

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
KeyCorp Advocates Fund

ADDRESS (number and street) 127 Public Square  
OH-01-27-1710  
 Check if different than previously reported. (ACC)  
Cleveland OH 44114

2. **FEC IDENTIFICATION NUMBER** C00073155  
**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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2007 through 09 30 2007

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 Erskine E. Cade

Signature of Treasurer Electronically Filed by Erskine E. Cade Date 10 10 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		27180.03
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	28929.34									
(c) Total Receipts (from Line 19) .....	17806.79	172474.10								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	46736.13	199654.13								
7. Total Disbursements (from Line 31) .....	19703.50	172621.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	27032.63	27032.63								
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:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	5344.91	28892.64
(i) Itemized (use Schedule A) .....	12461.88	143581.46
(ii) Unitemized .....	17806.79	172474.10
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	17806.79	172474.10
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 Transfer (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)) .....	17806.79	172474.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17806.79	172474.10

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	3.50	31.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	31.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	37400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	12200.00	120190.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	19703.50	172621.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19703.50	172621.50

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	17806.79	172474.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17806.79	172474.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	31.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3.50	31.50

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
JEFFREY STONE

Mailing Address 10080 PEMBURRY DR.

City GRANGER State IN Zip Code 46530-6062

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation DISTRICT PRESIDENT II

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5396091314

Amount of Each Receipt this Period  
30.00

P/R Deduction (\$15.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
PATRICIA J WYANT

Mailing Address 65 PEACHTREE LANE

City PAINESVILLE State OH Zip Code 44077-1451

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation MANAGER, EMPLOYEE RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 219.26

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5396531314

Amount of Each Receipt this Period  
23.08

P/R Deduction (\$11.54 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
RICHARD J VENNER

Mailing Address 131 FIRESIDE LANE

City CAMILLUS State NY Zip Code 13031-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation CORPORATE CREDIT OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5396711314

Amount of Each Receipt this Period  
24.00

P/R Deduction (\$12.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>77.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER K DYER</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5397361314
Mailing Address 38567 MISTY MEADOW TRAIL		Amount of Each Receipt this Period 25.54
City NORTH RIDGEVILLE State OH Zip Code 44039-1170	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation MGR PORTFOLIO ADMINISTRATION	Aggregate Year-to-Date 225.81	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$12.10 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. CINDY P CROTTY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5398931314
Mailing Address 2905 FAIRMOUNT BLVD		Amount of Each Receipt this Period 80.76
City CLEVELAND HEIGHTS State OH Zip Code 44118-4021	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SEGMENT HEAD COMMUNITY BANK	Aggregate Year-to-Date 767.22	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$40.38 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL W BICKERTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5399751314
Mailing Address 582 LEGENDS ROW		Amount of Each Receipt this Period 36.08
City AVON LAKE State OH Zip Code 44012-2269	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation REGIONAL CREDIT EXEC - CB	Aggregate Year-to-Date 342.76	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$18.04 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	142.38
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MARCUS E HELMBRECHT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6930 S. CAMELOT		<b>Transaction ID: PR5400571314</b>	
City MENTOR	State OH	Zip Code 44060-4075	Amount of Each Receipt this Period _____ 27.50
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER IV ETO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 236.65		
		P/R Deduction (\$13.03 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. GEORGE E EMMONS JR</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 699 COY LANE		<b>Transaction ID: PR5400901314</b>	
City CHAGRIN FALLS	State OH	Zip Code 44022-2679	Amount of Each Receipt this Period _____ 83.32
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PRESIDENT - COMMUNITY BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 791.54		
		P/R Deduction (\$41.66 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. SUSAN P BROCKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 28 ANNANDALE DRIVE		<b>Transaction ID: PR5401251314</b>	
City CHAGRIN FALLS	State OH	Zip Code 44022-4266	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation HR DIR, ORG & EMPLOY DEVELOP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 380.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>150.82</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
ALVIN B COPPOLO

Mailing Address 306 KILBOURNE DR

City HUDSON State OH Zip Code 44236-3424

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation ENTERPRISE TECHNOLOGY DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt  
 /  /

**Transaction ID:** PR5401261314

Amount of Each Receipt this Period  
 26.00

P/R Deduction (\$13.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
ANDREW R TYSON

Mailing Address 17431 FISH CREEK TRAIL

City CHAGRIN FALLS State OH Zip Code 44023-2126

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYCORP Occupation GROUP HEAD, STRATEGIC PLAN&DEV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.73

Date of Receipt  
 /  /

**Transaction ID:** PR5401461314

Amount of Each Receipt this Period  
 29.34

P/R Deduction (\$14.67 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
PAUL E HENSON

Mailing Address 20515 BEACONSFIELD BLVD

City ROCKY RIVER State OH Zip Code 44116-1305

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, CREDIT ADMIN III

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt  
 /  /

**Transaction ID:** PR5401511314

Amount of Each Receipt this Period  
 27.79

P/R Deduction (\$8.17 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>83.13</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b> Full Name (Last, First, Middle Initial) KATHLEEN M WORHATCH Mailing Address 796 TEAKWOOD DR City YOUNGSTOWN State OH Zip Code 44512-5016 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401561314 Amount of Each Receipt this Period 24.55
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR MGR OPERATION EFFECTIVENESS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 211.68		P/R Deduction (\$11.94 Bi-Weekly)

<b>B.</b> Full Name (Last, First, Middle Initial) FRED J WEIGLE JR Mailing Address 646 CANTER COURT City AVON LAKE State OH Zip Code 44012-4026 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401621314 Amount of Each Receipt this Period 21.92
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MGR, SALES SUPPORT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.24		P/R Deduction (\$10.96 Bi-Weekly)

<b>C.</b> Full Name (Last, First, Middle Initial) FLAVIO M GIUST Mailing Address 7285 SURREY LANE City CHESTERLAND State OH Zip Code 44026-2032 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402421314 Amount of Each Receipt this Period 24.00
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SECTOR MGR, FX SALES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 228.00		P/R Deduction (\$12.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>70.47</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
JAMES PEOPLES

Mailing Address 16827 SE 59TH STREET

City State Zip Code  
BELLEVUE WA 98006-5555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT III

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 791.54

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5402971314

Amount of Each Receipt this Period  
83.32

P/R Deduction (\$41.66 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
CRAIG T PLATT

Mailing Address 263 BELL STREET

City State Zip Code  
CHAGRIN FALLS OH 44022-2944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANC CAPITAL MARKETS INC. LDR, SECURITIZATION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 247.67

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5403081314

Amount of Each Receipt this Period  
13.48

P/R Deduction (\$13.48 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
RENEE R CSUHRAN

Mailing Address 4839 SNOW BLOSSOM LANE

City State Zip Code  
BRECKSVILLE OH 44141-3359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIRECTOR REC CREDIT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 368.27

