

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Dec 10 2 46 PM '96

December 4, 1996

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

RE: ID #C00034330  
October 15 Quarterly Report - 7/1/96 - 9/30/96  
Post General Election - 10/1/96 - 11/25/96

Gentlemen:

Enclosed is an amendment to our Quarterly Report, as well as our Post General Election Report. A correction was made to move a check that we voided out of line 16 to line 23.

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

Dec 10 2 46 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Owens-Illinois Employees Good Citizenship Fund</b>	2. FEC IDENTIFICATION NUMBER <b>#000034330</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>One SeaGate</b>	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE <b>Toledo, OH 43666</b>	

## 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  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day 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>7/1/96</u> through <u>9/30/96</u>		
6. (a) Cash on Hand January 1, 19____		\$ 86,550.07
(b) Cash on Hand at Beginning of Reporting Period	\$ 14,646.11	
(c) Total Receipts (from Line 19)	\$ 7,699.92 <del>8,699.92</del>	\$ 23,545.96 ✓
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,346.03 <del>23,346.03</del>	\$ 30,091.93
7. Total Disbursements (from Line 30)	\$ 7,100.00 <del>8,100.00</del>	\$ 14,850.00 <del>15,850.00</del>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 15,246.03	\$ 15,246.03
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 20463 Toll Free 800-424-9530 Local 202-219-3420
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 <b>John E. Hoff</b>		
Signature of Treasurer 		Date <b>10/2/96</b>

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

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**FEC FORM 3X**

(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

Owens-Illinois Employees Good Citizenship Fund

REPORT COVERING PERIOD

FROM 7/1/96

TO 9/30/96

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)

ii. Unitemized

iii. Total (add i and ii) >

b. Political Party Committees

c. Other Political Committees (such as PACs)

d. Total Contributions (add a iii, b and c) >

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) >

20. Total Federal Receipts (subtract line 18 from line 19) >

### 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

c. Total Operating Expenditures (add a i, a ii, and b) >

22. Transfers to Affiliated/Other Party Committees

23. Contributions to Federal Candidates/Committees and Other Political Committees

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. Individual/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) >

31. Total Federal Disbursements (subtract line 21 a ii from line 30) >

### III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from line 11d)

33. Total Contribution Refunds (from line 28d)

34. Net Contributions (other than loans) (subtract line 33 from 32)

35. Total Federal Operating Expenditures (add 21 a i and 21 b) >

36. Offsets to Operating Expenditures (from line 15)

37. Net Operating Expenditures (subtract line 36 from 35) >

11(a)  
11(b)  
11(c)  
11(d)  
11(e)  
11(f)  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21(a)  
21(b)  
21(c)  
21(d)  
22  
23  
24  
25  
26  
27  
28(a)  
28(b)  
28(c)  
28(d)  
29  
30  
31  
32  
33  
34  
35  
36  
37

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 2  
FOR LINE NUMBER

"Other"

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
New Republican Majority Fund 3001 Park Center Drive Suite 1105 Alexandria, VA 22302	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Republican Ohio Senate Campaign Committee	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/96	100.00
C. Full Name, Mailing Address and ZIP Code Hatch For Senate	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	(1000.00)
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)

100.00  
~~1,100.00~~

TOTAL This Period (last page this line number only)

~~1,100.00~~  
8,100.00

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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

12/5/96

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

E.S.  
PREPARER

12/10/96  
DATE PREPARED