



RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 19 12 27 PM '98

April 14, 1998

Office of Public Records
Federal Election Commission
999 E. Street, N.W.
Washington, D.C. 20463

RE: ID #C00034330
Quarterly Report
Period : 1/1/98 through 3/31/98

Gentlemen:

Enclosed is our First Quarter Report as required by FEC regulations. This report covers the period January 1, through March 31, 1998.

Sincerely,



John E. Hoff
Treasurer

Enclosure:

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 19 12 27 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Owens-Illinois Employees Good Citizenship Fund		2. FEC IDENTIFICATION NUMBER FC00034330
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported One SeaGate	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Toledo, OH 43666		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/98</u> through <u>3/31/98</u>			
6. (a)	Cash on Hand January 1, 19 <u>98</u>		\$ 5,646.63
(b)	Cash on Hand at Beginning of Reporting Period	\$ 5,646.63	
(c)	Total Receipts (from Line 19)	\$ 6,766.92	\$ 6,766.92
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 12,413.55	\$ 12,413.55
7.	Total Disbursements (from Line 30)	\$ 6,197.14	\$ 6,197.14
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,216.41	\$ 6,216.41
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20489 Toll Free 800-424-9530 Local 202-219-8420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
John Hoff

Signature of Treasurer



Date

4/14/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
Owens-Illinois Employees Good Citizenship Fund	FROM 1/1/98	TO: 3/31/98
	COLUMN A Total This Period	COLUMN B Calendar Year
I Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	720.00	720.00
ii. Unitemized	6,046.92	6,046.92
iii. Total (add i and ii) >	6,766.92	6,766.92
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	6,766.92	6,766.92
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	6,766.92	6,766.92
20. Total Federal Receipts (subtract line 18 from line 19) >	6,766.92	6,766.92
II Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures <u>Checks & Deposit Slips</u>	72.14	72.14
c. Total Operating Expenditures (add a i, a ii, and b) >	72.14	72.14
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,125.00	6,125.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,197.14	6,197.14
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,197.14	6,197.14
III Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	6,766.92	6,766.92
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	6,766.92	6,766.92
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	72.14	72.14
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >	72.14	72.14

3/31/98

SCHEDULE A

ITEMIZED RECEIPTS

PAGE OF
FOR LINE #
11 (a) (i)

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to to solicit contributions from such committee.

Receipt For: Primary General Other

NAME OF COMMITTEE:

OWENS-ILLINOIS, INC. EMPLOYEES GOOD CITIZENSHIP FUND

Full Name, Address:	Employer:	Date:	Amt of:
R. A. Smith 29728 Waterbury Circle Perrysburg, OH 43551	Owens-Illinois, Inc. & Its Subsidiaries VP Area Mgr Aggregate YTD: 300.00	3/31/98	300.00
L. A. Wesselmann 4244 Halifax Rd. Toledo, OH 43606	Owens-Illinois, Inc. & Its Subsidiaries VP Finance Aggregate YTD: 210.00	3/31/98	210.00
M. D. McDaniel 3707 River Road Toledo, OH 43614	Owens-Illinois, Inc. & Its Subsidiaries VP Closure Mfg Aggregate YTD: 210.00	3/31/98	210.00
TOTAL THIS PERIOD			720.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Owens-Illinois, Inc. Employees Good Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Coverdell Good Government Committee 2800 Shirlington Road Suite 716, Arlington, VA 22206	Check Voided Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/98	(1,000.00)
B. Full Name, Mailing Address and ZIP Code Larry Craig for Senate 1996 Debt Retirement P. O. Box 253 Mt. Vernon, VA 22121	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/19/98	1,000.00
C. Full Name, Mailing Address and ZIP Code The Judd Gregg Committee P. O. Box 1812 Concord, NH 03302-1812	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/19/98	1,000.00
D. Full Name, Mailing Address and ZIP Code John McCain for Senate 507 Capitol Court, #100 Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/19/98	1,000.00
E. Full Name, Mailing Address and ZIP Code Campbell for Victory Fund 236 Massachusetts Avenue NE Suite 503 Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/19/98	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Owens-Illinois, Inc. Employees Good Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Association of Chain Drug Stores 413 North Lee Street P. O. Box 1417-D49 Alexandria, VA 22313-1480	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/10/98	3,000.00
B. Full Name, Mailing Address and ZIP Code Lucas County Republican Party 324 North Erie Suite 1 Toledo, OH 43624	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/4/98	125.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	3,125.00
TOTAL This Period (last page this line number only)	6,125.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4/14/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>RBW</i>	 <i>4/19/98</i>
PREPARER	DATE PREPARED