNE DR

City NORWALK	State IA	Zip Code 50211
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
416.65

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43175**

Amount of Each Receipt this Period  
83.33

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	291.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	266.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 2039 GOLDFVIEW CIRCLE

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2019

**Transaction ID : SA11AI.43356**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1109 S FALCON COURT

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43188**

Amount of Each Receipt this Period  
84.00

Memo Item

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

Mailing Address 500 S 19TH ST

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
516.65

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43190**

Amount of Each Receipt this Period  
103.33

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	287.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
<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. DRAHEIM, MELISSA, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4074 STONE POINT DR NE  
 City ROCHESTER State MN Zip Code 55906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 466.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	593.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	620.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 36
<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. FUHRMAN, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5597 N RIDGE CIRCLE  
 City BETTENDORF State IA Zip Code 52722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, EASTERN DISTR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	314.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	370.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 36
<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. HELDENBRAND, MATTHEW, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3100 NE 87TH LANE  
 City ANKENY State IA Zip Code 50023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.70

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 1932 PLUM TREE ROAD

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2019

**Transaction ID : SA11AI.43112**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1932 PLUM TREE ROAD

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2019

**Transaction ID : SA11AI.43378**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2155 COUNTRY CLUB DRIVE

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2019

**Transaction ID : SA11AI.43235**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 36
<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. KASKA, TONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1032 N 6TH ST  
 City CHARITON State IA Zip Code 50049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, HY-VEE, INC, CEO MIDWEST HI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	233.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 278.32  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 36
<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. LUDWIG, MATTHEW, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5705 LEWIS COURT

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Staff
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
549.96

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2019

**Transaction ID : SA11AI.43388**

Amount of Each Receipt this Period  
91.66

Memo Item

**B. MASTERSON, KRISTINE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46503 264TH STREET

City HARTFORD	State SD	Zip Code 57033
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
541.65

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43251**

Amount of Each Receipt this Period  
108.33

Memo Item

**C. MERTES, TALLYAN, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6623 N 149TH AVE

City OMAHA	State NE	Zip Code 68116
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.43253**

Amount of Each Receipt this Period  
30.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	229.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 36
<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. MEZGER, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1507 4th AVENUE N  
 City DENISON State IA Zip Code 51442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	249.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 36
	<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. MITCHELL, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2213 RODLYN  
 City WEBSTER CITY State IA Zip Code 50595  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	249.99
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 36
<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. NELSON, ANGELA, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 506 E RUSSELL  
 City JEFFERSON State IA Zip Code 50129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Pharmacy Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

Date of Receipt 05 / 01 / 2019  
**Transaction ID : SA11AI.43129**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

**B. NELSON, ANGELA, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 506 E RUSSELL  
 City JEFFERSON State IA Zip Code 50129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Pharmacy Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 05 / 31 / 2019  
**Transaction ID : SA11AI.43395**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

**C. PETERSON, TONIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 407 3RD STREET S  
 City HUMBOLDT State IA Zip Code 50548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, Recruiting  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2019  
**Transaction ID : SA11AI.43270**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 216.66  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	266.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	233.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 36
	<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. SHERIDAN, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3207 144TH ST  
 City URBANDALE State IA Zip Code 50323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	291.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 36
	<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. SHERLOCK, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2332 MUDDY CREED  
 City CORALVILLE State IA Zip Code 52241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, Food Service Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.02

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	508.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 36
	<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. SKOKAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35115 BURGUNDY CIRCLE  
 City WAUKEE State IA Zip Code 50263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	483.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 36
<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. STEPHENS, JAMIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 VETERANS MEMORIAL DRIVE  
 City CARLISLE State IA Zip Code 50047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.65

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	249.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 36
<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. STREIT, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 344 S 48TH STREET  
 City WEST DES MOINES State IA Zip Code 50265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	193.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	226.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 36
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	283.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 36
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	141.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.66
<b>TOTAL</b> This Period (last page this line number only).....▶	8982.25