

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 06 01 2007 through 06 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 07 11 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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

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	31529.91									
(c) Total Receipts (from Line 19)	26268.18	117255.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57798.09	144435.59								
7. Total Disbursements (from Line 31)	33103.50	119741.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24694.59	24694.59								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

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	5719.12	12544.21
(i) Itemized (use Schedule A)	20549.06	104711.35
(ii) Unitemized	26268.18	117255.56
(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)	26268.18	117255.56
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))	26268.18	117255.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26268.18	117255.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	21.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	21.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	9000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	18500.00
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.....	31100.00	92220.00
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))..	33103.50	119741.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33103.50	119741.00

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)	26268.18	117255.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26268.18	117255.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	21.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.50	21.00

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 / 39
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) CINDY P CROTTY Mailing Address 2905 FAIRMOUNT BLVD City CLEVELAND HEIGHTS State OH Zip Code 44118-4021 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5398931175 Amount of Each Receipt this Period 121.14 P/R Deduction (\$40.38 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SEGMENT HEAD COMMUNITY BANK Aggregate Year-to-Date ▼ 524.94	

B. Full Name (Last, First, Middle Initial) MICHAEL W BICKERTON Mailing Address 582 LEGENDS ROW City AVON LAKE State OH Zip Code 44012-2269 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5399751175 Amount of Each Receipt this Period 54.12 P/R Deduction (\$18.04 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REGIONAL CREDIT EXECUTIVE Aggregate Year-to-Date ▼ 234.52	

C. Full Name (Last, First, Middle Initial) KEVIN P RILEY Mailing Address 329 TIMBERIDGE TRAIL City GATES MILLS State OH Zip Code 44040-9319 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5400441175 Amount of Each Receipt this Period 124.98 P/R Deduction (\$41.66 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation DIRECTOR IV, FINANCE Aggregate Year-to-Date ▼ 541.58	

SUBTOTAL of Receipts This Page (optional)	300.24
TOTAL 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 / 39
	<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)
GEORGE E EMMONS JR

Mailing Address 699 COY LANE

City State Zip Code
CHAGRIN FALLS OH 44022-2679

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION PRESIDENT - COMMUNITY BANK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 541.58

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

Transaction ID: PR5400901175

Amount of Each Receipt this Period
124.98

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

B. Full Name (Last, First, Middle Initial)
CAROL L KLIMAS

Mailing Address 3754 WINDSONG COURT

City State Zip Code
WESTLAKE OH 44145-5483

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION SEGMENT HEAD COMMUNITY BANK

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 346.08

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

Transaction ID: PR5401151175

Amount of Each Receipt this Period
57.68

P/R Deduction (\$28.84 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
SUSAN P BROCKETT

Mailing Address 28 ANNANDALE DRIVE

City State Zip Code
CHAGRIN FALLS OH 44022-4266

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION HR DIR, ORG & EMPLOY DEVELOP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

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

Transaction ID: PR5401251175

Amount of Each Receipt this Period
60.00

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

SUBTOTAL of Receipts This Page (optional)	242.66
TOTAL 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 / 39
	<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) PAUL E HENSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401511175	
Mailing Address 20515 BEACONSFIELD BLVD		Amount of Each Receipt this Period 52.96	
City State Zip Code ROCKY RIVER OH 44116-1305	FEC ID number of contributing federal political committee. C		
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 ▼ 225.58		
		P/R Deduction (\$17.65 Bi-Weekly)	

B. Full Name (Last, First, Middle Initial) JAMES PEOPLES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402971175	
Mailing Address 16827 SE 59TH STREET		Amount of Each Receipt this Period 124.98	
City State Zip Code BELLEVUE WA 98006-5555	FEC ID number of contributing federal political committee. C		
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 ▼ 541.58		
		P/R Deduction (\$41.66 Bi-Weekly)	

