



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2015"/>		63421.72
(b) Cash on Hand at Beginning of Reporting Period.....	106135.08	
(c) Total Receipts (from Line 19) .....	22044.90	97487.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	128179.98	160909.65
7. Total Disbursements (from Line 31).....	4505.45	37235.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	123674.53	123674.53
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: 06 / 01 / 2015 To: 06 / 30 / 2015

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).....	18070.59	59013.80
(ii) Unitemized .....	3974.31	38474.13
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22044.90	97487.93
(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) .....	22044.90	97487.93
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))..... ▶	22044.90	97487.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22044.90	97487.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	12500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	-1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	-1000.00
29. Other Disbursements .....	4505.45	25735.12
30. Federal Election Activity (2 U.S.C. §431(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)) ..	4505.45	37235.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4505.45	37235.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	22044.90	97487.93
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	-1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22044.90	98487.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Form/Schedule: F3XA  
Transaction ID :

Amending the May 2015 report and all subsequent reports in reference to a letter received from the Federal Election Commission, identification number C00243659 in regards to possible contributions in excess of the limits set for in the act. Our May monthly filing incorrectly disclosed a 10,000 contribution as a federal contribution, when in fact, it was actually a state contribution. We are amending the report to reflect this contribution correctly as a state contribution.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 77
	<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	

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. MICHAEL AGOSTINO**  
Full Name (Last, First, Middle Initial)

Mailing Address 18136 MASON ST

City ELKHORN State NE Zip Code 68022

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

Name of Employer Hy-Vee Inc Occupation Staff

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  
**06 / 01 / 2015**

**Transaction ID : SA11AI.26846**

Amount of Each Receipt this Period  
**100.00**

**B. JOEL ALLEN**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.26933**

Amount of Each Receipt this Period  
**83.34**

**C. JOEL ALLEN**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27126**

Amount of Each Receipt this Period  
**83.34**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **266.68**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 77
	<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. NATHAN ALLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 809 SUMMIT PLACE

City INDIANOLA State IA Zip Code 50125

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

Name of Employer Hy-Vee Inc Occupation Asst General Council

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26847**

Amount of Each Receipt this Period  
**50.00**

**B. RIC ANDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2039 235TH ST

City MARSHALLTOWN State IA Zip Code 50158

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **549.96**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26935**

Amount of Each Receipt this Period  
**91.66**

**C. RIC ANDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2039 235TH ST

City MARSHALLTOWN State IA Zip Code 50158

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **641.62**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27128**

Amount of Each Receipt this Period  
**91.66**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **233.32**

**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 9 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. BRADLEY AUGE</b>		Date of Receipt
Mailing Address 702 E MONROE ST		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
MT AYR	IA	50854
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.26937</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="33.34"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="200.04"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. BRADLEY AUGE</b>		Date of Receipt
Mailing Address 702 E MONROE ST		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
MT AYR	IA	50854
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.27130</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="33.34"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="233.38"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. STEPHEN BARAK</b>		Date of Receipt
Mailing Address 8796 DEER CREST DR		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
CEDAR RAPIDS	IA	52411
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.26939</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="85.00"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="510.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="151.68"/>
<b>TOTAL</b> 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 10 OF 77
	<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. STEPHEN BARAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 8796 DEER CREST DR

City CEDAR RAPIDS State IA Zip Code 52411

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **595.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27132**

Amount of Each Receipt this Period  
**85.00**

**B. MICHAEL BASCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 512 WINDSOR CIRCLE

City PAPILLION State NE Zip Code 68046

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.96**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26940**

Amount of Each Receipt this Period  
**41.66**

**C. MICHAEL BASCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 512 WINDSOR CIRCLE

City PAPILLION State NE Zip Code 68046

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.62**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27133**

Amount of Each Receipt this Period  
**41.66**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **168.32**

**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 11 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. DAVID BERTLING</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 <b>Transaction ID : SA11AI.27135</b>
Mailing Address 2091 JEWEL RD		Amount of Each Receipt this Period 30.00
City MOUNT PLEASANT	State IA	Zip Code 52641
FEC ID number of contributing federal political committee. C		
Name of Employer Hy-Vee Inc	Occupation Store Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. JASON BISHOP</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2015 <b>Transaction ID : SA11AI.26944</b>
Mailing Address 14 CAMBRIDGE COURT		Amount of Each Receipt this Period 41.66
City OTTUMWA	State IA	Zip Code 52501
FEC ID number of contributing federal political committee. C		
Name of Employer Hy-Vee Inc	Occupation Store Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.96	

Full Name (Last, First, Middle Initial) <b>C. JASON BISHOP</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2015 <b>Transaction ID : SA11AI.27137</b>
Mailing Address 14 CAMBRIDGE COURT		Amount of Each Receipt this Period 41.66
City OTTUMWA	State IA	Zip Code 52501
FEC ID number of contributing federal political committee. C		
Name of Employer Hy-Vee Inc	Occupation Store Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.62	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	113.32
<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 77
	<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. DAVID BLUM**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26945**

Amount of Each Receipt this Period  

125.00
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**B. DAVID BLUM**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27138**

Amount of Each Receipt this Period  

125.00
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**C. JENNIFER BOOK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26946**

Amount of Each Receipt this Period  

83.34
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>333.34</b>
<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 77
	<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. JENNIFER BOOK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2167 3RD AVE SW

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27139**

Amount of Each Receipt this Period  

83.34
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**B. JEFFREY BORTELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 6727 KINGSWOOD CRT

City SIOUX CITY	State IA	Zip Code 51106
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26947**

Amount of Each Receipt this Period  

40.00
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**C. JEFFREY BORTELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 6727 KINGSWOOD CRT

City SIOUX CITY	State IA	Zip Code 51106
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27140**

