

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

KeyCorp Advocates Fund-Federal

ADDRESS (number and street) 127 Public Square OH-01-27-0200 Cleveland OH 44114

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00399063

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On:
Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the:
General (30G)
Runoff (30R)
Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 02/01/2024 through 02/29/2024

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 Pugliese, Christopher, J.,

Signature of Treasurer Pugliese, Christopher, J.,

Date 03/18/2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		81553.08
(b) Cash on Hand at Beginning of Reporting Period.....	83311.54	
(c) Total Receipts (from Line 19) .....	1638.08	3396.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	84949.62	84949.62
7. Total Disbursements (from Line 31).....	6500.00	6500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	78449.62	78449.62
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**KeyCorp Advocates Fund-Federal**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	730.74	1153.80
(ii) Unitemized .....	907.34	2242.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1638.08	3396.54
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1638.08	3396.54
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.) (Carry Totals to Line 37, page 5).....	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 Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1638.08	3396.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1638.08	3396.54

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 21(a)(i), (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.....	6500.00	6500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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) Individuals/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 Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6500.00	6500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6500.00	6500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1638.08	3396.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1638.08	3396.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
**KeyCorp Advocates Fund-Federal**

**A. Chauvette, Derek, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Public Sq  
 City Cleveland State OH Zip Code 44114-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2024  
**Transaction ID : A722C4531805D4D03AE8**  
 Amount of Each Receipt this Period  
 115.38  
 Memo Item

**B. Paine III, Andrew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Public Sq  
 City Cleveland State OH Zip Code 44114-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Head of Institutional Bank  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2024  
**Transaction ID : A57CBA9402D654F88A64**  
 Amount of Each Receipt this Period  
 192.30  
 Memo Item

**C. Warner, Adam, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Public Sq  
 City Cleveland State OH Zip Code 44114-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) President and COO, Leasing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 02 / 2024  
**Transaction ID : ADBA15DB5AD594EE2A46**  
 Amount of Each Receipt this Period  
 115.38  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	423.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**KeyCorp Advocates Fund-Federal**

**A. Chauvette, Derek, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Public Sq  
 City Cleveland State OH Zip Code 44114-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 02 / 16 / 2024  
**Transaction ID : A7DCA79CB69A4404AB46**  
 Amount of Each Receipt this Period 115.38  
 Memo Item

**B. Paine III, Andrew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Public Sq  
 City Cleveland State OH Zip Code 44114-1217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Head of Institutional Bank  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 769.20

Date of Receipt 02 / 16 / 2024  
**Transaction ID : AB62A82A5DFE144ABA55**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.68
<b>TOTAL</b> This Period (last page this line number only).....	730.74

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**KeyCorp Advocates Fund-Federal**

Full Name (Last, First, Middle Initial)

**A. NEVADANS FOR STEVEN HORSFORD**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	15	/	2024

Mailing Address PO BOX 336664

City  
NORTH LAS VEGAS

State  
NV

Zip Code  
89033

FEC Identification Number

**C** C00668228

**Transaction ID : B5DFCA44EE**

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement

Primary 2024

Category/  
Type

Candidate Name

Horsford, Steven, , Rep.,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: NV

District: 04

Memo Item

Full Name (Last, First, Middle Initial)

**B. Blake Moore for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	20	/	2024

Mailing Address 358 SOUTH 700 E  
B505

City  
Salt Lake City

State  
UT

Zip Code  
84102-2113

FEC Identification Number

**C** C00738872

**Transaction ID : BA6E70E99F**

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

Contribution to Committee

Category/  
Type

Candidate Name

Moore, Blake, , Rep.,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: UT

District: 01

Memo Item

Full Name (Last, First, Middle Initial)

**C. Shontel Brown For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	15	/	2024

Mailing Address 545 E Town St

City  
Columbus

State  
OH

Zip Code  
43215

FEC Identification Number

**C** C00764381

**Transaction ID : B8D786C6C2**

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement

Primary 2024

Category/  
Type

Candidate Name

Brown, Shontel, , Rep.,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: OH

District: 11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

4000.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**KeyCorp Advocates Fund-Federal**

Full Name (Last, First, Middle Initial)

**A. Beatty For Congress**

Mailing Address 222 E Town St  
FI 2W

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
General 2024

Candidate Name

Beatty, Joyce, , Rep.,

Office Sought:  House  
 Senate  
 President  
State: OH District: 03

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2024

FEC Identification Number

**C** C00507368

**Transaction ID : BCBB19000E**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2500.00

**TOTAL** This Period (last page this line number only)..... ▶

6500.00