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5403481314

Amount of Each Receipt this Period  
41.65

P/R Deduction (\$19.73 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>138.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. GEORGE A VALKO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10484 CANDLEWOOD DRIVE		<b>Transaction ID: PR5403631314</b>
City State Zip Code SCOTTSDALE AZ 85255-8034	Amount of Each Receipt this Period _____ 39.46	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL SALES MGR, CRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 369.39	P/R Deduction (\$19.73 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. SHELDON R HARTMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 31349 PINETREE ROAD		<b>Transaction ID: PR5403771314</b>
City State Zip Code PEPPER PIKE OH 44124-5907	Amount of Each Receipt this Period _____ 33.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation ASSOC GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 281.36	P/R Deduction (\$15.63 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. PAUL L MEINERDING</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4320 BRITTANY		<b>Transaction ID: PR5403831314</b>
City State Zip Code OTTAWA HILLS OH 43615-2306	Amount of Each Receipt this Period _____ 36.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT RETAIL LEADER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 342.00	P/R Deduction (\$18.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>108.46</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. THOMAS URBAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404081314
Mailing Address 5915 GILLINGHAM DR		Amount of Each Receipt this Period 23.87
City State Zip Code SYLVANIA OH 43560-1141	FEC ID number of contributing federal political committee. C	P/R Deduction (\$11.31 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, CMML BKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.28	

Full Name (Last, First, Middle Initial) <b>B. JOHN V AVALLONE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404131314
Mailing Address 4559 ROCKY MOUNTAIN DRIVE		Amount of Each Receipt this Period 21.00
City State Zip Code MEDINA OH 44256-6704	FEC ID number of contributing federal political committee. C	P/R Deduction (\$4.85 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SALES MGR, GLOBAL TREASURY MGM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.49	

Full Name (Last, First, Middle Initial) <b>C. ROBERT R MANERI</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404501314
Mailing Address 2570 JAYCOX ROAD		Amount of Each Receipt this Period 22.68
City State Zip Code AVON OH 44011-1922	FEC ID number of contributing federal political committee. C	P/R Deduction (\$11.34 Bi-Weekly)
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation RESEARCH ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.42	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	67.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. ANNETTE M HAZAPIS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 29674 DEVONSHIRE OVAL		<b>Transaction ID: PR5404591314</b>
City WESTLAKE	State OH	Zip Code 44145-3893
Amount of Each Receipt this Period _____ 22.65		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, PRODUCT MANAGEMENT G	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 202.66	
		P/R Deduction (\$10.73 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. CONSTANCE F PAGE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2811 CHATEAU CIRCLE		<b>Transaction ID: PR5404661314</b>
City COLUMBUS	State OH	Zip Code 43221-2553
Amount of Each Receipt this Period _____ 25.99		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR IV, BANK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.56	
		P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. LAWRENCE G BABIN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 28039 RED RAVEN RD		<b>Transaction ID: PR5404671314</b>
City PEPPER PIKE	State OH	Zip Code 44124-4551
Amount of Each Receipt this Period _____ 49.33		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation CIO LARGE CAP INVESTMENTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 477.69	
		P/R Deduction (\$23.37 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>97.97</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b> Full Name (Last, First, Middle Initial) LYNN B VANTAGGI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404951314	
Mailing Address 117 TURNBERRY CROSSING		Amount of Each Receipt this Period 22.95	
City BROADVIEW HEIGHTS	State OH	Zip Code 44147-3079	P/R Deduction (\$10.80 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYBANK NATIONAL ASSOCIATION	
Occupation SR MGR, CRE NATIONAL LN ADMIN		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 222.77			

<b>B.</b> Full Name (Last, First, Middle Initial) LINDA A GRANDSTAFF		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5405061314	
Mailing Address 17301 RIVERWAY DRIVE		Amount of Each Receipt this Period 53.49	
City LAKEWOOD	State OH	Zip Code 44107-5315	P/R Deduction (\$25.34 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYBANK NATIONAL ASSOCIATION	
Occupation CHIEF BANK SECRECY ACT OFFICER		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 442.00			

<b>C.</b> Full Name (Last, First, Middle Initial) LEE A LORENTZEN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5405081314	
Mailing Address 19358 TIMBER CREEK CIR		Amount of Each Receipt this Period 22.81	
City STRONGSVILLE	State OH	Zip Code 44136-7269	P/R Deduction (\$12.83 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYBANK NATIONAL ASSOCIATION	
Occupation MANAGING COUNSEL		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 230.90			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	99.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. ROSE M BLESSING</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5902 MALLARD COURT		<b>Transaction ID: PR5405211314</b>	
City MENTOR	State OH	Zip Code 44060-1813	Amount of Each Receipt this Period _____ 19.56
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CORPORATE STRATEGIC SPACE MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 217.74		
		P/R Deduction (\$10.43 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. MARYANN C LAWRENCE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5592 WELLESLEY AVE		<b>Transaction ID: PR5405301314</b>	
City NORTH OLMSTED	State OH	Zip Code 44070-3952	Amount of Each Receipt this Period _____ 25.52
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SENIOR MANAGER, RISK REVIEW		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 215.07		
		P/R Deduction (\$12.09 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. ANTHONY V ANSELMO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 603 PARKSIDE BLVD		<b>Transaction ID: PR5405521314</b>	
City RICHMOND HTS	State OH	Zip Code 44143-2813	Amount of Each Receipt this Period _____ 35.19
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 319.84		
		P/R Deduction (\$16.67 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>80.27</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. KURT L REIBER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3121 WOLF RUN CT		<b>Transaction ID: PR5405781314</b>	
City CINCINNATI	State OH	Zip Code 45244-2500	Amount of Each Receipt this Period _____ 24.11
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REL MGR SR, CRE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 215.74		
		P/R Deduction (\$11.42 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. JOSEPH E MCGRAW</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2305 S. MAIN		<b>Transaction ID: PR5406011314</b>	
City GOSHEN	State IN	Zip Code 46526-5225	Amount of Each Receipt this Period _____ 31.35
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICERIII-CB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 278.85		
		P/R Deduction (\$14.85 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. RICHARD S HAWRYLAK</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 571 WEDGEWOOD DRIVE		<b>Transaction ID: PR5406491314</b>	
City AVON LAKE	State OH	Zip Code 44012-2538	Amount of Each Receipt this Period _____ 23.99
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGING COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 212.25		
		P/R Deduction (\$10.66 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	_____ <b>79.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. GEORGE H STORAR</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5495 CHANCERY BLVD.		<b>Transaction ID: PR5406591314</b>	
City GREENWOOD      State IN      Zip Code 46143-7170	Amount of Each Receipt this Period _____ 25.91		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER II -CB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 241.77		
		P/R Deduction (\$11.52 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN M BOYLAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2149 WEST 7TH		<b>Transaction ID: PR5406611314</b>	
City CLEVELAND      State OH      Zip Code 44113-3621	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, MARKET RISK & SEC COMP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 380.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. JOSEPH P CONROY JR</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2530 CANYON CREEK DR		<b>Transaction ID: PR5406651314</b>	
City HINCKLEY      State OH      Zip Code 44233-9699	Amount of Each Receipt this Period _____ 38.00		
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CREDIT ADMIN III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 308.71		
		P/R Deduction (\$18.38 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>103.91</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. ERIC D BABBERT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6743 BALLANTRAE PLACE		<b>Transaction ID: PR5406681314</b>
City State Zip Code DUBLIN OH 43016-6021	Amount of Each Receipt this Period _____ 24.93	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$11.08 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT RETAIL LEADER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 231.28	

