

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
06 01 2017 through 06 30 2017

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

Signature of Treasurer KELLER, JOSEPH, J, , [Electronically Filed] Date 07 11 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2017"/>		129293.50
(b) Cash on Hand at Beginning of Reporting Period.....	174814.66	
(c) Total Receipts (from Line 19)	15265.21	83786.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	190079.87	213079.87
7. Total Disbursements (from Line 31).....	8750.00	31750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	181329.87	181329.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HY-VEE INC EMPLOYEES' POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2017

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).....	11164.90	46504.63
(ii) Unitemized	4100.31	37281.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15265.21	83786.37
(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)	15265.21	83786.37
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)).....▶	15265.21	83786.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15265.21	83786.37

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	12500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	7750.00	19250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8750.00	31750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8750.00	31750.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15265.21	83786.37
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15265.21	83786.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. AGOSTINO, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18136 MASON ST

City ELKHORN	State NE	Zip Code 68022
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) VP, PHARMACY INNOVATION/BUSIN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2017

Transaction ID : SA11AI.34768

Amount of Each Receipt this Period
100.00

Memo Item

B. AGOSTINO, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18136 MASON ST

City ELKHORN	State NE	Zip Code 68022
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) VP, PHARMACY INNOVATION/BUSIN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11AI.35060

Amount of Each Receipt this Period
100.00

Memo Item

C. ALLEN, JOEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 707 EAST STATE ST

City MASON CITY	State IA	Zip Code 50401
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
249.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2017

Transaction ID : SA11AI.34863

Amount of Each Receipt this Period
41.66

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
	<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. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 SUMMIT PLACE
 City INDIANOLA State IA Zip Code 50125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Asst General Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34769
 Amount of Each Receipt this Period 50.00
 Memo Item

B. ALLEN, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 SUMMIT PLACE
 City INDIANOLA State IA Zip Code 50125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Asst General Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35061
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ANDERSON, RIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2039 235TH ST
 City MARSHALLTOWN State IA Zip Code 50158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34866
 Amount of Each Receipt this Period 83.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	183.33
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 8 OF 48
	<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. AUGÉ, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 702 E MONROE ST
 City MT AYR State IA Zip Code 50854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34868
 Amount of Each Receipt this Period 33.34
 Memo Item

B. BASCH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 512 WINDSOR CIRCLE
 City PAPILLION State NE Zip Code 68046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34870
 Amount of Each Receipt this Period 41.66
 Memo Item

C. BISHOP, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CAMBRIDGE COURT
 City OTTUMWA State IA Zip Code 52501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34875
 Amount of Each Receipt this Period 41.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	116.66
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 9 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BLUM, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3720 STATE STREET
 City GRAND ISLAND State NE Zip Code 68803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34876
 Amount of Each Receipt this Period 125.00
 Memo Item

B. BOOK, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2167 3RD AVE SW
 City ALTOONA State IA Zip Code 50009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34877
 Amount of Each Receipt this Period 83.34
 Memo Item

C. BORTELL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34878
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	248.34
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 10 OF 48
	<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. Bremser, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4019 139TH STREET
 City URBANDALE State IA Zip Code 50323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, Center Store
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11AI.34779
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. Bremser, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4019 139TH STREET
 City URBANDALE State IA Zip Code 50323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, Center Store
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.35071
 Amount of Each Receipt this Period
 40.00
 Memo Item

C. BUDD III, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2017
Transaction ID : SA11AI.34885
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
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 11 OF 48
	<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. BURNS, RODNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 305 HAWTHORNE DR
 City NORWALK State IA Zip Code 50211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34886
 Amount of Each Receipt this Period 83.33
 Memo Item

B. CARNEY, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 SE RIDGE CREST ST
 City GRIMES State IA Zip Code 50111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 649.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34889
 Amount of Each Receipt this Period 108.33
 Memo Item

C. CERNIN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3406 PENNY LANE
 City MARION State IA Zip Code 52302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP Operations, Eastern Division
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 559.98

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34782
 Amount of Each Receipt this Period 93.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	284.99
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 12 OF 48
	<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. CERNIN, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3406 PENNY LANE
 City MARION State IA Zip Code 52302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP Operations, Eastern Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.31

