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Margaret Anderson Treese
Senior Attorney
Law Department

NCR Corporation
101 West Schantz Ave., ECD-2
Dayton, Ohio 45479-0001
Telephone: 937 445-2969
Facsimile: 937 445-0801
email: MAndy.Treese@DaytonOH.NCR.COM

August 8, 2000

Via Certified Mail

Federal Election Commission
999 "E" Street, N.W.
Washington, DC 20463

Re: NCR Corporation Citizenship Fund (the "Fund"); FEC ID # C00324103

Dear Sir/Madam:

Enclosed is FEC Form 3X – NCR Corporation Citizenship Fund's Report of Receipts and Disbursements for July 2000. The NCR Corporation Citizenship Fund is simultaneously filing this report with the Ohio Secretary of State's Office.

Also enclosed is amended Form 3X for the Fund for the month ending March 31, 2000. This amendment is being filed to correct a \$1,000 disbursement, which was designated to the Primary Election Fund, but should have been designated to the General Election Fund.

Please return file-stamped copies in the enclosed stamped, pre-addressed envelope. You may reach me at 937-445-2969 if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Margaret A. Treese", written over a horizontal line.

Margaret Anderson Treese
Secretary, NCR Citizenship Fund

Enclosure

cc: J. Hoak
P. Servidea (w/encl.)
R. Musick (w/encl.)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
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2000 AUG 14 P 12:16

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) NCR Corporation Citizenship Fund	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1919 Pennsylvania Ave., NW Suite 630	2. FEC IDENTIFICATION NUMBER C00324103
CITY, STATE and ZIP CODE Washington, DC 20006	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 checked="" 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>07/01/00</u> through <u>07/31/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 63,578.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 60,534.10	
(c) Total Receipts (from Line 10)	\$ 4,333.90	\$ 33,489.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 64,868.00	\$ 97,068.00
7. Total Disbursements (from Line 8D)	\$ 5,500.00	\$ 37,700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 59,368.00	\$ 59,368.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Tel Free 800-424-9630
Local 202-694-1100

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
Philip D. Servides

Signature of Treasurer Date 8/3/00

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE NCR Corporation Citizenship Fund	REPORT COVERING PERIOD		
	FROM 07/01/00	TO 07/31/00	
	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)	1,579.40	5,780.80	11(a)(i)
ii. Unitemized	2,754.60	27,708.80	11(a)(ii)
iii. Total (add i and ii) >	4,333.90	33,489.50	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a ii, b and c) >	4,333.90	33,489.50	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4,333.90	33,489.50	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4,333.90	33,489.50	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	5,500.00	35,500.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	1,200.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,500.00	37,700.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	5,500.00	37,700.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,333.90	33,489.50	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,333.90	33,489.50	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 35 from 35) >	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 11 a 1

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)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code DAVID BEARMAN 1700 S PATTERSON BLVD DAYTON, OH 45475-0001	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Officer	Payroll Deduction	60.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		Biweekly
B. Full Name, Mailing Address and ZIP Code WILLIAM A. GENDRON 3291 SHELLERS BEND APT 740 STATE COLLEGE, PA 16801-3084	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation BU PS Vice President	Payroll Deduction	30.00 (\$15.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00		Biweekly
C. Full Name, Mailing Address and ZIP Code JOSEPH A STORK III 18 CAROLYN COURT BOHEMIA, NY 11716-4230	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Managing Partner 1 - WCS	Payroll Deduction	30.00 (\$15.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00		Biweekly
D. Full Name, Mailing Address and ZIP Code PAUL M SAMSON 2830 DUTTON COURT DAYTON, OH 45458-0266	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Senior Attorney	Payroll Deduction	40.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Biweekly
E. Full Name, Mailing Address and ZIP Code TIMOTHY J STAUDENMAIER 460 SHORE DRIVE SUWANEE, GA 30024-2807	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Senior WFO Director	Payroll Deduction	30.00 (\$16.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00		Biweekly
F. Full Name, Mailing Address and ZIP Code WILLIAM D KASTNING 4 MOUNT DRIVE PERRINEVILLE, NJ 08535-1010	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Pssp Product Program Director	Payroll Deduction	32.00 (\$16.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		Biweekly
G. Full Name, Mailing Address and ZIP Code ANTHONY FANO 2216 ASCOTT VALLEY TRACE DULUTH, GA 30097-5972	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Officer	Payroll Deduction	92.00 (\$48.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 690.00		Biweekly

SUBTOTAL of Receipts This Page (optional) 334.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 5
FOR LINE NUMBER 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 solicit contributions from such information.