C. Full Name (Last, First, Middle Initial) RENEE R CSUHRAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5403481175	
Mailing Address 4839 SNOW BLOSSOM LANE		Amount of Each Receipt this Period 61.38	
City State Zip Code BRECKSVILLE OH 44141-3359	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR REC CREDIT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.09		
		P/R Deduction (\$21.92 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	239.32
TOTAL 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 / 39
	<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) A. GEORGE A VALKO		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10484 CANDLEWOOD DRIVE		Transaction ID: PR5403631175
City State Zip Code SCOTTSDALE AZ 85255-8034	Amount of Each Receipt this Period _____ 61.38	
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 ▼ _____ 259.78	P/R Deduction (\$19.73 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. SHELDON R HARTMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 31349 PINETREE ROAD		Transaction ID: PR5403771175
City State Zip Code PEPPER PIKE OH 44124-5907	Amount of Each Receipt this Period _____ 50.37	
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 ▼ _____ 203.21	P/R Deduction (\$17.37 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. PAUL L MEINERDING		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4320 BRITTANY		Transaction ID: PR5403831175
City State Zip Code OTTAWA HILLS OH 43615-2306	Amount of Each Receipt this Period _____ 54.00	
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 ▼ _____ 234.00	P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 165.75
TOTAL 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 / 39
	<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) A. JOHN V AVALONE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4559 ROCKY MOUNTAIN DRIVE		Transaction ID: PR5404131175
City MEDINA	State OH	Zip Code 44256-6704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.84
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SALES MGR, GLOBAL TREASURY MGM	P/R Deduction (\$16.15 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.50	

Full Name (Last, First, Middle Initial) B. LAWRENCE G BABIN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 28039 RED RAVEN RD		Transaction ID: PR5404671175
City PEPPER PIKE	State OH	Zip Code 44124-4551
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.29
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation CIO LARGE CAP INVESTMENTS	P/R Deduction (\$25.96 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.11	

Full Name (Last, First, Middle Initial) C. LINDA A GRANDSTAFF		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 17301 RIVERWAY DRIVE		Transaction ID: PR5405061175
City LAKEWOOD	State OH	Zip Code 44107-5315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.02
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF BANK SECRECY ACT OFFICER	P/R Deduction (\$25.34 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.05	

SUBTOTAL of Receipts This Page (optional)	198.15
TOTAL 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 / 39
	<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) A. ANTHONY V ANSELMO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 603 PARKSIDE BLVD		Transaction ID: PR5405521175	
City State Zip Code RICHMOND HTS OH 44143-2813	Amount of Each Receipt this Period _____ 53.71		
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 ▼ _____ 212.42		P/R Deduction (\$18.52 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JONATHAN M BOYLAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2149 WEST 7TH		Transaction ID: PR5406611175	
City State Zip Code CLEVELAND OH 44113-3621	Amount of Each Receipt this Period _____ 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, MRKT RSK & SEC COMPLNC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 260.00		P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. JOSEPH P CONROY JR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2530 CANYON CREEK DR		Transaction ID: PR5406651175	
City State Zip Code HINCKLEY OH 44233-9699	Amount of Each Receipt this Period _____ 35.30		
FEC ID number of contributing federal political committee. C			
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 ▼ _____ 200.09		P/R Deduction (\$17.65 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 149.01
TOTAL 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 / 39
	<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)
THOMAS M SPILMAN

Mailing Address 5610 23RD AVE NE

City TACOMA State WA Zip Code 98422-1555

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

Name of Employer KEYBANK NATIONAL ASSOCIATION
Occupation DISTRICT PRESIDENT III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.98

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

Transaction ID: PR5406791175

Amount of Each Receipt this Period
55.38

P/R Deduction (\$18.46 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
KAREN R HAEFLING

Mailing Address 15510 RUSSELL ROAD

City CHAGRIN FALLS State OH Zip Code 44022-2670

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

Name of Employer KEYBANK NATIONAL ASSOCIATION
Occupation CHIEF MARKETING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 557.71

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

Transaction ID: PR5407441175

Amount of Each Receipt this Period
139.43

P/R Deduction (\$48.08 Bi-Weekly)

C. 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. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION
Occupation DIRECTOR, MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.22

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

Transaction ID: PR5407931175

Amount of Each Receipt this Period
58.55

P/R Deduction (\$20.19 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	253.36
TOTAL 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 / 39
	<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) BRUCE D MURPHY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 18935 BALLYMORE CIRCLE		Transaction ID: PR5408021175	
City STRONGSVILLE State OH Zip Code 44149-0922	Amount of Each Receipt this Period 75.00		
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 ▼ 325.00		P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) ANN K LOUIS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1833 HOLDENS ARBOR RUN		Transaction ID: PR5408521175	
City WESTLAKE State OH Zip Code 44145-2039	Amount of Each Receipt this Period 48.32		
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 ▼ 208.83		P/R Deduction (\$17.26 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) THOMAS S ALLEN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2900 GLENGARY ROAD		Transaction ID: PR5408641175	
City SHAKER HEIGHTS State OH Zip Code 44120-1733	Amount of Each Receipt this Period 46.74		
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 ▼ 204.26		P/R Deduction (\$17.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	170.06
TOTAL 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 / 39
	<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) HENRY L MEYER III		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5408891175	
Mailing Address 3385 ROUNDWOOD ROAD		Amount of Each Receipt this Period 75.00	
City CHAGRIN FALLS State OH Zip Code 44022-6637	FEC ID number of contributing federal political committee. C		
Name of Employer KEYCORP Occupation CHAIRMAN OF THE BOARD & CEO	Aggregate Year-to-Date ▼ 325.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.00 Bi-Weekly)		