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35074
 Amount of Each Receipt this Period 93.33
 Memo Item

B. COLE, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 JULIA ANN DRIVE NW
 City CEDAR RAPIDS State IA Zip Code 52405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34893
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COLE, KIMBERLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7100 BELLAIRE
 City WINDSOR HEIGHTS State IA Zip Code 50324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34894
 Amount of Each Receipt this Period 83.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	276.67
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 48
	<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. COLLINS, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2911 HARPER ST

City LAWRENCE	State KS	Zip Code 66046
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34895

Amount of Each Receipt this Period
83.33

Memo Item

B. CONGER, SHANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2054 PALISADES LANE

City WATERTOWN	State SD	Zip Code 57201
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34896

Amount of Each Receipt this Period
83.33

Memo Item

C. CONWAY, BENJAMIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3840 BERKSHIRE AVE

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34897

Amount of Each Receipt this Period
83.34

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address 2039 GOLFVIEW CIRCLE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2017

Transaction ID : SA11AI.34787

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2039 GOLFVIEW CIRCLE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11AI.35079

Amount of Each Receipt this Period
100.00

Memo Item

C. DAINS JR, KENNETH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Hy-Vee Inc	Occupation (for Individual) Store Director
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2017

Transaction ID : SA11AI.34898

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 48
	<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. DASCHEL, TOM, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1109 S FALCON COURT

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34899

Amount of Each Receipt this Period
125.00

Memo Item

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

Mailing Address 500 S 19TH ST

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
619.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34901

Amount of Each Receipt this Period
103.33

Memo Item

C. DRAHEIM, MELISSA, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4074 STONE POINT DR NE

City ROCHESTER	State MN	Zip Code 55906
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
559.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34905

Amount of Each Receipt this Period
93.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	321.66
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 16 OF 48
	<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. DYHRKOPP, CHRISTIAN, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3563 39TH AVE

City COLUMBUS	State NE	Zip Code 68601
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2017
Transaction ID : SA11AI.34906

Amount of Each Receipt this Period
 83.33

Memo Item

B. EDEKER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3703 133RD ST

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Chariman of the Board, CEO, Presiden
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11AI.34789

Amount of Each Receipt this Period
 416.67

Memo Item

C. EDEKER, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3703 133RD ST

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Chariman of the Board, CEO, President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2916.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.35081

Amount of Each Receipt this Period
 416.67

Memo Item

SUBTOTAL of Receipts This Page (optional).....	916.67
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 48
	<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. EWOLDT, JAMES, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2102 N 169TH ST
 City OMAHA State NE Zip Code 68116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2017
Transaction ID : SA11AI.34908
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FLUG, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2017
Transaction ID : SA11AI.34913
 Amount of Each Receipt this Period
 83.33
 Memo Item

C. FRANCK, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6518 RIVER OAK CT
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, WESTERN DISTRICT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11AI.34792
 Amount of Each Receipt this Period
 103.33
 Memo Item

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 18 OF 48
	<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. FRANCK, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6518 RIVER OAK CT

City CEDAR RAPIDS	State IA	Zip Code 52411
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) AVP, WESTERN DISTRICT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
723.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2017
Transaction ID : SA11AI.35086

Amount of Each Receipt this Period
 103.33

Memo Item

B. FUHRMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5597 N RIDGE CIRCLE

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) AVP OPERATIONS, EASTERN DISTR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
619.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2017
Transaction ID : SA11AI.34794

Amount of Each Receipt this Period
 103.33

Memo Item

C. FUHRMAN, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5597 N RIDGE CIRCLE

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) AVP OPERATIONS, EASTERN DISTRI
---	---

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 / 2017
Transaction ID : SA11AI.35088

Amount of Each Receipt this Period
 103.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	309.99
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 19 OF 48
	<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. FULLER, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4129 MAJESTIC CT NE
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 649.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34917
 Amount of Each Receipt this Period 108.33
 Memo Item

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

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34795
 Amount of Each Receipt this Period 110.00
 Memo Item