Full Name (Last, First, Middle Initial) <b>B. THOMAS M SPILMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5610 23RD AVE NE		<b>Transaction ID: PR5406791314</b>
City State Zip Code TACOMA WA 98422-1555	Amount of Each Receipt this Period _____ 36.92	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$18.46 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 350.74	

Full Name (Last, First, Middle Initial) <b>C. FORREST F STANLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10875 SPERRY RD		<b>Transaction ID: PR5406961314</b>
City State Zip Code WILLOUGHBY OH 44094-5176	Amount of Each Receipt this Period _____ 23.22	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$10.32 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 214.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>85.07</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. TRENTON A TIPTON-FLETCHER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 16315 FERNWAY RD		<b>Transaction ID: PR5407191314</b>	
City State Zip Code SHAKER HTS OH 44120-3365	Amount of Each Receipt this Period _____ 25.25		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation HEAD OF SECURITIZED BONDS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 223.26		P/R Deduction (\$11.96 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. KAREN R HAEFLING</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 15510 RUSSELL ROAD		<b>Transaction ID: PR5407441314</b>	
City State Zip Code CHAGRIN FALLS OH 44022-2670	Amount of Each Receipt this Period _____ 10.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF MARKETING OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 601.94		P/R Deduction (\$5.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. MARCIA C HAGLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 300 EAST KREPPS ROAD		<b>Transaction ID: PR5407531314</b>	
City State Zip Code XENIA OH 45385-9736	Amount of Each Receipt this Period _____ 21.68		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR III, MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 200.95		P/R Deduction (\$10.84 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>56.93</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b> Full Name (Last, First, Middle Initial) EDWARD L MCGARRY Mailing Address 2649 WESTFIELD AVENUE City DAYTON State OH Zip Code 45420-2377 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR5407571314 Amount of Each Receipt this Period 21.22 P/R Deduction (\$10.61 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER I - CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.59		

<b>B.</b> Full Name (Last, First, Middle Initial) KEITH J KORMOS Mailing Address 21700 MEADOWS EDGE LANE City STRONGSVILLE State OH Zip Code 44149-2862 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR5407681314 Amount of Each Receipt this Period 21.00 P/R Deduction (\$7.50 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MULTI-MARKET SALES MGR, KPB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 254.01		

<b>C.</b> Full Name (Last, First, Middle Initial) CAROL L PETER Mailing Address 11601 BASS LAKE RD City CHARDON State OH Zip Code 44024-8401 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR5407931314 Amount of Each Receipt this Period 30.29 P/R Deduction (\$18.17 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, MARKETING Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 343.23		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>72.51</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. BRUCE D MURPHY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 18935 BALLYMORE CIRCLE		<b>Transaction ID: PR5408021314</b>
City State Zip Code STRONGSVILLE OH 44149-0922	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation COMMUNITY DEVELOPMENT BKG EXEC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 475.00	P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. ANN K LOUIS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1833 HOLDENS ARBOR RUN		<b>Transaction ID: PR5408521314</b>
City State Zip Code WESTLAKE OH 44145-2039	Amount of Each Receipt this Period _____ 31.06	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, INFORMATION SERVICES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 293.39	P/R Deduction (\$15.53 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. THOMAS S ALLEN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2900 GLENGARY ROAD		<b>Transaction ID: PR5408641314</b>
City State Zip Code SHAKER HEIGHTS OH 44120-1733	Amount of Each Receipt this Period _____ 29.43	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, WEALTH MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 280.43	P/R Deduction (\$12.12 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>110.49</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. CLINTON L WEDDELL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1116 FOREST ROAD		<b>Transaction ID: PR5408881314</b>
City State Zip Code LAKEWOOD OH 44107-1043	Amount of Each Receipt this Period _____ 20.84	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SECTOR CREDIT EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 241.70	P/R Deduction (\$14.75 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. HENRY L MEYER III</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3385 ROUNDWOOD ROAD		<b>Transaction ID: PR5408891314</b>
City State Zip Code CHAGRIN FALLS OH 44022-6637	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYCORP	Occupation CHAIRMAN OF THE BOARD & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 475.00	P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. JENNIFER LYNN COY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8970 WHITE EAGLE EAST		<b>Transaction ID: PR5409161314</b>
City State Zip Code SYLVANIA OH 43560-9598	Amount of Each Receipt this Period _____ 25.11	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 217.38	P/R Deduction (\$13.29 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>95.95</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. SCOTT A FOYE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 34459 ST. MARON BLVD.		<b>Transaction ID: PR5409651314</b>
City AVON      State OH      Zip Code 44011-3221	Amount of Each Receipt this Period _____ 28.04	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$14.02 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SENIOR CREDIT OFFICER VI	Aggregate Year-to-Date ▼ _____ 254.70	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JAMES A HOFFMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2660 WESTCHESTER ROAD		<b>Transaction ID: PR5409761314</b>
City OTTAWA HILLS      State OH      Zip Code 43615-2242	Amount of Each Receipt this Period _____ 47.42	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$22.46 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT II	Aggregate Year-to-Date ▼ _____ 398.09	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. JANICE L CULVER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 17311 RED FOX TRAIL		<b>Transaction ID: PR5410051314</b>
City CHAGRIN FALLS      State OH      Zip Code 44023-2110	Amount of Each Receipt this Period _____ 25.20	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$12.60 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TRUST RESOURCE CTR MGR	Aggregate Year-to-Date ▼ _____ 247.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>100.66</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
LYNN S HAMILTON

Mailing Address 288 ORION NE

City NORTH CANTON State OH Zip Code 44720-8602

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PORTFOLIO MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.19

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5410411314

Amount of Each Receipt this Period  
25.11

P/R Deduction (\$10.34 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
CAREY L SPENCER

Mailing Address 5599 - B N. GREENWAY CT

City HIGHLAND HEIGHTS State OH Zip Code 44143

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR FINANCIAL ADVISOR, BANK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.38

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5410641314

Amount of Each Receipt this Period  
26.48

P/R Deduction (\$14.02 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL P BARNUM

Mailing Address 363 WALMAR DRIVE

City BAY VILLAGE State OH Zip Code 44140-1459

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation GROUP HEAD I, OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 411.92

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5410681314

Amount of Each Receipt this Period  
41.19

P/R Deduction (\$21.81 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	92.78
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. JEROME M BIELEK</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8207 MANOR GATE WAY		<b>Transaction ID: PR5410901314</b>
City MENTOR	State OH	Zip Code 44060-5969
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 18.69
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER	P/R Deduction (\$6.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.14	