Amount of Each Receipt this Period  

40.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>163.34</b>
<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: PAGE 14 OF 77  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Brett Bremser**

Mailing Address 4019 139TH STREET

City URBANDALE State IA Zip Code 50323

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

Name of Employer Hy-Vee Inc Occupation VP, Center Store

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **820.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26855**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**B. ROBERT BUDD III**

Mailing Address 793 EDDINGTON DRIVE

City SUN PRAIRIE State WI Zip Code 53590

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **566.68**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26952**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. ROBERT BUDD III**

Mailing Address 793 EDDINGTON DRIVE

City SUN PRAIRIE State WI Zip Code 53590

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.68**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27145**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **240.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 77
<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. RODNEY BURNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 HAWTHORNE DR

City NORWALK State IA Zip Code 50211

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26953**

Amount of Each Receipt this Period  
**83.33**

**B. RODNEY BURNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 HAWTHORNE DR

City NORWALK State IA Zip Code 50211

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27146**

Amount of Each Receipt this Period  
**83.33**

**C. Steve Busch**  
Full Name (Last, First, Middle Initial)

Mailing Address 1321 LAKE MANOR DR

City TRENTON State MO Zip Code 64683

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26954**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>216.66</b>
<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 77
	<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"/>	<input type="checkbox"/> 17

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

**A. Steve Busch**  
Full Name (Last, First, Middle Initial)

Mailing Address 1321 LAKE MANOR DR

City TRENTON State MO Zip Code 64683

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27147**

Amount of Each Receipt this Period  
**150.00**

**B. JAMES CARNEY**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **649.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.26956**

Amount of Each Receipt this Period  
**108.33**

**C. JAMES CARNEY**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27149**

Amount of Each Receipt this Period  
**108.33**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>366.66</b>
<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 77
	<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"/>	<input type="checkbox"/> 17

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

**A. TIM CERNIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3406 PENNY LANE

City MARION State IA Zip Code 52302

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

Name of Employer Hy-Vee Inc Occupation AVP Operations, Eastern Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **559.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 01 / 2015**

**Transaction ID : SA11AI.26857**

Amount of Each Receipt this Period  
**93.33**

**B. MICHAEL CHRISTENSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3221 PETERSON

City FREMONT State NE Zip Code 68025

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.26959**

Amount of Each Receipt this Period  
**100.00**

**C. MICHAEL CHRISTENSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3221 PETERSON

City FREMONT State NE Zip Code 68025

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27152**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **293.33**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 77
	<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. KENT COLE**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation 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
06	/	05	/	2015

**Transaction ID : SA11AI.26961**

Amount of Each Receipt this Period  

100.00
--------

**B. KENT COLE**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27154**

Amount of Each Receipt this Period  

100.00
--------

**C. KIMBERLEY COLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 7100 BELLAIRE

City WINDSOR HEIGHTS	State IA	Zip Code 50324
-------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26962**

Amount of Each Receipt this Period  

83.34
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>283.34</b>
<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 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. KIMBERLEY COLE</b>		Date of Receipt
Mailing Address 7100 BELLAIRE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
WINDSOR HEIGHTS	IA	50324
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.27155</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="583.38"/>	

Full Name (Last, First, Middle Initial) <b>B. ANTHONY COLLINS</b>		Date of Receipt
Mailing Address 2911 HARPER ST		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAWRENCE	KS	66046
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.26963</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="83.33"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="416.65"/>	

Full Name (Last, First, Middle Initial) <b>C. ANTHONY COLLINS</b>		Date of Receipt
Mailing Address 2911 HARPER ST		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAWRENCE	KS	66046
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.27156</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="83.33"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="499.98"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
<b>TOTAL</b> 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 20 OF 77
	<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. SHANE CONGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2054 PALISADES LANE

City WATERTOWN State SD Zip Code 57201

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26964**

Amount of Each Receipt this Period  
 83.33

**B. SHANE CONGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2054 PALISADES LANE

City WATERTOWN State SD Zip Code 57201

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27157**

Amount of Each Receipt this Period  
 83.33

**C. BENJAMIN CONWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3840 BERKSHIRE AVE

City AMES State IA Zip Code 50010

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26965**

Amount of Each Receipt this Period  
 83.34

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 77
	<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. BENJAMIN CONWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3840 BERKSHIRE AVE

City AMES	State IA	Zip Code 50010
--------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27158**

Amount of Each Receipt this Period  

83.34
-------

**B. JASON CROCKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2409 N 7TH AVE EAST

City NEWTON	State IA	Zip Code 50208
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27159**

Amount of Each Receipt this Period  

100.00
--------

**C. THOMAS CROCKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2039 GOLFVIEW CIRCLE

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

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

Name of Employer Hy-Vee Inc	Occupation AVP Operations; Eastern Central
--------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26861**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>283.34</b>
<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 22 OF 77
	<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. STEVE CULBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2401 SW WINTERVIEW COURT

City LEES SUMMIT	State MO	Zip Code 64081
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
566.66

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26966**

Amount of Each Receipt this Period  
100.00

**B. STEVE CULBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2401 SW WINTERVIEW COURT

City LEES SUMMIT	State MO	Zip Code 64081
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.66

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27160**

Amount of Each Receipt this Period  
100.00

**C. KENNETH DAINS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 BEAR CREEK ESTATES DR

City OTTUMWA	State IA	Zip Code 52501
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26968**

Amount of Each Receipt this Period  
50.00

<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 23 OF 77
	<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"/>	<input type="checkbox"/> 17

