Image# 201812319143687492				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ	-		
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
HDR, Inc. Politie	cal Action Commi			
ADDRESS (number and street)	1917 S 67th Street			
(Check if address				
is changed)	Omaha		NE 168	106-2973
			L L_I STATE ▲	
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address	slming@comerica.com	1		
is changed)				
	Optional Second E-Mail Ad			
COMMITTEE'S WEB PAGE / (Check if address is changed)				
2. DATE 12	31 Y Y Y Y 31 2018			
3. FEC IDENTIFICATION	NUMBER ► C C	00103903		
I. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief	it is true, correct and	d complete.
Type or Print Name of Treas	Jrer Heaney, Kathleen M.P., , ,			
Signature of Treasurer	eaney, Kathleen M.P., , ,	[Electronically Filed]	Date 12	/ D D / Y Y Y Y 31 2018
NOTE: Submission of false, err	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

12/31/2018 09 : 05

F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	didate	e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complein information below.)	ete the candidate
Name Cand	e of lidate		
	lidate / Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	
(d)			emocratic, epublican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segr committee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

HDR, Inc. Political Action Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

HDR, Inc.					
Mailing Address	1917 S 67th Street				
	Omaha	NE 68106-2973			
	CITY	STATE ZIP CODE			
Relationship: 🗴 Connected Organization 🚺 Affiliated Committee 🚺 Joint Fundraising Representative 🚺 Leadership PAC Sponsor					

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

PAC Servi	es, Comerica Bank, , ,
Full Name	
Mailing Address	P.O. Box 75000
	MC2250
	Detroit MI48275-2250
Title or Position	CITY STATE ZIP CODE
Recordkeeper	Telephone number 248 371 7268

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Heaney, Kathleen M.P., , ,
Mailing Address	1917 S 67th Street
	Omaha
	CITY STATE ZIP CODE
Title or Position	Image: Telephone number 402 548 5171

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Malone, Patrick, , ,	
Mailing Address	2600 Park Tower Dr.	
	Suite 100	
	Vienna VA 22180	
	CITY STATE ZIP CODE	
Title or Position	oci Telephone number 571 327 5864	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Co	omerica Bank		
Mailing Address	P.O. Box 75000		
	Detroit	MI48275 − [
	CITY	STATE ZIP CODE	Ē
Name of Bank, Depos	sitory, etc.		
Mailing Address			
	CITY	STATE ZIP CODE	-