C. GOSCH, JEREMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 VALLEY OAKS DR
 City WINONA State MN Zip Code 55987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTHERN DIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35089
 Amount of Each Receipt this Period 110.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 328.33
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 20 OF 48
	<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. Graff, Tonya, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1007 APRIL LANE

City YANKTON	State SD	Zip Code 57078
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
619.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34925

Amount of Each Receipt this Period
103.33

Memo Item

B. GRIESENBRICK, JOHN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6405 S CRANE AVE

City SIOUX FALLS	State SD	Zip Code 57108
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11AI.34796

Amount of Each Receipt this Period
150.00

Memo Item

C. GRIESENBRICK, JOHN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6405 S CRANE AVE

City SIOUX FALLS	State SD	Zip Code 57108
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11AI.35090

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	403.33
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 21 OF 48
	<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. GUBBINS, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 LAKEVIEW AVE
 City POLK CITY State IA Zip Code 50226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, Merchandising
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35091
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HAMILTON, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34934
 Amount of Each Receipt this Period 83.33
 Memo Item

C. HARRISON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 SWEETWATER DR
 City DES MOINES State IA Zip Code 50320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, POS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34799
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 118.33
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 22 OF 48
<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. HARRISON, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6907 SWEETWATER DR
 City DES MOINES State IA Zip Code 50320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, POS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35093
 Amount of Each Receipt this Period 10.00
 Memo Item

B. HELDENBRAND, MATTHEW, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 NE 87TH LANE
 City ANKENY State IA Zip Code 50023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34939
 Amount of Each Receipt this Period 83.34
 Memo Item

C. HENSLEY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Asst. Vice President, Operations (West)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34802
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	218.34
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 23 OF 48
	<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. Hoppman, Paul, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3728 S BEATRICE DR
 City INDEPENDENCE State MO Zip Code 64055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 699.96

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34942
 Amount of Each Receipt this Period 116.66
 Memo Item

B. JAMES, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1932 PLUM TREE ROAD
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34946
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KADING, TRACY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2155 COUNTRY CLUB DRIVE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34949
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	366.66
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 24 OF 48
	<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. KASKA, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 N 6TH ST
 City CHARITON State IA Zip Code 50049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, HY-VEE, INC, CEO MIDWEST HI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34811
 Amount of Each Receipt this Period 65.00
 Memo Item

B. KASKA, TONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1032 N 6TH ST
 City CHARITON State IA Zip Code 50049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, HY-VEE, INC, CEO MIDWEST H
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35104
 Amount of Each Receipt this Period 65.00
 Memo Item

C. KLUCKING, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34950
 Amount of Each Receipt this Period 33.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	163.34
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 25 OF 48
	<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. Knesel, Jennifer, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.96

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34951
 Amount of Each Receipt this Period 41.66
 Memo Item

B. KOPRIVA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2516 NE INNSBRUCK
 City ANKENY State IA Zip Code 50021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTH CENTRA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.04

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34813
 Amount of Each Receipt this Period 103.34
 Memo Item

C. KOPRIVA, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2516 NE INNSBRUCK
 City ANKENY State IA Zip Code 50021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP OPERATIONS, NORTH CENTRAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 723.38

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35106
 Amount of Each Receipt this Period 103.34
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 248.34
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 26 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. LABS, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 DRAKE DR
 City QUINCY State IL Zip Code 62305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34954
 Amount of Each Receipt this Period 83.33
 Memo Item

B. LAMMERS, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3330 CABOT ROAD
 City QUINCY State IL Zip Code 62301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34954
 Amount of Each Receipt this Period 103.33
 Memo Item

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

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34819
 Amount of Each Receipt this Period 91.66
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. LUDWIG, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5705 LEWIS COURT
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 641.62

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35111
 Amount of Each Receipt this Period 91.66
 Memo Item

B. MASTERSON, KRISTINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46503 264TH STREET
 City HARTFORD State SD Zip Code 57033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 649.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34964
 Amount of Each Receipt this Period 108.33
 Memo Item

C. MCANALLY, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34820
 Amount of Each Receipt this Period 100.00
 Memo Item

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 28 OF 48
	<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. MCANALLY, BRADLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35112
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCCANN, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 GLEN OAKS TERRACE
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) SR VP, STORE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34821
 Amount of Each Receipt this Period 85.00
 Memo Item

