

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM



Margaret Anderson Treese  
Attorney  
Law Department

MAR 23 11 23 AM '99

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

March 19, 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 February 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. Hoek  
P. Servidea (w/encl.)  
R. Musick (w/encl.)

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

MAR 23 11 23 AM '99

USE FEC MAILING LABELS  
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 1299 Pennsylvania Ave., NW Suite 1300
CITY, STATE and ZIP CODE Washington, DC 20004-2400

2. FEC IDENTIFICATION NUMBER c00324103
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 checked="" 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	02/01/99 through 02/28/99		
6. (a) Cash on Hand January 1, 19 99			\$ 50,896.00
(b) Cash on Hand at Beginning of Reporting Period		\$ 52,264.00	
(c) Total Receipts (from Line 19)		\$ 6,335.00	\$ 9,203.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 57,599.00	\$ 60,099.00
7. Total Disbursements (from Line 30)		\$ 2,500.00	\$ 6,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5(d))		\$ 55,099.00	\$ 55,099.00
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9580 Local 202-218-3420
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  
Philip D. Servides

Signature of Treasurer

Date

3/16/99

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	
		02/01/99	02/28/99	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	1,500.00	1,500.00	11(a)(i)
ii.	Unitemized	3,835.00	7,703.00	11(a)(ii)
iii.	Total (add i and ii) >	5,335.00	9,203.00	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 (add a iii, b and c) >	5,335.00	9,203.00	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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5,335.00	9,203.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	5,335.00	9,203.00	20
<b>II. Disbursements</b>				
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	2,500.00	5,000.00	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 (add a, b and c) >	0.00	0.00	28(d)
29.	Other Disbursements	2,500.00	5,000.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2,500.00	5,000.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	2,500.00	5,000.00	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d)	5,335.00	9,203.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	5,335.00	9,203.00	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 36 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 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 LARS G NYBERG 3600 WOOD HOLLOW ROAD KETTERING, OH 45428-1241	Name of Employer NCR Corp.	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):		02/08/99	1,500.00
B. Full Name, Mailing Address and ZIP Code		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	

SUBTOTAL of Receipts This Page (optional) .....	1,500.00
TOTAL This Period (last page this line number only) .....	1,500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)**  
MCR Corporation Citizenship Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<b>TOM DAVIS FOR CONGRESS</b> 3304 JUNIPER WAY FALLS CHURCH, VA 22044	Thomas M. Davis, U.S. HOUSE 11th VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/09/99	500.00
<b>Lincoln for Senate</b> PO Box 3197 Little Rock, AK 72203	Blanche Lambert Lincoln, U.S. SENATE AR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/09/99	1,000.00
<b>Grams 2000</b> PO Box 1029 320 E. Main St Anoka, MN 55303	Rod Grams, U.S. SENATE MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	02/15/99	1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b>	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
<b>E. Full Name, Mailing Address and ZIP Code</b>	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
<b>F. Full Name, Mailing Address and ZIP Code</b>	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
<b>G. Full Name, Mailing Address and ZIP Code</b>	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
<b>H. Full Name, Mailing Address and ZIP Code</b>	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
<b>I. Full Name, Mailing Address and ZIP Code</b>	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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2,600.00
<b>TOTAL</b> This Period (last page this line number only) .....	2,600.00

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 3-19-99
<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>Jell</i> PREPARER	3-25-99 DATE PREPARED