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FEDERAL ELECTION
COMMISSION MAIL ROOM



Margaret Anderson Treese
Senior Attorney
Law Department

APR 27 11 23 AM '99

NCR Corporation
101 West Scharitz Ave., ECD-2
Dayton, Ohio 45479-0001
Telephone: 937 445-2969
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mgt: Molly Treese@DaytonOH.NCR.COM

April 20, 1999

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 1999. 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: J. Hoak
P. Servida (w/encl.)
R. Musick (w/encl.)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE REC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 27 11 28 AM '99

1. NAME OF COMMITTEE (in full)
NCR Corporation Citizenship Fund

ADDRESS (number and street) Check if different than previously reported
1298 Pennsylvania Ave., NW Suite 1300

CITY, STATE and ZIP CODE
Washington, DC 20004-2400

2. FEC IDENTIFICATION NUMBER
c00324103

3. 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:

- 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	03/01/99 through 03/31/99		
6. (a) Cash on Hand January 1, 19 99			\$ 50,896.00
(b) Cash on Hand at Beginning of Reporting Period		\$ 55,889.00	
(c) Total Receipts (from Line 19)		\$ 3,833.00	\$ 13,036.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 58,932.00	\$ 69,932.00
7. Total Disbursements (from Line 30)		\$ 4,800.00	\$ 9,006.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 54,932.00	\$ 64,932.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20463 Toll Free 800-424-9590 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. Servida

Signature of Treasurer

Date

4/14/99

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

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		REPORT COVERING PERIOD		
NCR Corporation Citizenship Fund		FROM	TO	
		03/01/89	03/31/89	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Beritized (use Schedule A)	424.00	1,824.00	11(a)(i)
ii.	Unberitized	3,409.00	11,112.00	11(a)(ii)
iii.	Total	3,833.00	13,036.00	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	3,833.00	13,036.00	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	3,833.00	13,036.00	19
20.	Total Federal Receipts	3,833.00	13,036.00	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	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	4,000.00	9,000.00	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	0.00	0.00	28(d)
29.	Other Disbursements	0.00	0.00	29
30.	Total Disbursements	4,000.00	9,000.00	30
31.	Total Federal Disbursements	4,000.00	9,000.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11 d)	3,833.00	13,036.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	3,833.00	13,036.00	34
35.	Total Federal Operating Expenditures	0.00	0.00	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID BEARMAN 1700 S PATTERSON BLVD DAYTON, OH 45478-0001	NCR Corporation	Payroll	90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Officer	Deduction	(\$40.00)
	Aggregate Year-to-Date > \$ 240.00		Biweekly)
ANTHONY FANO 2218 ASCOTT VALLEY TRACE DULUTH, GA 30097-5972	NCR Corp.	Payroll	92.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Officer	Deduction	(\$48.00)
	Aggregate Year-to-Date > \$ 276.00		Biweekly)
PHILIP D. SERVIDEA 9610 WHITECEDAR COURT VIENNA, VA 22181-5488	NCR Corp.	Payroll	80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Affairs	Deduction	(\$40.00)
	Aggregate Year-to-Date > \$ 240.00		Biweekly)
JOHN L GIERING 6477 KINGS GRANT PASSAGE CENTERVILLE, OH 45459-2969	NCR Corp.	Payroll	92.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Deduction	(\$48.00)
	Aggregate Year-to-Date > \$ 276.00		Biweekly)
JONATHAN S HOAK 1700 S PATTERSON BLVD C/O NCR - LAW DEPT DAYTON, OH 45479-0001	NCR Corp.	Payroll	80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Officer	Deduction	(\$40.00)
	Aggregate Year-to-Date > \$ 220.00		Biweekly)
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 > \$		

SUBTOTAL of Receipts This Page (optional)	424.00
TOTAL This Period (last page this line number only)	424.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baldacci For Congress Po Box 823 Bangor, ME 04402	John Baldacci, U.S. HOUSE 2nd ME Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/08/99	500.00
B. Full Name, Mailing Address and ZIP Code 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) 2000	02/08/99	500.00
C. Full Name, Mailing Address and ZIP Code FRIENDS OF CONNIE MORELLA FOR CONGRESS 2228 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515	Constance A. Morella, U.S. HOUSE 8th MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/22/99	500.00
D. Full Name, Mailing Address and ZIP Code HOBSON FOR CONGRESS COMMITTEE 482 LONGFORD CLOSE EAST SPRINGFIELD, OH 45503	David L. Hobson, U.S. HOUSE 7th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/22/99	500.00
E. Full Name, Mailing Address and ZIP Code Friends of Harry Reid 246 2nd St, NE Washington, DC 20002	Harry Reid, U.S. SENATE NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/22/99	1,000.00
F. Full Name, Mailing Address and ZIP Code Franks for Congress 1212 N. Vermont St Arlington, VA 22201	Bob Franks, U.S. HOUSE 7th NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/24/99	1,000.00
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 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)

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 4-21-99
<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>JMN</i> PREPARER	 4-27-99 DATE PREPARED