C. MCCANN, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 805 GLEN OAKS TERRACE
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) SR VP, STORE DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35113
 Amount of Each Receipt this Period 85.00
 Memo Item

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 29 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MEZGER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 4th AVENUE N
 City DENISON State IA Zip Code 51442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34967
 Amount of Each Receipt this Period 83.33
 Memo Item

B. MICHAEL, TIMOTHY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51498 315TH AVE
 City RUSSELL State IA Zip Code 50238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34968
 Amount of Each Receipt this Period 83.33
 Memo Item

C. MILLS, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19483 258TH AVE
 City BETTENDORF State IA Zip Code 52722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34971
 Amount of Each Receipt this Period 83.33
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MITCHELL, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2213 RODLYN
 City WEBSTER CITY State IA Zip Code 50595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34972
 Amount of Each Receipt this Period 83.33
 Memo Item

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

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34973
 Amount of Each Receipt this Period 83.33
 Memo Item

C. MUELLER, JEFFERY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 ELIZABETH STREET
 City MARSHALL State MN Zip Code 56258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34826
 Amount of Each Receipt this Period 83.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	249.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 48
	<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. MUELLER, JEFFERY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 ELIZABETH STREET
 City MARSHALL State MN Zip Code 56258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.31

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35118
 Amount of Each Receipt this Period 83.33
 Memo Item

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

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34828
 Amount of Each Receipt this Period 83.33
 Memo Item

C. NELSON, ANGELA, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 506 E RUSSELL
 City JEFFERSON State IA Zip Code 50129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Pharmacy Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.31

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35120
 Amount of Each Receipt this Period 83.33
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 48
	<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. OFF, MATTHEW, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4918 MILLBROOK DR
 City COLUMBIA State MO Zip Code 65203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34980
 Amount of Each Receipt this Period 50.00
 Memo Item

B. OSTERHAGE, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34985
 Amount of Each Receipt this Period 83.33
 Memo Item

C. OTTO, NOREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, STATE GOVERNMENT RE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34831
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	233.33
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 33 OF 48
	<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. OTTO, NOREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) DIRECTOR, STATE GOVERNMENT R
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35123
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PETERSON, TONIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 3RD STREET S
 City HUMBOLDT State IA Zip Code 50548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, Recruiting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34834
 Amount of Each Receipt this Period 50.00
 Memo Item

C. PETERSON, TONIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 407 3RD STREET S
 City HUMBOLDT State IA Zip Code 50548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, Recruiting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35126
 Amount of Each Receipt this Period 50.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. REIF, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7515 GLYNOAKS DRIVE

City LINCOLN	State NE	Zip Code 68516
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.34997

Amount of Each Receipt this Period
83.33

Memo Item

B. RIEDEL, DEBRA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4815 DAVIS ST

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11AI.34836

Amount of Each Receipt this Period
83.33

Memo Item

C. RIEDEL, DEBRA, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4815 DAVIS ST

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
583.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11AI.35128

Amount of Each Receipt this Period
83.33

Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 48
	<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. ROBERTS, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4541 50th STREET
 City DES MOINES State IA Zip Code 50310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.34998
 Amount of Each Receipt this Period 83.33
 Memo Item

B. SCHIPULL, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 E 39TH ST
 City SOUTH SIOUX CITY State NE Zip Code 68776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35002
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SESKER, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5413 CAREY DRIVE
 City CEDAR FALLS State IA Zip Code 50613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35006
 Amount of Each Receipt this Period 83.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. SHERIDAN, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3207 144TH ST
 City URBANDALE State IA Zip Code 50323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35010
 Amount of Each Receipt this Period 83.33
 Memo Item

B. SHERLOCK, KERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 251 ASHWOOD DRIVE
 City SYCAMORE State IL Zip Code 60178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35011
 Amount of Each Receipt this Period 41.67
 Memo Item

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

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34839
 Amount of Each Receipt this Period 166.67
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. SHERLOCK, KEVIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2332 MUDDY CREED

City CORALVILLE	State IA	Zip Code 52241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) VP, Food Service Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1166.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

