FEC FORM 1	STATEMEN ORGANIZA	_	Office U	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	UCTORS ASSOCIATI			
ADDRESS (number and stree	t) 1100 WALNUT			
(Check if address is changed)	SUITE 2950			
	KANSAS CITY 		MO 64106 STATE ▲	
COMMITTEE'S E-MAIL ADI	DRESS			
(Check if address is changed)	finance@heavyconstru	ctors.org		
	Optional Second E-Mail Add bwilliams@heavycon	ress structors.org		
COMMITTEE'S WEB PAGE (Check if address is changed)				
2. DATE 07 /	29 / Y Y Y Y 2019			
3. FEC IDENTIFICATION	NUMBER ► C C	0112706		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examine	ed this Statement and to the best	of my knowledge and belief it	is true, correct and corr	plete.
Type or Print Name of Treas	surer Mathies, Aleen, , ,			
Signature of Treasurer	Aathies, Aleen, , ,	[Electronically Filed])2 / Y Y Y Y 2023
NOTE: Submission of false, e	rroneous, or incomplete information r ANY CHANGE IN INFORMAT	nay subject the person signing th		Ities of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		C FORM 1 evised 06/2012)

FEC Form 1 (Re	evised 03/2022)	Page 2
. TYPE OF C	OMMITTEE:	
Candidate	Committee:	
(a) Thi	is committee is a principal campaign committee. (Complete the candidate information below.)	
	is committee is an authorized committee, and is NOT a principal campaign committee. (Complete prmation below.)	the candidate
Name of Candidate	L	
Candidate Party Affilia	ation Office Sought: House Senate President	State
(c) Thi	is committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	e	
Party Com	is committee is a (National, State (Democra	atic, an, etc.) Party
Political Ad	ction Committee (PAC):	
(e) Thi	is committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a:
	Corporation Corporation w/o Capital Stock Labor	Organization
	Membership Organization Trade Association Coope	erative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	is committee supports/opposes more than one Federal candidate, and is NOT a separate segrega mmittee. (i.e., nonconnected committee)	ted 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.)	
(g) Thi	is committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
(h) Thi	is committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fund	Iraising Representative:	

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

(i)

1.	L																С			_	
2.	L														J	[С				

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Relationship:

-	FEC Form 1 (Revised 0	2/2009)								Page 3
V	Vrite or Type Committee Name									
	HEAVY CONSTRU	CTORS	ASS	OCIA		N FEI	DERAL	POLITIC	AL ACTION CO	OMMITTEE
6.	Name of Any Connected Or NONE	rganization	ı, Affilia	ted Cor	nmittee	e, Joint	t Fundrais	sing Represen	tative, or Leadership	PAC Sponsor
	Mailing Address									
		1								

				_
Connected Organization	Affiliated Organization	Joint Fundraising Representative	Г	Leadership PAC Sponsor

STATE

ZIP CODE 🔺

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

CITY

l	McGurn, Tammy, , ,		
Full Name			
Mailing Address	1100 Walnut St		
	Suite 2950		
	Kansas City	MO 64106	
	CITY 🔺	STATE 🔺	ZIP CODE
Title or Position \mathbf{v}			
Data Administrator		Telephone number	560 - 1420

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	Mathies, Aleen, , ,
of Treasurer	
Mailing Address	1100 Walnut St
	Suite 2950
	Kansas City MO 64106
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Data Administrato	r

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent	Williams, Bridgette, , ,	
Mailing Address	1100 Walnut Suite 2950	
	Kansas City	
		IP CODE ▲
Title or Position	•	
Executive Directo	or Telephone number 816 75	53 - 6443

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.

	ank			
Mailing Address	1010 Grand			
	PO Box 419226			
	Kansas City		MO 64141	
		CITY A	STATE 🔺	ZIP CODE
Name of Bank, Depository, e	ətc.			
Mailing Address				
		CITY ▲	STATE ▲	ZIP CODE ▲