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

**A. KENNETH DAINS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 BEAR CREEK ESTATES DR

City OTTUMWA State IA Zip Code 52501

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27162**

Amount of Each Receipt this Period  
**50.00**

**B. TOM J DASCHEL**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26969**

Amount of Each Receipt this Period  
**125.00**

**C. TOM J DASCHEL**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27163**

Amount of Each Receipt this Period  
**125.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. Christopher Desaulniers</b>		Date of Receipt
Mailing Address 500 S 19TH ST		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
CLINTON	IA	52732
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.26971</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="103.33"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="619.98"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Christopher Desaulniers</b>		Date of Receipt
Mailing Address 500 S 19TH ST		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
CLINTON	IA	52732
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.27165</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="103.33"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="723.31"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Charles Donnelly</b>		Date of Receipt
Mailing Address 12532 RUGBY CT		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
Dubuque	IA	52002
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.26974</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="108.33"/>
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="649.98"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="314.99"/>
<b>TOTAL</b> 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 25 OF 77
	<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. Charles Donnelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 12532 RUGBY CT

City Dubuque State IA Zip Code 52002

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.31**

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.27168**

Amount of Each Receipt this Period  
**108.33**

**B. MELISSA K DRAHEIM**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **559.98**

Date of Receipt  
06 / 05 / 2015  
**Transaction ID : SA11AI.26975**

Amount of Each Receipt this Period  
**93.33**

**C. MELISSA K DRAHEIM**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **653.31**

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.27169**

Amount of Each Receipt this Period  
**93.33**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **294.99**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 77
	<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. CHRISTIAN J DYHRKOPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3563 39TH AVE  
 City COLUMBUS State NE Zip Code 68601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26976**  
 Amount of Each Receipt this Period  
 83.33

**B. CHRISTIAN J DYHRKOPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3563 39TH AVE  
 City COLUMBUS State NE Zip Code 68601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27170**  
 Amount of Each Receipt this Period  
 83.33

**C. BRENT DYKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21769 POPPLETON AVE  
 City ELK HORN State NE Zip Code 68022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 716.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26977**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 286.66  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 77
	<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. BRENT DYKES**  
Full Name (Last, First, Middle Initial)

Mailing Address 21769 POPPLETON AVE

City ELK HORN	State NE	Zip Code 68022
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.66**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27171**

Amount of Each Receipt this Period  

120.00
--------

**B. RANDALL EDEKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3703 133RD ST

City URBANDALE	State IA	Zip Code 50322
-------------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation Chariman of the Board, CEO, President
--------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.02**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26865**

Amount of Each Receipt this Period  

416.67
--------

**C. ROBERT EGELAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 4015 138TH STREET

City URBANDALE	State IA	Zip Code 50323
-------------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation VICE PRESIDENT PHARMACY
--------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **504.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26866**

Amount of Each Receipt this Period  

84.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>620.67</b>
<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 77
	<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. JAMES A EWOLDT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26978**

Amount of Each Receipt this Period  
**100.00**

**B. JAMES A EWOLDT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **683.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27172**

Amount of Each Receipt this Period  
**100.00**

**C. JOEL FLUG**  
Full Name (Last, First, Middle Initial)

Mailing Address 1066 BELLA VISTA DRIVE

City CARROLL	State IA	Zip Code 51401
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26981**

Amount of Each Receipt this Period  
**83.33**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>283.33</b>
<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 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE**

**A. JOEL FLUG**  
Full Name (Last, First, Middle Initial)

Mailing Address 1066 BELLA VISTA DRIVE

City CARROLL	State IA	Zip Code 51401
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27175**

Amount of Each Receipt this Period  
**83.33**

**B. JAMIE FRANCK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation AVP, WESTERN DISTRICT
--------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **619.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 01 / 2015**

**Transaction ID : SA11AI.26869**

Amount of Each Receipt this Period  
**103.33**

**C. MARY FUHRMAN**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation AVP OPERATIONS, EASTERN DISTRICT
--------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **619.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 01 / 2015**

**Transaction ID : SA11AI.26871**

Amount of Each Receipt this Period  
**103.33**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>289.99</b>
<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 77
	<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. DAN FULLER**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **649.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.26984**

Amount of Each Receipt this Period  

108.33
--------

**B. DAN FULLER**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.31**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27178**

Amount of Each Receipt this Period  

108.33
--------

**C. LAURA FULTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 9047 R57

City INDIANOLA	State IA	Zip Code 50125
-------------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation VP HY-VEE, PRESIDENT PDI
--------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **616.68**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26872**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>316.66</b>
<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 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. JEREMY GOSCH</b>		Date of Receipt
Mailing Address 336 VALLEY OAKS DR		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City	State	Zip Code
WINONA	MN	55987
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Hy-Vee Inc	AVP OPERATIONS, NORTHERN DISTRICT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="660.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="110.00"/>
		Transaction ID : SA11AI.26873

Full Name (Last, First, Middle Initial) <b>B. Tonya Graff</b>		Date of Receipt
Mailing Address 1007 APRIL LANE		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
YANKTON	SD	57078
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="619.98"/>	
		Amount of Each Receipt this Period
		<input type="text" value="103.33"/>
		Transaction ID : SA11AI.26990

Full Name (Last, First, Middle Initial) <b>C. Tonya Graff</b>		Date of Receipt
Mailing Address 1007 APRIL LANE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
YANKTON	SD	57078
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Hy-Vee Inc	Store Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="723.31"/>	
		Amount of Each Receipt this Period
		<input type="text" value="103.33"/>
		Transaction ID : SA11AI.27186

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="316.66"/>
<b>TOTAL</b> 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 32 OF 77
	<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. JOHN A GRIESEN BROCK**  
 Full Name (Last, First, Middle Initial)  
 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 Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 766.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26991**  
 Amount of Each Receipt this Period  
 150.00

**B. JOHN A GRIESEN BROCK**  
 Full Name (Last, First, Middle Initial)  
 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 Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 916.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27187**  
 Amount of Each Receipt this Period  
 150.00