Full Name (Last, First, Middle Initial) <b>B. ROBERT G KULA</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6627 BENEDICT DRIVE		<b>Transaction ID: PR5411001314</b>
City MIDDLEBURG HEIGHTS	State OH	Zip Code 44130-7924
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR. QUANTITATIVE RISK ANALYTI	P/R Deduction (\$12.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

Full Name (Last, First, Middle Initial) <b>C. ROSALYN A CIULLA</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 17601 HARLAND AVE		<b>Transaction ID: PR5411501314</b>
City CLEVELAND	State OH	Zip Code 44119-1929
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.68
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation TEAM LEADER IV, CDL	P/R Deduction (\$12.84 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>69.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. STEPHEN J MATESEVAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411511314
Mailing Address 499 SAWGRASS DR.		Amount of Each Receipt this Period 21.74
City FAIRLAWN      State OH      Zip Code 44333-9224		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PORTFOLIO MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.14	P/R Deduction (\$10.87 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM J BLAKE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411981314
Mailing Address 3404 ORCHESTRA STREET		Amount of Each Receipt this Period 36.58
City CUYAHOGA FALLS      State OH      Zip Code 44223-3556		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DEPUTY GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.73	P/R Deduction (\$18.29 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. DONALD P HENDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412341314
Mailing Address 17441 LAKESEDGE TRAIL		Amount of Each Receipt this Period 30.69
City CHAGRIN FALLS      State OH      Zip Code 44023-2118		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation AVIATION DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.66	P/R Deduction (\$14.54 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	89.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. AMY K CARLSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412911314	
Mailing Address 2884 WOODBURY RD		Amount of Each Receipt this Period 76.93	
City State Zip Code SHAKER HEIGHTS OH 44120-2426	FEC ID number of contributing federal political committee. C		P/R Deduction (\$48.08 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GRP HD, DCM ORIG & STRUCTURING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 443.31		

Full Name (Last, First, Middle Initial) <b>B. RICHARD E MCERLEANJR</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412931314	
Mailing Address 7511 LASCALA DRIVE		Amount of Each Receipt this Period 31.35	
City State Zip Code HUDSON OH 44236-1845	FEC ID number of contributing federal political committee. C		P/R Deduction (\$14.85 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICERIII-CB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.35		

Full Name (Last, First, Middle Initial) <b>C. KAREN BLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414381314	
Mailing Address 1800 HALLS CARRIAGE PATH		Amount of Each Receipt this Period 32.63	
City State Zip Code WESTLAKE OH 44145-2031	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.13 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR HR RELATIONSHIP MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 367.90		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	140.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. WILLIAM C MURSHEL</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414421314	
Mailing Address 5240 MAPLE SPRINGS DRIVE		Amount of Each Receipt this Period 21.40	
City State Zip Code CHAGRIN FALLS OH 44022-4139	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP MGR-FIELD PUBLIC AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.30		
		P/R Deduction (\$10.70 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. MARYANN HOGAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414431314	
Mailing Address 22827 LAKE ROAD UNIT # 6		Amount of Each Receipt this Period 23.12	
City State Zip Code ROCKY RIVER OH 44116-1065	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SENIOR CREDIT OFFICER V		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.51		
		P/R Deduction (\$7.71 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM BARNES</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414871314	
Mailing Address 2020 BERKSHIRE ROAD		Amount of Each Receipt this Period 91.35	
City State Zip Code GATES MILLS OH 44040-9764	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, PORTFOLIO MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 783.67		
		P/R Deduction (\$43.27 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	135.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. KARL G GRUNAWALT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14730 RINDLEWOOD LANE		<b>Transaction ID: PR5415111314</b>	
City State Zip Code NOVELTY OH 44072-9590	Amount of Each Receipt this Period _____ 42.75		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CORP BANK CREDIT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 384.75		
		P/R Deduction (\$20.25 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. JOHN M RYAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8410 BAINBROOK DRIVE		<b>Transaction ID: PR5415211314</b>	
City State Zip Code CHAGRIN FALLS OH 44023-4802	Amount of Each Receipt this Period _____ 30.67		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 274.38		
		P/R Deduction (\$13.63 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. LISA M SEBALLOS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13401 TRENTON TRAIL		<b>Transaction ID: PR5415481314</b>	
City State Zip Code MIDDLEBURG HEIGHTS OH 44130-6824	Amount of Each Receipt this Period _____ 23.02		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation LOB FINANCE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 206.89		
		P/R Deduction (\$10.90 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>96.44</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. DONALD F STAWOWY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5415531314	
Mailing Address 20553 BRADGATE LANE		Amount of Each Receipt this Period 29.12	
City STRONGSVILLE State OH Zip Code 44149-6779	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR II, FINANCE	Aggregate Year-to-Date ▼ 264.75		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$13.20 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>B. WAYNE K GUESSFORD JR</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5416181314	
Mailing Address 5534 WHISPER LANE		Amount of Each Receipt this Period 24.11	
City CINCINNATI State OH Zip Code 45230-5136	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR BANKER, INV/CORP BK IND	Aggregate Year-to-Date ▼ 214.46		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$11.42 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>C. RONALD J DUGAS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5416281314	
Mailing Address 5707 WESTMINSTER DRIVE		Amount of Each Receipt this Period 41.54	
City SOLON State OH Zip Code 44139-1979	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation CHIEF COMPLIANCE OFFICER	Aggregate Year-to-Date ▼ 394.63		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$20.77 Bi-Weekly)		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	94.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. WILLIAM R HALEY</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 7215 OAK HILL CIRCLE		<b>Transaction ID: PR5416461314</b>
City RENSSELAER	State NY	Zip Code 12144-8818
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 32.73
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL CREDIT EXEC - CB	P/R Deduction (\$9.35 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 391.67	

Full Name (Last, First, Middle Initial) <b>B. JULIE NELSON</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1247 W. COVE PARK CIRCLE		<b>Transaction ID: PR5418271314</b>
City MURRAY	State UT	Zip Code 84123-7955
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 23.02
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR IV, BANK	P/R Deduction (\$10.90 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.19	

Full Name (Last, First, Middle Initial) <b>C. JOEL S HICKMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 243 W THORBERRY DR		<b>Transaction ID: PR5418541314</b>
City BOISE	State ID	Zip Code 83702-1660
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>85.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
SAMUEL D BOVARD

Mailing Address 2502 KEMPTON ST. SE

City OLYMPIA State WA Zip Code 98501-7466

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation AREA RETAIL LEADER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5418761314

Amount of Each Receipt this Period  
24.00

P/R Deduction (\$12.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
LARRY T BURKE

Mailing Address 10014 DAY ROAD NE

City BAINBRIDGE ISLAND State WA Zip Code 98110-3306

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICERIII-CB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.71

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5419071314

Amount of Each Receipt this Period  
39.30

P/R Deduction (\$18.62 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
THOMAS A ELMER

Mailing Address 11357 S.E. HIGHLAND LOOP

City CLACKAMAS State OR Zip Code 97015-7234

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER II -CB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.77

