

Item No. 9

## **Applicant**

NAME OF LEGAL ENTITY NAME OF BUSINESS (DBA) BUSINESS

Hy-Vee, Inc. Hy-Vee Food & Drugstore #2 (515) 232-1961

ADDRESS OF PREMISES PREMISES SUITE/APT NUMBER CITY COUNTY ZIP

640 Lincolnway Ames Story 50010-0000

MAILING ADDRESS CITY STATE ZIP

5820 Westown Parkway West Des Moines Iowa 50266-0000

### **Contact Person**

NAME PHONE EMAIL

Kelly Palmer (515) 267-2949 kpalmer@hy-vee.com

### **License Information**

LICENSE NUMBER LICENSE/PERMIT TYPE TERM STATUS

LE0000095 Class E Retail Alcohol License 12 Month Submitted

to Local Authority

EFFECTIVE DATE EXPIRATION DATE LAST DAY OF BUSINESS

Oct 20, 2022 Oct 19, 2023

SUB-PERMITS

Class E Retail Alcohol License



## **Status of Business**

**BUSINESS TYPE** 

Corporation

## **Ownership**

#### Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% OF OWNERSHIP	U.S. CITIZEN
Andrew Schroeder	Johnston	Iowa	50131	AVP, Assistant Controller	0.00	Yes
Michael Jurgens	Des Moines	Iowa	50312	Vice President, Secretary	0.00	Yes
Jeremy Gosch	Urbandale	Iowa	50323	CEO, President	0.00	Yes

# **Insurance Company Information**

INSURANCE COMPANY	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE
DRAM CANCEL DATE	OUTDOOR SERVICE EFFECTIVE DATE	OUTDOOR SERVICE EXPIRATION DATE
BOND EFFECTIVE DATE	TEMP TRANSFER EFFECTIVE DATE	TEMP TRANSFER EXPIRATION DATE