

**Applicant License Application ( BW0094444 )**

<b>Name of Applicant:</b> <u>Hy-Vee, Inc.</u>		
<b>Name of Business (DBA):</b> <u>Hy-Vee Club Room</u>		
<b>Address of Premises:</b> <u>7101 University Ave.</u>		
<b>City</b> <u>Windsor Heights</u>	<b>County:</b> <u>Polk</u>	<b>Zip:</b> <u>50324</u>
<b>Business</b>	<u>(515) 279-4225</u>	
<b>Mailing</b>	<u>5820 Westown Pkwy</u>	
<b>City</b> <u>West Des Moines</u>	<b>State</b> <u>IA</u>	<b>Zip:</b> <u>50266</u>

**Contact Person**

<b>Name</b> <u>Jenna Willert</u>	
<b>Phone:</b> <u>(515) 267-2874</u>	<b>Email</b> <u>jwillert@hy-vee.com</u>

**Classification** Special Class C Liquor License (BW) (Beer/Wine)

**Term:** 12 months

**Effective Date:** 05/15/2015

**Expiration Date:** 05/14/2016

**Privileges:**

Special Class C Liquor License (BW) (Beer/Wine)

Sunday Sales

**Status of Business**

<b>BusinessType:</b> <u>Privately Held Corporation</u>	
<b>Corporate ID Number:</b> <u>19862</u>	<b>Federal Employer ID</b> <u>42-0325638</u>

**Ownership**

**Randy Edeker**

**First Name:** Randy                      **Last Name:** Edeker  
**City:** Urbandale                      **State:** Iowa                      **Zip:** 50322  
**Position:** CEO, President  
**% of Ownership:** 0.00%                      **U.S. Citizen:** Yes

**Stephen Meyer**

**First Name:** Stephen                      **Last Name:** Meyer  
**City:** Des Moines                      **State:** Iowa                      **Zip:** 50309  
**Position:** Executive VP, Secretary  
**% of Ownership:** 0.00%                      **U.S. Citizen:** Yes

**Michael Skokan**

**First Name:** Michael                      **Last Name:** Skokan  
**City:** Waukee                      **State:** Iowa                      **Zip:** 50263  
**Position:** CFO, Treasurer

**% of Ownership:** 0.00%

**U.S. Citizen:** Yes

**Jeffrey Pierce**

**First Name:** Jeffrey

**Last Name:** Pierce

**City:** Waukee

**State:** Iowa

**Zip:** 50263

**Position:** Ass't Treasurer, Financial

**% of Ownership:** 0.00%

**U.S. Citizen:** Yes

**Insurance Company Information**

<b>Insurance Company:</b> <u>DAKOTA FIRE INSURANCE COMPANY</u>	
<b>Policy Effective Date:</b> <u>05/15/2015</u>	<b>Policy Expiration</b> <u>05/15/2016</u>
<b>Bond Effective</b>	<b>Dram Cancel Date:</b>
<b>Outdoor Service Effective</b>	<b>Outdoor Service Expiration</b>
<b>Temp Transfer Effective</b>	<b>Temp Transfer Expiration Date:</b>