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5419181314

Amount of Each Receipt this Period  
23.44

P/R Deduction (\$8.79 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>86.74</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. THOMAS W HOSEA</b>		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5505 64TH AVE WEST		Transaction ID: PR5419291314	
City TACOMA	State WA	Amount of Each Receipt this Period 22.48	
Zip Code 98467-2915			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL GOVT RELATIONS MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.56	P/R Deduction (\$11.24 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. GARY P KOCH</b>		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5981 SE ARCADIA RD.		Transaction ID: PR5419641314	
City SHELTON	State WA	Amount of Each Receipt this Period 40.00	
Zip Code 98584-8330			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation BUS BNKNG SALES LEADER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. THOMAS E HELFRICH</b>		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2751 SHERBROOKE ROAD		Transaction ID: PR5420081314	
City SHAKER HEIGHTS	State OH	Amount of Each Receipt this Period 10.00	
Zip Code 44122-1829			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYCORP	Occupation EVP & CHIEF HR OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.24	P/R Deduction (\$5.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	72.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MICHELE A SEYRANIAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 24545 SHAKER BLVD.		<b>Transaction ID: PR5420881314</b>		
City State Zip Code BEACHWOOD OH 44122-2349	Amount of Each Receipt this Period _____ 37.66		P/R Deduction (\$18.83 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation GROUP EXECUTIVE - E/C Aggregate Year-to-Date ▼ _____ 357.77			

Full Name (Last, First, Middle Initial) <b>B. WESLEY W LAWRENCE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 17404 BERGIS FARM DR.		<b>Transaction ID: PR5421301314</b>		
City State Zip Code LAKE OSWEGO OR 97034-6134	Amount of Each Receipt this Period _____ 25.00		P/R Deduction (\$12.50 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REGIONAL PRESIDENT II - PNW Aggregate Year-to-Date ▼ _____ 237.50			

Full Name (Last, First, Middle Initial) <b>C. TERRENCE J STONE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 3862 SILSBY COURT		<b>Transaction ID: PR5421741314</b>		
City State Zip Code AVON OH 44011-3476	Amount of Each Receipt this Period _____ 22.00		P/R Deduction (\$11.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. <b>C</b> _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER, CM&C Aggregate Year-to-Date ▼ _____ 209.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>84.66</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
ROBERT F POLLIS JR

Mailing Address 33 MAIN ST.

City BOWDOINHAM State ME Zip Code 04008-4420

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation ABL PORTFOLIO MANAGER 3

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.13

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5422511314

Amount of Each Receipt this Period  
23.02

P/R Deduction (\$10.90 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
STEVEN J BARKER

Mailing Address 7534 159TH PL. N.E. #D121

City REDMOND State WA Zip Code 98052-4312

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR REL MGR, CMMML BKG

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.89

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5423411314

Amount of Each Receipt this Period  
21.90

P/R Deduction (\$10.37 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
TERI R KOCH

Mailing Address 21527 96TH ST E

City BUCKLEY State WA Zip Code 98321-8499

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT OP LEADER, RETAIL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.82

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5423431314

Amount of Each Receipt this Period  
21.56

P/R Deduction (\$10.78 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>66.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b> Full Name (Last, First, Middle Initial) BRUCE E TRENT Mailing Address 35 MALLARD DR. City REXFORD State NY Zip Code 12148-1515 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID: PR5423531314</b> Amount of Each Receipt this Period 28.86
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MANAGER V ETO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 274.97		P/R Deduction (\$13.58 Bi-Weekly)

<b>B.</b> Full Name (Last, First, Middle Initial) SCOTT A MURRAY Mailing Address 428 TROY SCHENECTADY RD. City LATHAM State NY Zip Code 12110-3234 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID: PR5423701314</b> Amount of Each Receipt this Period 30.00
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MANAGER III ETO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		P/R Deduction (\$15.00 Bi-Weekly)

<b>C.</b> Full Name (Last, First, Middle Initial) RAYMOND A NOWAK Mailing Address 657 BRIDGESIDE DR. City AVON LAKE State OH Zip Code 44012-2771 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID: PR5425421314</b> Amount of Each Receipt this Period 22.30
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation ARG ADMINISTRATIVE EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.42		P/R Deduction (\$12.64 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>81.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. HELEN W FRANCE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 124 HASKELL DRIVE		<b>Transaction ID: PR5425431314</b>
City State Zip Code BRATENAHL OH 44108-1157	Amount of Each Receipt this Period _____ 27.40	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$12.98 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, INV/CORP BK IND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 246.60	

Full Name (Last, First, Middle Initial) <b>B. THOMAS TULODZIESKI</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2865 CARRINGTON ST. N.W.		<b>Transaction ID: PR5425471314</b>
City State Zip Code NORTH CANTON OH 44720-8176	Amount of Each Receipt this Period _____ 39.00	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$19.50 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 370.50	

Full Name (Last, First, Middle Initial) <b>C. CATHY L ROWLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 434 FOXBOROUGH DR		<b>Transaction ID: PR5425661314</b>
City State Zip Code BRUNSWICK OH 44212-4340	Amount of Each Receipt this Period _____ 36.54	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$18.27 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR HR RELATIONSHIP MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 347.13	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>102.94</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MELISSA RODRIGUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5431101314
Mailing Address 82 SCOTT ROAD		Amount of Each Receipt this Period 25.00
City SOUTH PORTLAND	State ME	Zip Code 04106-3417
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$12.50 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR III, BANK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

Full Name (Last, First, Middle Initial) <b>B. ROY R D'SA</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5463701314
Mailing Address 12531 COOPERS RUN		Amount of Each Receipt this Period 25.00
City STRONGSVILLE	State OH	Zip Code 44149-9242
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$12.50 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CORPORATE INITIATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

Full Name (Last, First, Middle Initial) <b>C. JAN G PYNAPPEL</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5479661314
Mailing Address 6360 TRAILRIDGE CT		Amount of Each Receipt this Period 30.00
City LOVELAND	State OH	Zip Code 45140-8156
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, BUSINESS MGT-KHI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MICHAEL J MONROE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6973 GATES RD		<b>Transaction ID: PR5479821314</b>	
City State Zip Code GATES MILLS OH 44040-9666	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00	P/R Deduction (\$50.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. SCOTT P SHOPE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7423 LEE REA ROAD		<b>Transaction ID: PR5483741314</b>	
City State Zip Code CHARLOTTE NC 28226-7598	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR-KEY HOME IMPROVEMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 285.00	P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. REGINALD C FULLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 22 CHESTERFIELD DRIVE		<b>Transaction ID: PR5483921314</b>	
City State Zip Code VOORHEESVILLE NY 12186-9200	Amount of Each Receipt this Period _____ 34.62		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MARKET PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 328.89	P/R Deduction (\$17.31 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>164.62</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. GARY A HERRINGTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5489351314
Mailing Address 343 W BRAMBLE CIR		Amount of Each Receipt this Period 31.24
City <b>COPLEY</b>	State OH	P/R Deduction (\$15.62 Bi-Weekly)
Zip Code 44321-2780	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation LEAD BUSINESS SYSTEMS ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.78	

