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CAMPBELL	PATRICK D											
Form 4												
May 18, 2018	;											
FORM	4									PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this							Expires:	January 31,				
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP						NERSHIP OF	Estimated average burden hours per				
Section 16	j.	SECURITIES										
Form 4 or Form 5									response	0.5		
obligation	^						-	ge Act of 1934,				
may contin	nue. Section I			•	•	• •		f 1935 or Sectio	n			
See Instruc	ction	50(II)	of the Inv	/estiment (Company	y Act	. 01 19	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship of						f Reporting Person(s) to						
CAMPBELL	Symbol	Symbol				Issuer						
	HERC HOLDINGS INC [HRI]					(Check all applicable)						
(Last)	(Last) (First) (Middle) 3. Date of				insaction			(Check an applicable)				
			(Month/Day/Year)					X Director 10% Owner				
27500 RIVERVIEW CENTER			05/17/2018					Officer (give title Other (specify below) below)				
BLVD.								below)	below)			
			4. If Amen	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check				
			Filed(Mont					Applicable Line)				
								X Form filed by 0 Form filed by N				
BONITA SP	RINGS, FL 3	4134						Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	med	3.	4. Securit	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	ear) Executio	on Date, if TransactionAcquired (A) or Code Disposed of (D) 'Day/Year) (Instr. 8) (Instr. 3, 4 and 5)						(D) or Bene Indirect (I) Own	Indirect		
(Instr. 3)		any (Month/						Beneficially Owned		Beneficial Ownership		
		(INIOIIIII)					5)	Following		(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
				Code V		(D)	Price	(insu: 5 and 4)				
Common Stock	05/17/2018			А	1,704 (1)	Α	\$0	6,821 <u>(1)</u>	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title Amoun Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CAMPBELL PATRICK D 27500 RIVERVIEW CENTER BLVD. BONITA SPRINGS, FL 34134	Х						
Signatures							
/s/Sheri Roberts, by Power of Attorney	05/18						
<u>**</u> Signature of Reporting Person	Da	ate					
Evaluation of Decrements							

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Award of 1,704 restricted stock units, each of which represents the right to receive one share of the Issuer's common stock on the vesting(1) date, which is the business day immediately preceding the date of the Issuer's 2019 annual meeting of stockholders, subject to the Reporting Person's continued membership on the Issuer's Board of Directors through the vesting date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.