Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) OWENS-ILLINOIS INC EMPLOYEES GOOD CITIZENSHIP FUND One O-I Plaza ADDRESS (number and street) One Michael Owens Way (Check if address is changed) Perrysburg 43551-2999 OH CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Brenda.Corr@o-i.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.o-i.com (Check if address is changed) DATE 25 2006 C00034330 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. STEEN, DANIEL K, , , Type or Print Name of Treasurer STEEN, DANIEL K, , , [Electronically Filed] 07 10 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF CO	OMMITTEE 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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	mittee:  (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo or more political
	committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Comi	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
0	FEC ID number	
2.		
2. 3.	FEC ID number	

Title or Position VP Global Govt Aff

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Write or Type Committee Na			r age 3
3.	 IOIS INC EMPLOYEES (	2000 CITIZENICL	IID EI INID
6. Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	draising Representative, or Leaders	ship PAC Sponsor
OWENS-ILLINOIS			
Mailing Address	One O-I Plaza		
ivialility Address	One Michael Owens Way		
	Perrysburg	OH 43551-2	999
	CITY	STATE	ZIP CODE
	CITY	STATE	ZIP CODE
books and records.	dentify by name, address (phone number option renda, Lynn, ,	nal) and position of the person in po	ssession of committee
Mailing Address	One Michael Owens Way		
	Perrysburg	OH 43551	
Title or Position	CITY	STATE	ZIP CODE
Govt Affairs Spec		Telephone number	336 2466
8. <b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the tre ., assistant treasurer).	easurer of the committee; and the na	ame and address of
Full Name STEEN, of Treasurer	DANIEL K, , ,		
Mailing Address	One Michael Owens Way		
	Perrysburg	OH 43551	
	CITY	STATE	ZIP CODE

202

Telephone number

256

0217

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Full Name of Designated Agent	Corr, Brend	la, Lynn, ,											
Mailing Address		One Michae	l Owens W	/ay									
-													
		Perrysburg						ОН		43551			
T0 5 22				CITY				STATE			ZIP	CODE	
Title or Position Assistant Treas	urer			I		Telenho	one nun	nher	567	7  -	336	-	2466
Banks or Other safety deposit bo Name of Bank, I	oxes or maint Depository, e	tains funds. tc.	nks or oth	ier deposii	tories in w	mich the	Commit	ee uepos	713 Tu	nus, noi	us acc	ounts,	rents
safety deposit be Name of Bank, I	Depository, e	tains funds. tc.	<u> </u>		tories in w					lius, noi		,ounts,	Tents
safety deposit bo	Depository, e	tains funds.  tc.	<u> </u>		tories in w					IIIUS, IIIUI			Tents
safety deposit be Name of Bank, I	Depository, e	tains funds.  tc.	<u> </u>		tories in w			OH		43605			Tents
safety deposit be Name of Bank, I	Depository, e	kains funds.  k  One Seagat	<u> </u>	CITY	tories in w							CODE	
safety deposit be Name of Bank, I	oxes or maint Depository, et	tains funds.  tc.  One Seagat  Toledo	<u> </u>		tories in w			OH					
safety deposit be Name of Bank, I	Depository, et	tains funds.  tc.  One Seagat  Toledo  tc.	e	CITY				OH		43605	ZIP		
Safety deposit be Name of Bank, I	Depository, ed	tains funds.  tc.  One Seagat  Toledo	e	CITY				OH		43605	ZIP		
safety deposit be Name of Bank, I	Depository, ed	tains funds.  tc.  One Seagat  Toledo  tc.	e	CITY				OH		43605	ZIP		
Safety deposit be Name of Bank, I Mailing Address	Depository, ed	tains funds.  tc.  One Seagat  Toledo  tc.	e	CITY				OH		43605	ZIP		