Full Name (Last, First, Middle Initial) <b>B. JOSEPH A FRANK</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5532261314
Mailing Address 4389 ARDMORE ROAD		Amount of Each Receipt this Period 23.08
City <b>SOUTH EUCLID</b>	State OH	P/R Deduction (\$11.54 Bi-Weekly)
Zip Code 44121-3620	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR I, FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.26	

Full Name (Last, First, Middle Initial) <b>C. KEVIN P VON BUSCH</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5573831314
Mailing Address 22 ASTOR PLACE		Amount of Each Receipt this Period 28.25
City <b>ROCKY RIVER</b>	State OH	P/R Deduction (\$16.95 Bi-Weekly)
Zip Code 44116-1545	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MGR, NAT'L SALES RETAIL, KRL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.47	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	82.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. TERRY D KOUBELE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 33105 10TH PL SW		<b>Transaction ID: PR5615061314</b>
City State Zip Code FEDERAL WAY WA 98023-5204	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIV MGR IV, OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 237.50	P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. DAVID M SANDERS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2774 GIFFORDS CHURCH ROAD		<b>Transaction ID: PR5633181314</b>
City State Zip Code DUANESBURG NY 12056-3901	Amount of Each Receipt this Period _____ 23.08	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation FIELD SALES REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 219.26	P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. THOMAS X GEISEL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 25 NEWELL COURT		<b>Transaction ID: PR5634121314</b>
City State Zip Code MENANDS NY 12204-1226	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 237.50	P/R Deduction (\$12.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>73.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. THOMAS R HAWN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1814 EAST 40TH STREET SUITE 6E		<b>Transaction ID: PR5645091314</b>
City State Zip Code CLEVELAND OH 44103-3527	Amount of Each Receipt this Period _____ 48.66	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$24.33 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MARKET SPACE SEGMENT MGR II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 462.27	

Full Name (Last, First, Middle Initial) <b>B. MARCIA C GREEN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 228 BELLVUE ROAD		<b>Transaction ID: PR5653901314</b>
City State Zip Code GOLDEN CO 80401-9482	Amount of Each Receipt this Period _____ 23.73	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$11.24 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REL MGR SR, CRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 203.56	

Full Name (Last, First, Middle Initial) <b>C. EDWARD J BURKE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 429 W. 57TH TERRACE		<b>Transaction ID: PR5662191314</b>
City State Zip Code KANSAS CITY MO 64113-1271	Amount of Each Receipt this Period _____ 48.46	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$20.19 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation HEAD OF REC AND CORP BKG SERV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 583.86	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>120.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. JONATHAN O CRANE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7658 WOODSPRING LANE		<b>Transaction ID: PR5669201314</b>
City State Zip Code HUDSON OH 44236-1857	Amount of Each Receipt this Period _____ 34.62	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$17.31 Bi-Weekly)
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation SR BANKER, INV/CORP BK IND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 328.89	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM R KOEHLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2923 BRIGHTON RD.		<b>Transaction ID: PR5681661314</b>
City State Zip Code SHAKER HEIGHTS OH 44120-1720	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 475.00	

Full Name (Last, First, Middle Initial) <b>C. LYNN F MOHL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4528 SECRETARIAT COURT		<b>Transaction ID: PR5684651314</b>
City State Zip Code AVON OH 44011-3648	Amount of Each Receipt this Period _____ 28.80	
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$14.40 Bi-Weekly)
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation GRP MGR INVESTMENT OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 273.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>113.42</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL O'CONNOR

Mailing Address 45 WILDING CHASE

City State Zip Code  
CHAGRIN FALLS OH 44022-2500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANC CAPITAL MARKETS SLS REP SR, INST FL-CM  
INC.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5690141314

Amount of Each Receipt this Period  
25.00

P/R Deduction (\$25.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
DAVID A RENTA

Mailing Address 1712 WRIGHT AVE

City State Zip Code  
ROCKY RIVER OH 44116-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIAT- SECTOR MGR, FX SALES  
ION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5693191314

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$20.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
D GREGORY WILLIAMS

Mailing Address 2617 - 280TH PLACE NE

City State Zip Code  
REDMOND WA 98053-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIAT- SR SALES REP, SBA  
ION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 214.51

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5702511314

Amount of Each Receipt this Period  
22.58

P/R Deduction (\$11.29 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>87.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b> Full Name (Last, First, Middle Initial) PAUL N HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5763291314
Mailing Address 2889 NORTH PARK BLVD		Amount of Each Receipt this Period 20.00
City State Zip Code CLEVELAND HEIGHTS OH 44118-4030	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation KEYCORP GENERAL COUNSEL & SECRETARY	Aggregate Year-to-Date 881.18	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>B.</b> Full Name (Last, First, Middle Initial) BRUCE A WHITING		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5769201314
Mailing Address 2025 NE 134TH PLACE		Amount of Each Receipt this Period 29.84
City State Zip Code PORTLAND OR 97230-3141	FEC ID number of contributing federal political committee. C	P/R Deduction (\$14.92 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION COMM DEV COMPLIANCE TEAM LDR	Aggregate Year-to-Date 283.48	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>C.</b> Full Name (Last, First, Middle Initial) ADAM D WARNER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5779921314
Mailing Address 37W360 MISSION HILLS DRIVE		Amount of Each Receipt this Period 30.00
City State Zip Code SAINT CHARLES IL 60175-6209	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation KEY EQUIPMENT FINANCE INC. KEF COMM LEASING SVCS DIR	Aggregate Year-to-Date 285.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	79.84
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 64
	<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	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. WILLIAM F RANDOLPH</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5791261314	
Mailing Address 40 ASTON COURT		Amount of Each Receipt this Period 72.92	
City <b>POWELL</b>	State <b>OH</b>	Zip Code <b>43065-9122</b>	P/R Deduction (\$36.46 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 692.74	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation NATIVE AMERICAN NAT'L EXEC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. BRYON A PIKE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5795631314	
Mailing Address 9199 IDLEWOOD DRIVE		Amount of Each Receipt this Period 23.38	
City <b>MENTOR</b>	State <b>OH</b>	Zip Code <b>44060-6451</b>	P/R Deduction (\$11.69 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 222.11	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, INV/CORP BK IND		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MARK L WITT</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5800181314	
Mailing Address 18756 SHARON DRIVE		Amount of Each Receipt this Period 25.31	
City <b>CHAGRIN FALLS</b>	State <b>OH</b>	Zip Code <b>44023-4980</b>	P/R Deduction (\$13.02 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 247.67	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation INFO SYSTEMS DIV MGR I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	121.61
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
JULIE JOSEFORSKY

Mailing Address 2375 SPRINGSIDE OVAL

City BRECKSVILLE State OH Zip Code 44141-3358

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation DIRECTOR, HOME EQUITY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5800271314

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
JEFFREY C HASSLER

Mailing Address 34635 PLANTATION PLACE

City NORTH RIDGEVILLE State OH Zip Code 44039-4497

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation MANAGER III ETO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.28