NAME OF COMMITTEE (in Full)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code WILHELMINA C CURTIS-CROCE 424 LITTLE BROOK RD GLEN GARDNER, NJ 08826-3317 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 30.00
	Occupation Pre-Sale Senior Consultant 2	Deduction (\$15.00)	Aggregate Year-to-Date > \$ 225.00 Biweekly
B. Full Name, Mailing Address and ZIP Code PHILIP D. SERVIDEA 9610 WHITECEDAR COURT VIENNA, VA 22181-5468 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 60.00
	Occupation Government Affairs	Deduction (\$40.00)	Aggregate Year-to-Date > \$ 600.00 Biweekly
C. Full Name, Mailing Address and ZIP Code VAN H AGGELAKOS 1147 FAIRWAY GARDENS NE ATLANTA, GA 30319-3371 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 40.00
	Occupation Industry Vice President	Deduction (\$20.00)	Aggregate Year-to-Date > \$ 300.00 Biweekly
D. Full Name, Mailing Address and ZIP Code SHAIKH ABDUL WAHID 800 CORPORATE DRIVE SUITE 300 FT LAUDERDALE, FL 33334-3616 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 30.00
	Occupation WFO Manager/Director	Deduction (\$15.00)	Aggregate Year-to-Date > \$ 225.00 Biweekly
E. Full Name, Mailing Address and ZIP Code RICHARD J BIGLER 608 OAKNOLL DRIVE SPRINGBORO, OH 45066-9679 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 30.00
	Occupation Senior WFO Director	Deduction (\$15.00)	Aggregate Year-to-Date > \$ 225.00 Biweekly
F. Full Name, Mailing Address and ZIP Code WILLIAM J EISENMAN 1201 SESSIONS DRIVE CENTERVILLE, OH 45459-3709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 40.00
	Occupation Officer	Deduction (\$20.00)	Aggregate Year-to-Date > \$ 300.00 Biweekly
G. Full Name, Mailing Address and ZIP Code ROBERT A DAVIS 128 WHITE BIRCH CIRCLE COLUMBIA, SC 29223-3200 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NCR Corporation	Date (month, day, year) Payroll	Amount of Each Receipt this Period 60.00
	Occupation Division/Area VP	Deduction (\$30.00)	Aggregate Year-to-Date > \$ 450.00 Biweekly

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES E CLARK 209 WEXFORD COURT COLUMBIA, SC 29212-8722 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	80.00
	Occupation: Division/Area VP	Deduction	(\$30.00)
		Aggregate Year-to-Date > \$ 450.00	Biweekly
JOHN L GIERING 6477 KINGS GRANT PASSAGE CENTERVILLE, OH 45458-2959 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corp.	Payroll	92.00
	Occupation: Consultant	Deduction	(\$46.00)
		Aggregate Year-to-Date > \$ 600.00	Biweekly
MITSUYA INOHARA 1811 ARBOR WALK CT DAYTON, OH 45468 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	40.00
	Occupation: Marketing Specialist	Deduction	(\$20.00)
		Aggregate Year-to-Date > \$ 300.00	Biweekly
RONALD I HOLLEY 4548 KINGARDINE DRIVE JACKSONVILLE, FL 32257-6068 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	15.00
	Occupation: Managing Partner 1 - WCS	Deduction	(\$15.00)
		Aggregate Year-to-Date > \$ 210.00	Biweekly
KEITH A TAYLOR 945 S NIXON CAMP RD OREGONIA, OH 45054-8418 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	40.00
	Occupation: Division/Area VP	Deduction	(\$20.00)
		Aggregate Year-to-Date > \$ 300.00	Biweekly
LARS G NYBERG 3600 WOOD HOLLOW ROAD KETTERING, OH 45429-1241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	115.40
	Occupation: CEO	Deduction	(\$57.70)
		Aggregate Year-to-Date > \$ 855.50	Biweekly
KIM A HORNE 215 LOOKOUT DRIVE DAYTON, OH 45419-3813 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation	Payroll	40.00
	Occupation: Director, Internal Audit	Deduction	(\$20.00)
		Aggregate Year-to-Date > \$ 300.00	Biweekly

SUBTOTAL of Receipts This Page (optional)