**C. THOMAS HAMILTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1066 ROBIN RD  
 City IOWA CITY State IA Zip Code 52246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.26996**  
 Amount of Each Receipt this Period  
 83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	383.33
<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 33 OF 77
	<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	

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. THOMAS HAMILTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1066 ROBIN RD

City IOWA CITY State IA Zip Code 52246

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27192**

Amount of Each Receipt this Period  
**83.33**

**B. MATTHEW J HELDENBRAND**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27000**

Amount of Each Receipt this Period  
**83.34**

**C. MATTHEW J HELDENBRAND**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27196**

Amount of Each Receipt this Period  
**83.34**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.01</b>
<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 77
	<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. PATRICK HENSLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 17938 BENT TREE RIDGE

City COUNCIL BLUFFS	State IA	Zip Code 51503
------------------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation Asst. Vice President, Operations (West)
--------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **683.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26879**

Amount of Each Receipt this Period  

125.00
--------

**B. ROGER T HEPLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 18190 536TH AVE

City AUSTIN	State MN	Zip Code 55912
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **559.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27001**

Amount of Each Receipt this Period  

93.33
-------

**C. ROGER T HEPLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 18190 536TH AVE

City AUSTIN	State MN	Zip Code 55912
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **653.31**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27197**

Amount of Each Receipt this Period  

93.33
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>311.66</b>
<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 77
	<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. Brian Hixson**  
Full Name (Last, First, Middle Initial)

Mailing Address 5702 FOXBORO ROAD

City JOHNSTON State IA Zip Code 50131

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27003**

Amount of Each Receipt this Period  
**83.34**

**B. Brian Hixson**  
Full Name (Last, First, Middle Initial)

Mailing Address 5702 FOXBORO ROAD

City JOHNSTON State IA Zip Code 50131

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27199**

Amount of Each Receipt this Period  
**83.34**

**C. Michael Hoppman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1693 E THOROUGHFARE DR

City REPUBLIC State MO Zip Code 65738

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27004**

Amount of Each Receipt this Period  
**40.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>206.68</b>
<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 77
	<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**

Full Name (Last, First, Middle Initial)  
**A. Michael Hoppman**

Mailing Address 1693 E THOROUGHFARE DR

City REPUBLIC	State MO	Zip Code 65738
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.27201**

Amount of Each Receipt this Period  

2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
									40.00

Full Name (Last, First, Middle Initial)  
**B. Paul A Hoppman**

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **699.96**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27005**

Amount of Each Receipt this Period  

2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
									116.66

Full Name (Last, First, Middle Initial)  
**C. Paul A Hoppman**

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **816.62**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.27202**

Amount of Each Receipt this Period  

2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
									116.66

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>273.32</b>
<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 37 OF 77
	<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. SCOTT JAMES**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation 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  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27009**

Amount of Each Receipt this Period  
**100.00**

**B. SCOTT JAMES**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27206**

Amount of Each Receipt this Period  
**100.00**

**C. TRACY KADING**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27014**

Amount of Each Receipt this Period  
**150.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 77
	<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. TRACY KADING**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **920.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.27211**

Amount of Each Receipt this Period  

150.00
--------

**B. TONY KASKA**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation AVP, HY-VEE, INC, CEO MIDWEST HERITAG
--------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

**Transaction ID : SA11AI.26885**

Amount of Each Receipt this Period  

50.00
-------

**C. THOMAS KLUCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address 4703 WINDING WOOD CT

City COLUMBIA	State MO	Zip Code 65203
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.04**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27015**

Amount of Each Receipt this Period  

33.34
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>233.34</b>
<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 39 OF 77
	<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. THOMAS KLUCKING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4703 WINDING WOOD CT  
 City COLUMBIA State MO Zip Code 65203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 233.38

Date of Receipt 06 / 30 / 2015  
**Transaction ID : SA11AI.27212**  
 Amount of Each Receipt this Period 33.34

**B. Jennifer A Knesel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10505 PROVIDENCE DR APT 209  
 City JOHNSTON State IA Zip Code 50131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2015  
**Transaction ID : SA11AI.27016**  
 Amount of Each Receipt this Period 83.34

**C. Jennifer A Knesel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10505 PROVIDENCE DR APT 209  
 City JOHNSTON State IA Zip Code 50131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt 06 / 30 / 2015  
**Transaction ID : SA11AI.27213**  
 Amount of Each Receipt this Period 83.34

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.02  
**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 40 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. JENNIFER KOPRIVA</b>		Date of Receipt
Mailing Address 2516 NE INNSBRUCK		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City ANKENY State IA Zip Code 50021		<b>Transaction ID : SA11AI.26887</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="103.34"/>
Name of Employer Hy-Vee Inc	Occupation AVP OPERATIONS, NORTH CENTRAL DIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="620.04"/>	

Full Name (Last, First, Middle Initial) <b>B. RANDY KRUSE</b>		Date of Receipt
Mailing Address 3024 RED FOX RD		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City AMES State IA Zip Code 50013		<b>Transaction ID : SA11AI.26888</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="90.00"/>
Name of Employer Hy-Vee Inc	Occupation AVP Operations, North Central District	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="540.00"/>	

