## **STATEMENT OF**

FORM 1	ORGANIZA (See instruction			Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
KeyCorp Advo	cates Fund-Federal Only			
ADDRESS (number and s	127 Public Square			
_	OH-01-27-1816			
(Check if address X is changed)	Cleveland		[ OH]	44114 _ 1306
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-m	<i>'</i>		
(Check if address is changed)	anne_feleppelle@key	bank.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address			11111	
is changed)	<u> </u>	11111111	11111	11111111
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C00399063		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my know	rledge and belief it is true, correc	ct and complete	
Type or Print Name of	Treasurer Erskine E Cade			
Signature of Treasurer	Electronically Filed by <b>Erskine E</b> (	Cade	Date 03	<b>26 2009</b>
NOTE: Submission of fal	se, erroneous, or incomplete information may  ANY CHANGE IN INFORMAT		·	-
Office Use Only		For further informati Federal Election Com Toll Free 800-424-955	mission	FEC FORM 1 (Revised 02/2009)

	F	EC F	orm 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) ommittee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information	below.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
	Name Candi			
	Candi Party	date Affiliatio	Office Sought: House Senate	President State  District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee	tee.
	Name Candi			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
_	Politic	cal Act	ion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.	) Its connected organization is a:
			X Corporation Corporation w/o Capital Stock	Labor Organization
			H H	
			Membership Organization Trade Association	Cooperative
χ In addition, this committee is a Lobbyist/Registrant PAC.				
	(f)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separa committee. (i.e., nonconnected committee)	ate segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.			
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
_			In addition, this committee is a Leadership i Ao. (identity sponsor on line o.)	
	Joint F	undra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, at least one of which is an authorized committee of a federal care	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate	
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	С
			2. FEC ID number	С
			3. FEC ID number	
			4 FEC ID number	>

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Write or Type Committee Nam	ie		
KeyCorp Advocates	Fund-Federal Only		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Re	epresentative, or Leade	ership PAC Sponsor
KeyCorp Advocates F	: :und 		
Mailing Address	127 Public Square, OH-01-27-181	16	
Ü	1		
	Cleveland	OH L	44114 _ 1306
	CITY	STATE A	ZIP CODE
Relationship:			
Connected Organizat	ion X Affiliated Committee Joint Fundrais	ing Representative	Leadership PAC Sponsor
possession of Commit	Identify by name, address, (phone number option tee books and records.  Identify by name, address, (phone number option tee books and records.  Identify by name, address, (phone number option tee books and records.  Identify by name, address, (phone number option tee books and records.		· 
	Cleveland	ОН	44114 _ 1306
Title or Position ♥	CITY A	STATE <b></b> ▲	ZIP CODE A
Assista		one number 216	- <u>689</u> - <u>4971</u>
name and address of	me and address (phone number optional) of the treasury designated agent (e.g., assistant treasurer).  kine E Cade  127 Public Square, OH-01-27-18		ttee; and the
	Clausland	OU	44444 1200
	Cleveland	<u>OH</u>	44114 1306
Title or Position ♥	CITY A	STATE.▲	ZIP CODE A
Treasu	rer	216	_ 689 _ 4486
	relepn	one number	<del>-</del>

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Full Name of Designated Agent	Anne Feleppelle			
Mailing Address	KeyCorp			
	127 Public Square, OH-01-27-18	316		
	Cleveland	OH	44114 – 1306	
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A	
Assis	stant Treasurer Telep	hone number 216	689 4971	
Banks or Other Deposit safety deposit boxes on Name of Bank, Deposit	r maintains funds. itory, etc.	ommittee deposits funds, h	nolds accounts, rents	
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safety deposit boxes o Name of Bank, Deposi	r maintains funds. itory, etc.  KeyCorp	ommittee deposits funds, h	nolds accounts, rents	
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## Image# 29991793290

Image# 29991793290	
Form/Schedule: <b>F1A</b> Transaction ID:	In addition, this committee is a Lobbyist/Registrant PAC and updated address information.
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