

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM



Margaret Anderson Treese
Attorney
Law Department

APR 27 11 57 AM '98

NCR Corporation
101 West Schantz Ave., ECD-2
Dayton, Ohio 45479-0001
Telephone: 937 445-2869
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April 16, 1998

Via Certified Mail

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

Re: NCR Corporation Citizenship Fund; FEC ID # C00324103

Dear Sir/Madam:

Enclosed is FEC Form 3X – NCR Corporation Citizenship Fund's Report of Receipts and Disbursements for March 1998. The NCR Corporation Citizenship Fund is simultaneously filing this report with the Ohio Secretary of State's Office.

Please return a file-stamped copy 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 cursive script that reads "Margaret A. Treese".

Margaret Anderson Treese
Secretary, NCR Citizenship Fund

Enclosure

cc: L. Nyquist
P. Servidca (w/encl.)
H. Noll (w/encl.)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
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1. NAME OF COMMITTEE (in full) NCR Corporation Citizenship Fund		2. FEC IDENTIFICATION NUMBER c00324103
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1299 Pennsylvania Ave., NW Suite 1300		
CITY, STATE and ZIP CODE Washington, DC 20004-2400		
		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM LM)

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

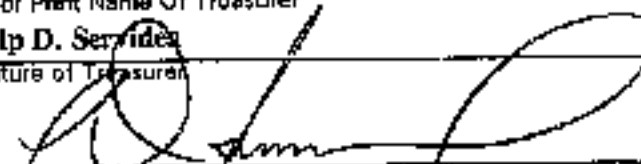
Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

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>03/01/98</u> through <u>03/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 47,930.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 54,133.00	
(c) Total Receipts (from line 19)	\$ 4,168.00	\$ 14,870.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 58,301.00	\$ 62,801.00
7. Total Disbursements (from Line 30)	\$ 4,000.00	\$ 8,500.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 54,301.00	\$ 54,301.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: 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)	\$ 0.00	
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 Phillip D. Servides	Date 4/13/98
Signature of Treasurer 	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §137g.

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FEC FORM 3X

(Revised 8/93)

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: 03/01/98	TO: 03/31/98
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	624.00	808.00
ii. Unitemized.....	3,544.00	14,062.50
iii. Total.....(add i and ii) >	4,168.00	14,870.50
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add aii, b and c) >	4,168.00	14,870.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4,168.00	14,870.50
20. Total Federal Receipts.....(subtract line 18 from line 19) >	4,168.00	14,870.50
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	0.00	0.00
c. Total Operating Expenditures.....(Add a, ii, and b) >	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,000.00	8,500.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a, b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,000.00	8,500.00
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30) >	4,000.00	8,500.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans) (from line 11d).....	4,168.00	14,870.50
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32).....	4,168.00	14,870.50
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	0.00	0.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
1	2
FOR LINE NUMBER	
11 a i	

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 or 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 ANTHONY FANO 2216 ASCOTT VALLEY TRACE DULUTH, GA 30097-5972		Name of Employer NCR Corporation Occupation Officer		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 92.00 (\$46.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		322.00		Biweekly)	
B. Full Name, Mailing Address and Zip Code JOHN RYAN 82 HOFFMAN ST FRANKLIN SQUARE, NY 11010-2406		Name of Employer NCR Corporation Occupation GCM Outsourcing Strategy		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 60.00 (\$30.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		210.00		Biweekly)	
C. Full Name, Mailing Address and Zip Code PHILIP D. SERVIDEA 9610 WHITECEDAR COURT VIENNA, VA 22181-5468		Name of Employer NCR Corporation Occupation Government Affairs		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 80.00 (\$40.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		280.00		Biweekly)	
D. Full Name, Mailing Address and Zip Code ROBERT A DAVIS 110 ABERDEEN CIRCLE SPRINGBORO, OH 45066-9473		Name of Employer NCR Corporation Occupation Division/Area VP		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 60.00 (\$30.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		210.00		Biweekly)	
E. Full Name, Mailing Address and Zip Code FRANK HARRELL 109 STURBRIDGE LN COLUMBIA, SC 29212-8736		Name of Employer NCR Corporation Occupation Division/Area VP		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 60.00 (\$30.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		210.00		Biweekly)	
F. Full Name, Mailing Address and Zip Code JOHN J. GIERING 6477 KINGS GRANT PASSAGE CENTERVILLE, OH 45459-2959		Name of Employer NCR Corporation Occupation Officer		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 92.00 (\$46.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		322.00		Biweekly)	
G. Full Name, Mailing Address and Zip Code GARY J. COTSHOTT 4840 WINDING CREEK TRAIL KETTERING, OH 45429-1975		Name of Employer NCR Corporation Occupation Officer		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 60.00 (\$30.00)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		210.00		Biweekly)	

SUB TOTAL of Receipts This Page (Optional)	504.00
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	OF
	2	2
FOR LINE NUMBER		
11 a i		

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	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
JONATHAN S HOAK 1700 S PATTERSON BLVD C/O NCR - LAW DEPT DAYTON, OH 45479-0001	NCR Corporation Occupation Officer	Payroll Deduction	60.00 (\$30.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 210.00		Biweekly
REID M WATTS 201 SPRING CREEK COURT LEXINGTON, SC 29072-7948	NCR Corporation Occupation Avp-Saa Solutions	Payroll Deduction	60.00 (\$30.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 210.00		Biweekly
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
SUB TOTAL of Receipts This Page (Optional)			120.00
TOTAL this Period (Last page this line number only)			624.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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 or 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	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The Tom Sawyer Committee P.O. Box 75214 Washington, DC 20013-5214	Tom Sawyer, U.S. HOUSE 14th OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/05/98	500.00
B. Full Name, Mailing Address and Zip Code Mark Green for Congress P.O. Box 12571 Green Bay, WI 54307	Green, U.S. HOUSE 11th WI Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/15/98	1,000.00
C. Full Name, Mailing Address and Zip Code 98 Leadership PAC (Oxley) 515 King St, Suite 420 Alexandria, VA 22314	leadership pac Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/15/98	1,000.00
D. Full Name, Mailing Address and Zip Code FRIENDS OF BOEHLERT COMMITTEE 20 STONE BRIDGE NEW HARTFORD, NY 13413	Sherwood Boehlert, U.S. HOUSE 23rd NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/17/98	500.00
E. Full Name, Mailing Address and Zip Code CITIZENS FOR TONY HALL 3275 SOUTHDAL DRIVE KETTERING, OH 45409	Tony P. Hall, U.S. HOUSE 3rd OH Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/23/98	500.00
F. Full Name, Mailing Address and Zip Code CHRIS COX CONGRESSIONAL COMMITTEE 17 GUNNISON IRVINE, CA 92612	Christopher Cox, U.S. HOUSE 47th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	03/24/98	500.00
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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional) > 4,000.00

TOTAL this Period (Last page this line number only) > 4,000.00

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 4/20/98
<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	
 J. A. Q. PREPARER	 4/27/98 DATE PREPARED