Full Name (Last, First, Middle Initial) <b>C. STEVEN LABS</b>		Date of Receipt
Mailing Address 2423 DRAKE DR		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City QUINCY State IL Zip Code 62305		<b>Transaction ID : SA11AI.27019</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="83.33"/>
Name of Employer Hy-Vee Inc	Occupation Store Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="499.98"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="276.67"/>
<b>TOTAL</b> 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 41 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. STEVEN LABS</b>			Date of Receipt
Mailing Address 2423 DRAKE DR			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.27216</b>
QUINCY	IL	62305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="83.33"/>
Name of Employer	Occupation		
Hy-Vee Inc	Store Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="583.31"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MARK LAMMERS</b>			Date of Receipt
Mailing Address 3330 CABOT ROAD			<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.27020</b>
QUINCY	IL	62301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="103.33"/>
Name of Employer	Occupation		
Hy-Vee Inc	Store Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="619.98"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MARK LAMMERS</b>			Date of Receipt
Mailing Address 3330 CABOT ROAD			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.27217</b>
QUINCY	IL	62301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="103.33"/>
Name of Employer	Occupation		
Hy-Vee Inc	Store Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="723.31"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="289.99"/>
<b>TOTAL</b> 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 42 OF 77
	<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. MICHAEL LONG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2022 WILLOWVIEW LN

City ROCHESTER State MN Zip Code 55902

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27023**

Amount of Each Receipt this Period  
 83.34

**B. MATTHEW LUDWIG**  
Full Name (Last, First, Middle Initial)

Mailing Address 5705 LEWIS COURT

City BETTENDORF State IA Zip Code 52722

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

Name of Employer Hy-Vee Inc Occupation AVP OPERATIONS, WEST CENTRAL DIST

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  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26892**

Amount of Each Receipt this Period  
 91.66

**C. MARK LUKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 309 NE 17TH ST

City ANKENY State IA Zip Code 50021

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27024**

Amount of Each Receipt this Period  
 83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	258.33
<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 43 OF 77
	<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. MARK LUKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 309 NE 17TH ST

City ANKENY State IA Zip Code 50021

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27219**

Amount of Each Receipt this Period  
**83.33**

**B. KRISTINE MASTERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 46503 264TH STREET

City HARTFORD State SD Zip Code 57033

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **649.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27026**

Amount of Each Receipt this Period  
**108.33**

**C. KRISTINE MASTERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 46503 264TH STREET

City HARTFORD State SD Zip Code 57033

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27221**

Amount of Each Receipt this Period  
**108.33**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **299.99**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 77
	<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"/>	<input type="checkbox"/> 17

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

**A. BRADLEY MCANALLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2314 BENT TREE CT

City ST JOSEPH State MO Zip Code 64506

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **616.66**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27028**

Amount of Each Receipt this Period  
 100.00

**B. BRADLEY MCANALLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2314 BENT TREE CT

City ST JOSEPH State MO Zip Code 64506

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **716.66**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27223**

Amount of Each Receipt this Period  
 100.00

**C. HEATHER MCANALLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 355 88TH ST #7205

City WEST DES MOINES State IA Zip Code 50266

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

Name of Employer Hy-Vee Inc Occupation Staff

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **549.99**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26893**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<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 45 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY MCCANN</b>		Date of Receipt
Mailing Address 805 GLEN OAKS TERRACE		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City	State	Zip Code
WEST DES MOINES	IA	50266
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.26894</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	SR VP, STORE DEVELOPMENT	<input type="text" value="85.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="510.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS MEZGER</b>		Date of Receipt
Mailing Address 1507 4th AVENUE N		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
DENISON	IA	51442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.27030</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.04"/>	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS MEZGER</b>		Date of Receipt
Mailing Address 1507 4th AVENUE N		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
DENISON	IA	51442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>SA11AI.27225</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="83.34"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="583.38"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="251.68"/>
<b>TOTAL</b> 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 46 OF 77
	<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. TIMOTHY J MICHAEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 51498 315TH AVE

City RUSSELL State IA Zip Code 50238

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.32**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27031**

Amount of Each Receipt this Period  
**83.33**

**B. TIMOTHY J MICHAEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 51498 315TH AVE

City RUSSELL State IA Zip Code 50238

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **426.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27226**

Amount of Each Receipt this Period  
**83.33**

**C. KEVIN MILLS**  
Full Name (Last, First, Middle Initial)

Mailing Address 19483 258TH AVE

City BETTENDORF State IA Zip Code 52722

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27034**

Amount of Each Receipt this Period  
**83.33**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **249.99**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 77
	<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. KEVIN MILLS**  
Full Name (Last, First, Middle Initial)

Mailing Address 19483 258TH AVE

City BETTENDORF State IA Zip Code 52722

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27229**

Amount of Each Receipt this Period  
**83.33**

**B. DALE MITCHELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2213 RODLYN

City WEBSTER CITY State IA Zip Code 50595

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27035**

Amount of Each Receipt this Period  
**50.00**

**C. DALE MITCHELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2213 RODLYN

City WEBSTER CITY State IA Zip Code 50595

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27230**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>183.33</b>
<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 48 OF 77
	<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. STEVEN MOKOSAK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

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  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27036**

Amount of Each Receipt this Period  
 83.33

**B. STEVEN MOKOSAK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27231**

Amount of Each Receipt this Period  
 83.33

**C. JEFFERY J MUELLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 602 ELIZABETH STREET

City MARSHALL State MN Zip Code 56258

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26899**

Amount of Each Receipt this Period  
 83.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 249.99

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 77
	<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. ANGELA K NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 506 E RUSSELL

City State Zip Code  
JEFFERSON IA 50129

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

Name of Employer Occupation  
Hy-Vee Inc Pharmacy Supervisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
499.98

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 01 / 2015  
**Transaction ID : SA11AI.26901**

Amount of Each Receipt this Period  
83.33

**B. RANDY J OHM**  
Full Name (Last, First, Middle Initial)

Mailing Address 14946 WEST 156TH CIRCLE

City State Zip Code  
OLATHE KS 66062

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 ▼  
299.96

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 05 / 2015  
**Transaction ID : SA11AI.27042**