Transaction ID : SA11AI.35130

Amount of Each Receipt this Period
166.67

Memo Item

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

Mailing Address 108 ARBOR CIRCLE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2017

Transaction ID : SA11AI.35012

Amount of Each Receipt this Period
41.67

Memo Item

C. SKOKAN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35115 BURGUNDY CIRCLE

City WAUKEE	State IA	Zip Code 50263
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2017

Transaction ID : SA11AI.34840

Amount of Each Receipt this Period
300.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. SKOKAN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35115 BURGUNDY CIRCLE
 City WAUKEE State IA Zip Code 50263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35131
 Amount of Each Receipt this Period 300.00
 Memo Item

B. SNOOK, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 WATERFRONT DRIVE
 City ANKENY State IA Zip Code 50023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34843
 Amount of Each Receipt this Period 103.33
 Memo Item

C. SNOOK, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 WATERFRONT DRIVE
 City ANKENY State IA Zip Code 50023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 723.31

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35134
 Amount of Each Receipt this Period 103.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	506.66
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 39 OF 48
	<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. SPELTZ, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 390 RIVER BLUFF DR
 City WINDOM State MN Zip Code 56101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35014
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STEENHOEK, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 18TH ST
 City WINDOM State MN Zip Code 56101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35015
 Amount of Each Receipt this Period 83.33
 Memo Item

C. STEPHENS, JAMIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 VETERANS MEMORIAL DRIVE
 City CARLISLE State IA Zip Code 50047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35016
 Amount of Each Receipt this Period 83.33
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 48
	<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. STEWART, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 REED COURT
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PERISHABLES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.98

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34846
 Amount of Each Receipt this Period 83.33
 Memo Item

B. STEWART, NATHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 REED COURT
 City WEST DES MOINES State IA Zip Code 50266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) VP, PERISHABLES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1083.31

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35137
 Amount of Each Receipt this Period 83.33
 Memo Item

C. STREIT, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 344 S 48TH STREET
 City WEST DES MOINES State IA Zip Code 50265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35019
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 48
	<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. STREIT, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 WOODCHUCK LN
 City MACOMB State IL Zip Code 61455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35022
 Amount of Each Receipt this Period 60.00
 Memo Item

B. STREIT, MITCHELL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 WINCHESTER CIRCLE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35023
 Amount of Each Receipt this Period 83.34
 Memo Item

C. SUNDHOLM, SUZI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35027
 Amount of Each Receipt this Period 83.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	226.68
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 42 OF 48
	<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. THORNSBROUGH, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35033
 Amount of Each Receipt this Period 40.00
 Memo Item

B. TODD, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5416 S 188TH ST
 City OMAHA State NE Zip Code 68135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35037
 Amount of Each Receipt this Period 50.00
 Memo Item

C. VENENGA, COLLIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3613 ITHACA AVE
 City SPIRIT LAKE State IA Zip Code 51360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35040
 Amount of Each Receipt this Period 83.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	173.34
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 43 OF 48
	<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. VONDRAK, DANIEL, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 CONISTON CR
 City SERGEANT BLUFF State IA Zip Code 51054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35042
 Amount of Each Receipt this Period 93.33
 Memo Item

B. WEBB, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 ROBIN HILL LANE
 City RED OAK State IA Zip Code 51566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35049
 Amount of Each Receipt this Period 83.33
 Memo Item

C. WENNDT, SHARM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35052
 Amount of Each Receipt this Period 103.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	279.99
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 48
	<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. WERY, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9482 DEER VALLEY DR NE
 City CEDAR RAPIDS State IA Zip Code 52411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) Store Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 06 / 05 / 2017
Transaction ID : SA11AI.35053
 Amount of Each Receipt this Period 125.00
 Memo Item

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

Date of Receipt 06 / 01 / 2017
Transaction ID : SA11AI.34856
 Amount of Each Receipt this Period 75.00
 Memo Item

C. WILLIAMS, KRISTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 DEVONWOOD DRIVE
 City COUNCIL BLUFFS State IA Zip Code 51503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hy-Vee Inc Occupation (for Individual) AVP, PHARMACY SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA11AI.35148
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
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 45 OF 48
	<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. WINBLADE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2409 N 7TH EAST