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5800971314

Amount of Each Receipt this Period  
22.24

P/R Deduction (\$11.12 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
CLARK JONATHAN WULF

Mailing Address 1949 BORDEAUX WAY

City WESTLAKE State OH Zip Code 44145-3066

FEC ID number of contributing federal political committee. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation CORPORATE TAX DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5801281314

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$20.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	112.24
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. CHARLES STEPHEN HYLE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2994 COURTLAND BLVD.		<b>Transaction ID: PR5821081314</b>
City State Zip Code SHAKER HEIGHTS OH 44122-2804	Amount of Each Receipt this Period _____ 20.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation EVP, CHIEF RISK OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 992.20	P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. SCOTT JOSEPH BROWN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 12996 MARINER COURT		<b>Transaction ID: PR5823791314</b>
City State Zip Code MC CORDSVILLE IN 46055-9657	Amount of Each Receipt this Period _____ 41.54	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 394.63	P/R Deduction (\$20.77 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. STEVE YATES</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7110 KINSMAN ROAD		<b>Transaction ID: PR5831771314</b>
City State Zip Code NOVELTY OH 44072-9512	Amount of Each Receipt this Period _____ 200.96	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD INFORMATION TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1785.54	P/R Deduction (\$95.19 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>262.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MICHAEL A MILLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8817 NE 132ND STREET		<b>Transaction ID: PR5852061314</b>
City State Zip Code KIRKLAND WA 98034-2639	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MGR, NATIONAL SALES LDR - KPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 380.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. ROBERT MCCAMBRIDGE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5700 64TH AVE., NE		<b>Transaction ID: PR5852261314</b>
City State Zip Code SEATTLE WA 98105-2042	Amount of Each Receipt this Period _____ 57.70	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 548.15	P/R Deduction (\$28.85 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. STEPHEN MICHAEL JORGENSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 113 ST . NAZAIRE COURT		<b>Transaction ID: PR5857511314</b>
City State Zip Code MARTINEZ CA 94553-7210	Amount of Each Receipt this Period _____ 25.38	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation RELATIONSHIP MANAGER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 241.11	P/R Deduction (\$12.69 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>123.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. ALAN BUFFINGTON</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2969 EATON ROAD		<b>Transaction ID: PR5857521314</b>
City <b>SHAKER HEIGHTS</b>	State <b>OH</b>	Zip Code <b>44122-2515</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>80.00</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>DIRECTOR, APPLICATIONS DEVLPMT</b>	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>760.00</b>	

Full Name (Last, First, Middle Initial) <b>B. JEFFERY JEROME WEAVER</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 19101 SOUTH PARK BLVD		<b>Transaction ID: PR5864261314</b>
City <b>SHAKER HEIGHTS</b>	State <b>OH</b>	Zip Code <b>44122-1854</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>76.92</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>GROUP HEAD, CREDIT PORTFOLIO M</b>	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>730.74</b>	

Full Name (Last, First, Middle Initial) <b>C. DEAN ILJASIC</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1278 W. 9TH STREET # 1216		<b>Transaction ID: PR5870521314</b>
City <b>CLEVELAND</b>	State <b>OH</b>	Zip Code <b>44113-5504</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>78.84</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>DIRECTOR, MARKETING</b>	P/R Deduction (\$39.42 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>748.98</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>235.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
JAN WESLEY HANSEN

Mailing Address 22550 CALVERTON RD

City State Zip Code  
SHAKER HEIGHTS OH 44122-2030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANC CAPITAL MARKETS TRADER SR, INST FL  
INC.

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 273.98

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5875781314

Amount of Each Receipt this Period  
28.84

P/R Deduction (\$14.42 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL HENRY DULAN

Mailing Address 373 ANGIER COURT NE

City State Zip Code  
ATLANTA GA 30312-1068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIAT- BUS BKG SEGMENT HEAD COMM BK  
ION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1004.72

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5887481314

Amount of Each Receipt this Period  
105.76

P/R Deduction (\$52.88 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
JASON BRENT THOMAS

Mailing Address 3450 STONEVISTA LANE

City State Zip Code  
COLUMBUS OH 43221-4941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIAT- DISTRICT CREDIT OFFICERIII-CB  
ION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR5888801314

Amount of Each Receipt this Period  
30.00

P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>164.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. CHARLES THORPE MANUEL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 64 WEST STREET		<b>Transaction ID: PR5890191314</b>
City State Zip Code BEVERLY MA 01915-2228	Amount of Each Receipt this Period _____ 48.08	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, INV/CORP BK IND	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 456.76	P/R Deduction (\$24.04 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. DENNIS DARELL EDWARDS</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 20045 KILLIANS GROVE		<b>Transaction ID: PR5891891314</b>
City State Zip Code STRONGSVILLE OH 44149-0935	Amount of Each Receipt this Period _____ 25.38	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, GLOBAL TREASURY MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 241.11	P/R Deduction (\$12.69 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. EDWARD B. REILLY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1031 PAXON DR.		<b>Transaction ID: PR5894701314</b>
City State Zip Code BELLBROOK OH 45305-8952	Amount of Each Receipt this Period _____ 51.92	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 493.24	P/R Deduction (\$25.96 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>125.38</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 56 / 64	
	(check only one)			
<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

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
CHARLES W RILEY

Mailing Address 5813 BUCKPASSER COVE

City State Zip Code  
AUSTIN TX 78746-1450

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AUSTIN CAPITAL MANAGEMENT SR MANAGING DIRECTOR CIO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  
M M / D D / Y Y Y Y

**Transaction ID: PR5903691314**

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	5344.91

**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"/> 24	<input type="checkbox"/> 25	<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

Full Name (Last, First, Middle Initial) <b>A. LaTourette for Congress</b>		<b>Transaction ID: 4147574</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2007
Mailing Address Scott E. Coleman, Treasurer 320 Kenarden Drive		Amount of Each Disbursement this Period 1000.00
City Highland Heights State OH Zip Code 44143		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Steven LaTourette		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Charlie Wilson for U.S. Congress</b>		<b>Transaction ID: 4147579</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2007
Mailing Address 38 Ivy Street, SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Charles Wilson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Sherrod Brown</b>		<b>Transaction ID: 4147577</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2007
Mailing Address Eileen Gallagher, Treasurer 426 C Street, NE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Sherrod Brown		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2012 OH Primary	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**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)

PAGE 58 / 64

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

Full Name (Last, First, Middle Initial) <b>A. ORRINPAC</b>		Transaction ID: 4149016																					
Mailing Address P. O. Box 1480		Date of Disbursement																					
City Washington State DC Zip Code 20013-1480		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	3		2	0	0	7														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>011</td> </tr> </table>		011																			
011																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00																			
2500.00																							
State: District:																							