Amount of Each Receipt this Period  
16.66

**C. RANDY J OHM**  
Full Name (Last, First, Middle Initial)

Mailing Address 14946 WEST 156TH CIRCLE

City State Zip Code  
OLATHE KS 66062

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 ▼  
316.62

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2015  
**Transaction ID : SA11AI.27237**

Amount of Each Receipt this Period  
16.66

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 116.65

**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 50 OF 77
	<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. CURTIS OSMANSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1727 TERRACE DR SOUTH

City BROOKINGS	State SD	Zip Code 57006
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.66**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27044**

Amount of Each Receipt this Period  

100.00
--------

**B. CURTIS OSMANSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1727 TERRACE DR SOUTH

City BROOKINGS	State SD	Zip Code 57006
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **706.66**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27241**

Amount of Each Receipt this Period  

100.00
--------

**C. KEVIN OSTERHAGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 11705 CRAIG ST

City OVERLAND PARK	State KS	Zip Code 66210
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27045**

Amount of Each Receipt this Period  

83.33
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>283.33</b>
<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 51 OF 77
	<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. KEVIN OSTERHAGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11705 CRAIG ST  
 City OVERLAND PARK State KS Zip Code 66210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27242**  
 Amount of Each Receipt this Period  
 83.33

**B. NOREEN OTTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 919 S 5TH AVE W  
 City NEWTON State IA Zip Code 50208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation DIRECTOR, STATE GOVERNMENT RELATIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26905**  
 Amount of Each Receipt this Period  
 50.00

**C. TONIA PETTERSON**  
 Full Name (Last, First, Middle Initial)  
 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 Hy-Vee Inc Occupation AVP, Recruiting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26907**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.33
<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 52 OF 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. RONALD PICKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1740 JUNIPER LANE SW

City ROCHESTER	State MN	Zip Code 55902
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27052**

Amount of Each Receipt this Period  
83.34

**B. RONALD PICKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1740 JUNIPER LANE SW

City ROCHESTER	State MN	Zip Code 55902
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
583.38

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27249**

Amount of Each Receipt this Period  
83.34

**C. TIMOTHY POTTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4124 82ND STREET

City URBANDALE	State IA	Zip Code 50322
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
499.98

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27054**

Amount of Each Receipt this Period  
83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<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 53 OF 77
	<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. TIMOTHY POTTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4124 82ND STREET

City URBANDALE State IA Zip Code 50322

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27251**

Amount of Each Receipt this Period  
**83.33**

**B. JEFF QUANDT**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 22402

City LINCOLN State NE Zip Code 68542

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.66**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27055**

Amount of Each Receipt this Period  
**10.00**

**C. JEFF QUANDT**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 22402

City LINCOLN State NE Zip Code 68542

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **256.66**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27252**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **103.33**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE**

**A. DAVID RASMUSSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 CIRCLE DRIVE  
 City GALESBURG State IL Zip Code 61401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27056**  
 Amount of Each Receipt this Period  
 83.34

**B. DAVID RASMUSSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 CIRCLE DRIVE  
 City GALESBURG State IL Zip Code 61401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27253**  
 Amount of Each Receipt this Period  
 83.34

**C. ROBERT REIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7515 GLYNOAKS DRIVE  
 City LINCOLN State NE Zip Code 68516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27058**  
 Amount of Each Receipt this Period  
 83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<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 55 OF 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE**

**A. ROBERT REIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7515 GLYNOAKS DRIVE  
 City LINCORN State NE Zip Code 68516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 583.31

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27255**  
 Amount of Each Receipt this Period  
 83.33

**B. DEBRA A RIEDEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 DAVIS ST  
 City BETTENDORF State IA Zip Code 52722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 502.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27059**  
 Amount of Each Receipt this Period  
 83.33

**C. DEBRA A RIEDEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 DAVIS ST  
 City BETTENDORF State IA Zip Code 52722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 585.99

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27256**  
 Amount of Each Receipt this Period  
 83.33

<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 56 OF 77
	<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. RYAN ROBERTS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

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  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27060**

Amount of Each Receipt this Period  
**83.33**

**B. RYAN ROBERTS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27257**

Amount of Each Receipt this Period  
**83.33**

**C. WILLIAM ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1694 FRANKLIN AVE

City WEST BRANCH State IA Zip Code 52358

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27061**

Amount of Each Receipt this Period  
**60.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **226.66**

**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 57 OF 77
	<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. WILLIAM ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1694 FRANKLIN AVE

City WEST BRANCH State IA Zip Code 52358

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27258**

Amount of Each Receipt this Period  
 60.00

**B. SCOTT SCHLATTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3325 LONGVIEW CT

City LINCOLN State NE Zip Code 68506

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27065**

Amount of Each Receipt this Period  
 100.00

**C. SCOTT SCHLATTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3325 LONGVIEW CT

City LINCOLN State NE Zip Code 68506

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27262**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<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 58 OF 77
	<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. JEFFREY SESKER**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 05 / 2015**

**Transaction ID : SA11AI.27069**

Amount of Each Receipt this Period  
**83.34**

**B. JEFFREY SESKER**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : SA11AI.27266**

Amount of Each Receipt this Period  
**83.34**

**C. KEVIN SHERLOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2332 MUDDY CREED

City CORALVILLE State IA Zip Code 52241

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

Name of Employer Hy-Vee Inc Occupation VP, Food Service Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.02**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 01 / 2015**

**Transaction ID : SA11AI.26909**

Amount of Each Receipt this Period  
**166.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>333.35</b>
<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 59 OF 77
	<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. KENNETH J SIMMONS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27073**

Amount of Each Receipt this Period  
 41.67

**B. KENNETH J SIMMONS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.69

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27270**

Amount of Each Receipt this Period  
 41.67

**C. MICHAEL SKOKAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 35115 BURGUNDY CIRCLE

City WAUKEE State IA Zip Code 50263

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

Name of Employer Hy-Vee Inc Occupation CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1616.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26910**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 383.34