B. Full Name (Last, First, Middle Initial) JAMES A HOFFMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5409761175	
Mailing Address 2660 WESTCHESTER ROAD		Amount of Each Receipt this Period 62.40	
City OTTAWA HILLS State OH Zip Code 43615-2242	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT II	Aggregate Year-to-Date ▼ 273.30		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$19.97 Bi-Weekly)		

C. Full Name (Last, First, Middle Initial) MICHAEL P BARNUM		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410681175	
Mailing Address 363 WALMAR DRIVE		Amount of Each Receipt this Period 60.58	
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	Aggregate Year-to-Date ▼ 276.23		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$24.23 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶	197.98
TOTAL 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 / 39
	<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) A. WILLIAM J BLAKE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3404 ORCHESTRA STREET		Transaction ID: PR5411981175
City CUYAHOGA FALLS	State OH	Zip Code 44223-3556
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.46
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPUTY GENERAL COUNSEL	P/R Deduction (\$9.68 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.97	

Full Name (Last, First, Middle Initial) B. AMY K CARLSON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2884 WOODBURY RD		Transaction ID: PR5412911175
City SHAKER HEIGHTS	State OH	Zip Code 44120-2426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 66.35
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR, CORP & INV BANKING	P/R Deduction (\$11.54 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.29	

Full Name (Last, First, Middle Initial) C. KAREN BLUE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1800 HALLS CARRIAGE PATH		Transaction ID: PR5414381175
City WESTLAKE	State OH	Zip Code 44145-2031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 59.63
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR HR RELATIONSHIP MGMT	P/R Deduction (\$21.38 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.14	

SUBTOTAL of Receipts This Page (optional)	172.44
TOTAL 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 / 39
	<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)
KEVIN M BLAKELY

Mailing Address 2078 E. HIGHGATE COURT

City State Zip Code
HUDSON OH 44236-2277

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

Name of Employer Occupation
KEYCORP CHIEF RISK REVIEW OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 602.10

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

Transaction ID: PR5414501175

Amount of Each Receipt this Period
125.19

P/R Deduction (\$29.81 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
WILLIAM BARNES

Mailing Address 2020 BERKSHIRE ROAD

City State Zip Code
GATES MILLS OH 44040-9764

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION GROUP HEAD, PORTFOLIO MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 519.24

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

Transaction ID: PR5414871175

Amount of Each Receipt this Period
134.62

P/R Deduction (\$48.08 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
KARL G GRUNAWALT

Mailing Address 14730 RINDLEWOOD LANE

City State Zip Code
NOVELTY OH 44072-9590

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DIRECTOR, CORP BANK CREDIT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.25

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

Transaction ID: PR5415111175

Amount of Each Receipt this Period
63.00

P/R Deduction (\$20.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	322.81
TOTAL 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 / 39
	<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) A. RONALD J DUGAS		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 5707 WESTMINSTER DRIVE		Transaction ID: PR5416281175
City SOLON	State OH	Zip Code 44139-1979
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.31
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF COMPLIANCE OFFICER	P/R Deduction (\$20.77 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.01	

Full Name (Last, First, Middle Initial) B. WILLIAM R HALEY		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 17 RELYEA ROAD		Transaction ID: PR5416461175
City VOORHEESVILLE	State NY	Zip Code 12186-9714
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 63.14
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL CREDIT EXECUTIVE	P/R Deduction (\$23.38 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.60	

Full Name (Last, First, Middle Initial) C. LARRY T BURKE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 10014 DAY ROAD NE		Transaction ID: PR5419071175
City BAINBRIDGE ISLAND	State WA	Zip Code 98110-3306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.78
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER III	P/R Deduction (\$16.55 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.86	

SUBTOTAL of Receipts This Page (optional)	179.23
TOTAL 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 / 39
	<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) A. GARY P KOCH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5981 SE ARCADIA RD.		Transaction ID: PR5419641175
City State Zip Code SHELTON WA 98584-8330	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C _____		
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 ▼ _____ 260.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. THOMAS E HELFRICH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2751 SHERBROOKE ROAD		Transaction ID: PR5420081175
City State Zip Code SHAKER HEIGHTS OH 44122-1829	Amount of Each Receipt this Period _____ 124.98	
FEC ID number of contributing federal political committee. C _____		
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 ▼ _____ 541.58	P/R Deduction (\$41.66 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. MICHELE A SEYRANIAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 24545 SHAKER BLVD.		Transaction ID: PR5420881175
City State Zip Code BEACHWOOD OH 44122-2349	Amount of Each Receipt this Period _____ 56.49	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP EXECUTIVE - E/C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 244.79	P/R Deduction (\$18.83 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 241.47
TOTAL 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 / 39
	<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)
THOMAS TULODZIESKI

Mailing Address 2865 CARRINGTON ST. N.W.