402.40

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code EARL C SHANKS 5110 GARDEN SPRING CT DAYTON, OH 45429-2070	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Division/Area VP	Payroll	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00	Deduction	(\$20.00)
			Biweekly
B. Full Name, Mailing Address and ZIP Code BRENDAN P HICKMAN 500 PARK BLVD #300 ITASCA, IL 60143	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Pre-Sale Managing Partner 2	Payroll	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00	Deduction	(\$15.00)
			Biweekly
C. Full Name, Mailing Address and ZIP Code GERALD E BEHN 4287 POND VIEW CT BELLBROOK, OH 45305-1494	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation AVP-Corp Real Estate	Payroll	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 226.00	Deduction	(\$15.00)
			Biweekly
D. Full Name, Mailing Address and ZIP Code RUTH A FORNELL 33 WEST PEACH ORCHARD ROAD DAYTON, OH 45419-2552	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation CSG Solutions Marketing VP	Payroll	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.00	Deduction	(\$15.00)
			Biweekly
E. Full Name, Mailing Address and ZIP Code JOHN R ACKERMANN 4353 NAPA VALLEY DRIVE BELLEVUE, OH 45305-1567	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Law Vice President	Payroll	37.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 277.50	Deduction	(\$16.50)
			Biweekly
F. Full Name, Mailing Address and ZIP Code ROBERT A YOUNG 621 HEARTLAND TRACE CENTERVILLE, OH 45458-3848	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Controller	Payroll	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00	Deduction	(\$20.00)
			Biweekly
G. Full Name, Mailing Address and ZIP Code WENDY T KIRBY 6 BRIDLE COURT POTOMAC, MD 20854-3887	Name of Employer NCR Corporation	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Asst Law Vice President	Payroll	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00	Deduction	(\$20.00)
			Biweekly

SUBTOTAL of Receipts This Page (optional)	247.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS A VOLPE 1700 S PATTERSON BLVD C/O EXPATRIATE PROGRAMS DAYTON, OH 45479-0001 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corp.		
	Occupation VP, PS Solutions & Sales	Payroll Deduction	40.00 (\$20.00)
		Aggregate Year-to-Date > \$ 300.00	Biweekly
JONATHAN S HOAK 1700 S PATTERSON BLVD C/O NCR - LAW DEPT DAYTON, OH 45479-0001 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation		
	Occupation Officer	Payroll Deduction	60.00 (\$40.00)
		Aggregate Year-to-Date > \$ 500.00	Biweekly
REID M WATTS 201 SPRING CREEK COURT LEXINGTON, SC 29072-7948 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation		
	Occupation Venture Fund VP	Payroll Deduction	60.00 (\$30.00)
		Aggregate Year-to-Date > \$ 450.00	Biweekly
ELSIE L YIP 2645 MIRA MONTANA PLACE DEL MAR, CA 92014-3458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation		
	Occupation Service Level Manager 3	Payroll Deduction	30.00 (\$15.00)
		Aggregate Year-to-Date > \$ 225.00	Biweekly
SERGIO A LOPEZ 3977 EVERETT ROAD URBANA, OH 43075-9157 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation		
	Occupation Dir, Cs Mgmt Sys Prog	Payroll Deduction	46.00 (\$23.00)
		Aggregate Year-to-Date > \$ 345.00	Biweekly
WILLIAM O BRAY IV 754 E SCHANTZ AVE OAKWOOD, OH 45419-3815 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	NCR Corporation		
	Occupation Division/Area VP	Payroll Deduction	30.00 (\$30.00)
		Aggregate Year-to-Date > \$ 420.00	Biweekly
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 285.00

TOTAL This Period (last page this line number only) 1,579.40

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

NCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OXLEY FOR CONGRESS 1228 SOUTH MAIN STREET FINDLAY, OH 45840	Michael G. Oxley, U.S. HOUSE 4th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/10/00	2,000.00
Largent For Congress 2000 6150 S Louisville Tulsa, OK 74136	Steve Largent, U.S. HOUSE 1st OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/10/00	1,000.00
Lazio 2000 125 S Windsor Avenue Brightwaters, NY 11718	Rick A. Lazio, U.S. HOUSE 2nd NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/27/00	1,500.00
BUSH for President, Inc. P.O. Box 1902 Austin, TX 78767-1902	George W. Bush, TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/28/00	1,000.00
B. 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)

5,500.00

TOTAL This Period (last page this line number only)

6,500.00

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 (R/C) 8-9-00
<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>See</i> PREPARER	8/14/00 DATE PREPARED