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 77
	<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**

Full Name (Last, First, Middle Initial) <b>A. TARC SLAYBAUGH</b>		Date of Receipt
Mailing Address 4920 N 142ND ST		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
OMAHA	NE	68164
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.27075</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="91.66"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="549.96"/>	

Full Name (Last, First, Middle Initial) <b>B. TARC SLAYBAUGH</b>		Date of Receipt
Mailing Address 4920 N 142ND ST		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
OMAHA	NE	68164
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.27272</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="91.66"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="641.62"/>	

Full Name (Last, First, Middle Initial) <b>C. LEWIS SNOOK</b>		Date of Receipt
Mailing Address 1004 WATERFRONT DRIVE		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
ANKENY	IA	50023
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.27076</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Hy-Vee Inc	Store Director	<input type="text" value="103.33"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="619.98"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="286.65"/>
<b>TOTAL</b> 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 61 OF 77
	<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	

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. LEWIS SNOOK**  
Full Name (Last, First, Middle Initial)

Mailing Address 1004 WATERFRONT DRIVE

City ANKENY	State IA	Zip Code 50023
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **723.31**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27273**

Amount of Each Receipt this Period  

103.33
--------

**B. DANIEL STEENHOEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 825 18TH ST

City WINDOM	State MN	Zip Code 56101
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **458.31**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27077**

Amount of Each Receipt this Period  

83.33
-------

**C. DANIEL STEENHOEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 825 18TH ST

City WINDOM	State MN	Zip Code 56101
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **541.64**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27274**

Amount of Each Receipt this Period  

83.33
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>269.99</b>
<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 62 OF 77
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. JAMIE STEPHENS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

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  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27078**

Amount of Each Receipt this Period  
83.33

**B. JAMIE STEPHENS**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27275**

Amount of Each Receipt this Period  
83.33

**C. NATHAN STEWART**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation VP, PERISHABLES
--------------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
749.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26915**

Amount of Each Receipt this Period  
83.33

<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 63 OF 77
	<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. MARTIN J STOKES**  
Full Name (Last, First, Middle Initial)

Mailing Address 14028 SEWARD STREET

City OMAHA	State NE	Zip Code 68154
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.96

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27079**

Amount of Each Receipt this Period  
41.66

**B. MARTIN J STOKES**  
Full Name (Last, First, Middle Initial)

Mailing Address 14028 SEWARD STREET

City OMAHA	State NE	Zip Code 68154
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.62

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.27276**

Amount of Each Receipt this Period  
41.66

**C. ANDREW STREIT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27080**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	133.32
<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 64 OF 77
	<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. ANDREW STREIT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27277**

Amount of Each Receipt this Period  

60.00
-------

**B. MATTHEW STREIT**  
Full Name (Last, First, Middle Initial)

Mailing Address 209 WOODCHUCK LN

City MACOMB	State IL	Zip Code 61455
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27083**

Amount of Each Receipt this Period  

60.00
-------

**C. MATTHEW STREIT**  
Full Name (Last, First, Middle Initial)

Mailing Address 209 WOODCHUCK LN

City MACOMB	State IL	Zip Code 61455
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27280**

Amount of Each Receipt this Period  

60.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>170.00</b>
<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 65 OF 77
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MITCHELL STREIT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27084**

Amount of Each Receipt this Period  
83.34

**B. MITCHELL STREIT**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
583.38

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27281**

Amount of Each Receipt this Period  
83.34

**C. TIMOTHY STUPKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1204 HYDE PARK

City SIOUX FALLS	State SD	Zip Code 57106
---------------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation AVP OPERATIONS, NORTHWEST DIST
--------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1120.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

**Transaction ID : SA11AI.26917**

Amount of Each Receipt this Period  
103.34

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.02
<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 66 OF 77
	<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. SUZI SUNDHOLM**  
Full Name (Last, First, Middle Initial)

Mailing Address 2317 DEER RIDGE CIRCLE

City LE CLAIRE	State IA	Zip Code 52753
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27089**

Amount of Each Receipt this Period  
83.34

**B. SUZI SUNDHOLM**  
Full Name (Last, First, Middle Initial)

Mailing Address 2317 DEER RIDGE CIRCLE

City LE CLAIRE	State IA	Zip Code 52753
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
583.38

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27286**

Amount of Each Receipt this Period  
83.34

**C. KYLE THORNSBROUGH**  
Full Name (Last, First, Middle Initial)

Mailing Address 550 SUGAR CREEK LANE

City NORTH LIBERTY	State IA	Zip Code 52317
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27094**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	216.68
<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 67 OF 77
	<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. KYLE THORNSBROUGH**  
Full Name (Last, First, Middle Initial)

Mailing Address 550 SUGAR CREEK LANE

City NORTH LIBERTY State IA Zip Code 52317

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27291**

Amount of Each Receipt this Period  
 50.00

**B. CRAIG TODD**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation 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  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27098**

Amount of Each Receipt this Period  
 50.00

**C. CRAIG TODD**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27295**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 77
	<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. ROBERT TRADER**  
Full Name (Last, First, Middle Initial)

Mailing Address 709 SOUTH OUTLOOK DRIVE

City SIOUX FALLS	State SD	Zip Code 57106
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27100**

Amount of Each Receipt this Period  

250.00
--------

**B. ROBERT TRADER**  
Full Name (Last, First, Middle Initial)

Mailing Address 709 SOUTH OUTLOOK DRIVE

City SIOUX FALLS	State SD	Zip Code 57106
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1650.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27297**

Amount of Each Receipt this Period  

250.00
--------

**C. COLLIN VENENGA**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27103**

Amount of Each Receipt this Period  

83.34
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>583.34</b>
<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 69 OF 77
	<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. COLLIN VENENGA**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.38**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27300**