Full Name (Last, First, Middle Initial) <b>B. Chris Dodd for President</b>		Transaction ID: 4160751																					
Mailing Address Genie Gluzberg, Treasurer P. O. Box 51882		Date of Disbursement																					
City Washington State DC Zip Code 20091		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	0		2	0	0	7														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name Christopher J. Dodd		<table border="1"> <tr> <td>011</td> </tr> </table>		011																			
011																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>2000.00</td> </tr> </table>		2000.00																			
2000.00																							
State: District:																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<table border="1"><tr><td>4500.00</td></tr></table>	4500.00
4500.00			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td>7500.00</td></tr></table>	7500.00
7500.00			



**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. Friends of Jay Goyal</b>		<b>Transaction ID:</b> 4139638 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 06 / 2007	
Mailing Address Bridget McDaniel, Treasurer 810 Piper Road		Amount of Each Disbursement this Period 250.00	
City Mansfield	State OH		011 Category/ Type
Purpose of Disbursement Jay Goyal, STATE HOUSE 73rd OH			
Candidate Name OH Rep. Jay Goyal			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 73		Jay Goyal, STATE HOUSE 73-rd OH	

Full Name (Last, First, Middle Initial) <b>B. Committee for Joyce Beatty State Representative</b>		<b>Transaction ID:</b> 4146120 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 10 / 2007	
Mailing Address Glenna Watson, Treasurer 233 South High Street		Amount of Each Disbursement this Period 500.00	
City Columbus	State OH		011 Category/ Type
Purpose of Disbursement Joyce Beatty, STATE HOUSE 27th OH			
Candidate Name Joyce Beatty			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 27		Joyce Beatty, STATE HOUSE 27th OH	

Full Name (Last, First, Middle Initial) <b>C. Maine BankPAC</b>		<b>Transaction ID:</b> 4147571 <b>Date of Disbursement</b> MM / DD / YYYY 09 / 13 / 2007	
Mailing Address Joseph J. Pietroski, Jr., Treasure P.O. Box 735		Amount of Each Disbursement this Period 3500.00	
City Augusta	State ME		011 Category/ Type
Purpose of Disbursement			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. Citizens for Debbie Sutherland</b>		Transaction ID: 4149023 Date of Disbursement 09 / 13 / 2007
Mailing Address Elaine O'Brien, Treasurer 27031 Russell Rd.		Amount of Each Disbursement this Period 300.00
City Bay Village State OH Zip Code 44140	011 Category/ Type  Debbie Sutherland, LOCAL OH	
Purpose of Disbursement Debbie Sutherland, LOCAL OH		
Candidate Name Debbie Sutherland		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Citizens for Carey</b>		Transaction ID: 4149024 Date of Disbursement 09 / 13 / 2007
Mailing Address Karen Hammond, Treasurer 401 S. Arkansas Avenue		Amount of Each Disbursement this Period 1000.00
City Wellston State OH Zip Code 45692	011 Category/ Type  John Carey, STATE SENATE OH	
Purpose of Disbursement John Carey, STATE SENATE OH		
Candidate Name John Carey		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Stivers</b>		Transaction ID: 4147572 Date of Disbursement 09 / 13 / 2007
Mailing Address Wade Steen, Treasurer 2500 Sherwin Road		Amount of Each Disbursement this Period 1500.00
City Columbus State OH Zip Code 43221	011 Category/ Type  Steven Stivers, STATE SEN- ATE OH	
Purpose of Disbursement Steven Stivers, STATE SENATE OH		
Candidate Name Steven Stivers		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. Book Election Committee</b>		Transaction ID: 4147564 Date of Disbursement 09 / 13 / 2007	
Mailing Address Joyce A. Coleman, Treasurer 32 State Route 239		Amount of Each Disbursement this Period 300.00	
City Portsmouth	State OH	Zip Code 45663	011 Category/ Type
Purpose of Disbursement Todd Book, STATE HOUSE 89th OH		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Todd Book			Todd Book, STATE HOUSE 89- th OH
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH	District: 89	

Full Name (Last, First, Middle Initial) <b>B. Ohio House Democratic Caucus Fund</b>		Transaction ID: 4160757 Date of Disbursement 09 / 20 / 2007	
Mailing Address Otto Beatty Jr., Treasurer 271 E. State Street		Amount of Each Disbursement this Period 500.00	
City Columbus	State OH	Zip Code 43215	011 Category/ Type
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Robert Spada, STATE SENATE OH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Friends of Senator Spada</b>		Transaction ID: 4160754 Date of Disbursement 09 / 20 / 2007	
Mailing Address 5962 Royalwood Road		Amount of Each Disbursement this Period 300.00	
City North Royalton	State OH	Zip Code 44133	011 Category/ Type
Purpose of Disbursement Robert Spada, STATE SENATE OH		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Robert Spada			Robert Spada, STATE SENATE OH
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OH	District: 24	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. Committee for Jim Hughes</b>		Transaction ID: 4160759 Date of Disbursement 09 / 20 / 2007
Mailing Address Brad Sinnott, Treasurer 14 E. Gay Street		Amount of Each Disbursement this Period 250.00
City Columbus State OH Zip Code 43215	Purpose of Disbursement James Hughes, STATE HOUSE 22nd OH Candidate Name James Hughes Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 22	
		James Hughes, STATE HOUSE 22nd OH

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect David Goodman</b>		Transaction ID: 4160760 Date of Disbursement 09 / 20 / 2007
Mailing Address Ben Kanzeg, Treasurer 7250 Talanth Place		Amount of Each Disbursement this Period 300.00
City New Albany State OH Zip Code 43054	Purpose of Disbursement David Goodman, STATE SENATE OH Candidate Name David Goodman Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 3	
		David Goodman, STATE SENA- TE OH

Full Name (Last, First, Middle Initial) <b>C. Jason Wilson for Senate</b>		Transaction ID: 4160755 Date of Disbursement 09 / 20 / 2007
Mailing Address Terry Lee, Treasurer 252 West Main Street		Amount of Each Disbursement this Period 500.00
City St. Clairsville State OH Zip Code 43950	Purpose of Disbursement Jason Wilson, STATE SENATE OH Candidate Name OH Sen. Jason Wilson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 30	
		Jason Wilson, STATE SENATE OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1050.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. Citizens for Carol-Ann Schindel</b>		<b>Transaction ID:</b> 4160762 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7
Mailing Address Curt Lau, Treasurer 8705 Cliffwood Court		Amount of Each Disbursement this Period 500.00
City Mentor State OH Zip Code 44060	Carol-Ann Schindel, STATE HOUSE 63rd OH	
Purpose of Disbursement Carol-Ann Schindel, STATE HOUSE 63rd OH		011 Category/Type
Candidate Name OH Rep. Carol-Ann Schindel		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 63		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Austria</b>		<b>Transaction ID:</b> 4161606 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 7
Mailing Address Arnold Fife, Treasurer 2537 Obetz Drive		Amount of Each Disbursement this Period 300.00
City Beavercreek State OH Zip Code 45434	Steven Austria, STATE SEN-ATE 10th OH	
Purpose of Disbursement Steven Austria, STATE SENATE 10th OH		011 Category/Type
Candidate Name Steven Austria		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 10		

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

800.00

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

12000.00