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2017

Transaction ID : SA11AI.35058

Amount of Each Receipt this Period
41.67

Memo Item

B. WOODWARD JR, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6117 194TH AVE

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Staff
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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 / 2017

Transaction ID : SA11AI.34859

Amount of Each Receipt this Period
83.33

Memo Item

C. WOODWARD JR, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6117 194TH AVE

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

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

Name of Employer (for Individual) Hy-Vee Inc	Occupation (for Individual) Staff
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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 / 2017

Transaction ID : SA11AI.35152

Amount of Each Receipt this Period
83.33

Memo Item

SUBTOTAL of Receipts This Page (optional).....	208.33
TOTAL This Period (last page this line number only).....	11164.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. FRIENDS OF SHERROD BROWN		Date of Disbursement MM / DD / YYYY 06 / 06 / 2017
Mailing Address PO BOX 15293		FEC Identification Number C 00264697 Transaction ID : SB23.35161
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: OH District: 00	

Full Name (Last, First, Middle Initial) B. JONI ERNST FOR US SENATE INC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017
Mailing Address PO BOX 93441		FEC Identification Number C 00546788 Transaction ID : SB23.35154
City DES MOINES	State IA	Zip Code 50393
Purpose of Disbursement	Category/Type 011	Amount of Each Disbursement this Period 5000.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IA District: 00	

Full Name (Last, First, Middle Initial) C. RICKETTS, PETE, , ,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO BOX 24705		FEC Identification Number C S6NE00129 Transaction ID : SB23.35168
City OMAHA	State NE	Zip Code 68124
Purpose of Disbursement voided check #2655 9/11/2014	Category/Type	Amount of Each Disbursement this Period - 5000.00
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NE District: 00	

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Deyoe, David, , ,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 911 Shagbark Drive		FEC Identification Number C Transaction ID : SB29.35171 Amount of Each Disbursement this Period - 250.00
City Nevada	State IA	
Zip Code 50201		Memo Item <input type="checkbox"/>
Purpose of Disbursement voided check #2380 9/6/213		
Candidate Name		Category/Type []
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 10	

Full Name (Last, First, Middle Initial) B. Kim Reynolds Governor		Date of Disbursement MM / DD / YYYY 06 / 06 / 2017
Mailing Address PO Box 1775		FEC Identification Number C Transaction ID : SB29.35163 Amount of Each Disbursement this Period 10000.00
City Des Moines	State IA	
Zip Code 50305		Memo Item <input type="checkbox"/>
Purpose of Disbursement		
Candidate Name		Category/Type 011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Koester, Kevin, , ,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 3514 SW Edgewood Lane		FEC Identification Number C Transaction ID : SB29.35175 Amount of Each Disbursement this Period - 1000.00
City Ankeny	State IA	
Zip Code 50023		Memo Item <input type="checkbox"/>
Purpose of Disbursement voided check #3060 10/13/2016		
Candidate Name		Category/Type []
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 70	

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

8750.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Sodders for State Senate		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 202 5th Ave SE PO Box 723		FEC Identification Number C [] Transaction ID : SB29.35172 Amount of Each Disbursement this Period [] - 250.00
City State Center	State IA	Zip Code 50247
Purpose of Disbursement voided check #2382 9/9/2013		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. Walker, Nate, , ,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO Box 7549		FEC Identification Number C [] Transaction ID : SB29.35174 Amount of Each Disbursement this Period [] - 250.00
City Kirksville	State MO	Zip Code 63501
Purpose of Disbursement voided check #2891 7/22/2015		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. Whitver, Jack, , ,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 4019 NE Bellagio Cir.		FEC Identification Number C [] Transaction ID : SB29.35173 Amount of Each Disbursement this Period [] - 500.00
City Ankeny	State IA	Zip Code 50021
Purpose of Disbursement voided check #2932 11/16/2015		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 19	Memo Item <input type="checkbox"/>	

SUBTOTAL of Disbursements This Page (optional).....▶	[] - 1000.00
TOTAL This Period (last page this line number only).....▶	[] 7750.00