Amount of Each Receipt this Period  
**83.34**

**B. DANIEL E VONDRAK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **559.98**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27105**

Amount of Each Receipt this Period  
**93.33**

**C. DANIEL E VONDRAK**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **653.31**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27302**

Amount of Each Receipt this Period  
**93.33**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **270.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 77
	<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. DOUGLAS WALLACE**  
Full Name (Last, First, Middle Initial)

Mailing Address 14111 EMILINE ST

City OMAHA	State NE	Zip Code 68138
---------------	-------------	-------------------

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

Name of Employer Hy-Vee Inc	Occupation PRESIDENT D&D FOODS
--------------------------------	-----------------------------------

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  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26921**

Amount of Each Receipt this Period  
50.00

**B. MICHAEL WEBB**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

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  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27111**

Amount of Each Receipt this Period  
83.33

**C. MICHAEL WEBB**  
Full Name (Last, First, Middle Initial)

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 Hy-Vee Inc	Occupation Store Director
--------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
583.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27308**

Amount of Each Receipt this Period  
83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	216.66
<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 71 OF 77
	<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. JON WENDEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 8319 CHAMBERY

City JOHNSTON State IA Zip Code 50131

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

Name of Employer Hy-Vee Inc Occupation EXEC VP OPERATIONS, WESTERN REGION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26922**

Amount of Each Receipt this Period  
 93.34

**B. SHARM WENNDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3633 E. 59TH COURT

City DAVENPORT State IA Zip Code 52807

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 619.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27114**

Amount of Each Receipt this Period  
 103.33

**C. SHARM WENNDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3633 E. 59TH COURT

City DAVENPORT State IA Zip Code 52807

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

Name of Employer Hy-Vee Inc Occupation Store Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 723.31

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27311**

Amount of Each Receipt this Period  
 103.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 72 OF 77
	<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. GREGORY WERY**  
Full Name (Last, First, Middle Initial)

Mailing Address 9482 DEER VALLEY DR NE

City CEDAR RAPIDS	State IA	Zip Code 52411
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **631.66**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27115**

Amount of Each Receipt this Period  

125.00
--------

**B. GREGORY WERY**  
Full Name (Last, First, Middle Initial)

Mailing Address 9482 DEER VALLEY DR NE

City CEDAR RAPIDS	State IA	Zip Code 52411
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **756.66**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA11AI.27312**

Amount of Each Receipt this Period  

125.00
--------

**C. JIM G WICHMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1304 SOUTH TAYBERRY AVE

City SIOUX FALLS	State SD	Zip Code 57106
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

**Transaction ID : SA11AI.27116**

Amount of Each Receipt this Period  

125.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>375.00</b>
<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 73 OF 77
	<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. JIM G WICHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1304 SOUTH TAYBERRY AVE  
 City SIOUX FALLS State SD Zip Code 57106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.27313**  
 Amount of Each Receipt this Period  
 125.00

**B. KRISTIN WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 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 Hy-Vee Inc Occupation AVP, PHARMACY SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2015  
**Transaction ID : SA11AI.26929**  
 Amount of Each Receipt this Period  
 75.00

**C. MICHAEL WINBLADE**  
 Full Name (Last, First, Middle Initial)  
 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 Hy-Vee Inc Occupation Store Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2015  
**Transaction ID : SA11AI.27120**  
 Amount of Each Receipt this Period  
 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	241.67
<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 74 OF 77
	<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. MICHAEL WINBLADE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2409 N 7TH EAST

City NEWTON	State IA	Zip Code 50208
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.69

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27319**

Amount of Each Receipt this Period  
41.67

**B. FRANK WOODWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 6117 194TH AVE

City OMAHA	State NE	Zip Code 68135
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
519.98

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

**Transaction ID : SA11AI.27121**

Amount of Each Receipt this Period  
83.33

**C. FRANK WOODWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 6117 194TH AVE

City OMAHA	State NE	Zip Code 68135
---------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
603.31

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SA11AI.27320**

Amount of Each Receipt this Period  
83.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	208.33
<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: PAGE 75 OF 77  
(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. BRENT YAGER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6655 189TH STREET  
City ALBIA State IA Zip Code 52531  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hy-Vee Inc Occupation Store Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 226.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015  
**Transaction ID : SA11AI.27322**  
Amount of Each Receipt this Period  
33.33

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	33.33
<b>TOTAL</b> This Period (last page this line number only).....▶	18070.59

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Illinois Food Distribution PAC</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 1919 S Highland Ave Ste 265D		<b>Transaction ID : SB29.26845</b>
City Lombard, IL	State IL	
Purpose of Disbursement	Category/ Type <b>011</b>	Amount of Each Disbursement this Period 2500.00
Candidate Name <b>Illinois Food Distribution PAC</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kraig Paulsen</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address PO Box 250		<b>Transaction ID : SB29.26840</b>
City Hiawatha	State IA	
Purpose of Disbursement	Category/ Type <b>011</b>	Amount of Each Disbursement this Period 500.00
Candidate Name <b>Kraig Paulsen</b>	Disbursement For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 35	

Full Name (Last, First, Middle Initial) <b>C. PETE RICKETTS</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address PO BOX 24705		<b>Transaction ID : SB29.26843</b>
City OMAHA	State NE	
Purpose of Disbursement	Category/ Type <b>011</b>	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>PETE RICKETTS</b>	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> 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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Upmeyer for House**

Mailing Address 1207 S. Lakeview Dr.

City Clear Lake State IA Zip Code 50428

Purpose of Disbursement

Category/  
Type

Candidate Name

**Upmeyer for House**

Office Sought:  House  
 Senate  
 President  
State: IA District: 54

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB29.26842**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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