City NORTH CANTON State OH Zip Code 44720-8176

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.50

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

Transaction ID: PR5425471175

Amount of Each Receipt this Period
58.50

P/R Deduction (\$19.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
CATHY L ROWLEY

Mailing Address 434 FOXBOROUGH DR

City BRUNSWICK State OH Zip Code 44212-4340

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR MGR HR RELATIONSHIP MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.51

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

Transaction ID: PR5425661175

Amount of Each Receipt this Period
54.81

P/R Deduction (\$18.27 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MICHAEL J MONROE

Mailing Address 6973 GATES RD

City GATES MILLS State OH Zip Code 44040-9666

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

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

Transaction ID: PR5479821175

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	263.31
TOTAL 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 / 39
	<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)
REGINALD C FULLER

Mailing Address 22 CHESTERFIELD DRIVE

City State Zip Code
VOORHEESVILLE NY 12186-9200

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.03

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

Transaction ID: PR5483921175

Amount of Each Receipt this Period
51.93

P/R Deduction (\$17.31 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
GARY A HERRINGTON

Mailing Address 343 W BRAMBLE CIR

City State Zip Code
COPLEY OH 44321-2780

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION LEAD BUSINESS SYSTEMS ANALYST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 203.06

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

Transaction ID: PR5489351175

Amount of Each Receipt this Period
46.86

P/R Deduction (\$15.62 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
KEVIN P VON BUSCH

Mailing Address 22 ASTOR PLACE

City State Zip Code
ROCKY RIVER OH 44116-1545

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION MGR, NAT'L SALES RETAIL, KRL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 224.08

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

Transaction ID: PR5573831175

Amount of Each Receipt this Period
54.61

P/R Deduction (\$18.83 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	153.40
TOTAL 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 / 39
	<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) A. MICHAEL B HOBBS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3166 SOUTH HILLS COURT		Transaction ID: PR5584981175	
City State Zip Code DENVER CO 80210-6830	Amount of Each Receipt this Period _____ 57.75		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 250.25		
		P/R Deduction (\$19.25 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. THOMAS R HAWN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1814 EAST 40TH STREET SUITE 6E		Transaction ID: PR5645091175	
City State Zip Code CLEVELAND OH 44103-3527	Amount of Each Receipt this Period _____ 72.99		
FEC ID number of contributing federal political committee. C			
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 ▼ _____ 316.29		
		P/R Deduction (\$24.33 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. EDWARD J BURKE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 429 W. 57TH TERRACE		Transaction ID: PR5662191175	
City State Zip Code KANSAS CITY MO 64113-1271	Amount of Each Receipt this Period _____ 100.39		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation HEAD OF REAL ESTATE CAPITAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 401.56		
		P/R Deduction (\$34.62 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 231.13
TOTAL 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 / 39
	<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)
JONATHAN O CRANE

Mailing Address 7658 WOODSPRING LANE

City HUDSON State OH Zip Code 44236-1857

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

Name of Employer KEYBANC CAPITAL MARKETS INC. Occupation SR BANKER, INV/CORP BK IND

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.03

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

Transaction ID: PR5669201175

Amount of Each Receipt this Period
51.93

P/R Deduction (\$17.31 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
WILLIAM R KOEHLER

Mailing Address 2923 BRIGHTON RD.

City SHAKER HEIGHTS State OH Zip Code 44120-1720

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

Name of Employer KEYBANC CAPITAL MARKETS INC. Occupation LDR, INV/CORP BK INDUSTRY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: PR5681661175

Amount of Each Receipt this Period
75.00

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

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

Mailing Address 1712 WRIGHT AVE

City ROCKY RIVER State OH Zip Code 44116-1912

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SECTOR MGR, FX SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: PR5693191175

Amount of Each Receipt this Period
60.00

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

SUBTOTAL of Receipts This Page (optional)	186.93
TOTAL 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 / 39
	<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) A. PAUL N HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5763291175
Mailing Address 2889 NORTH PARK BLVD		Amount of Each Receipt this Period 178.11
City CLEVELAND HEIGHTS	State OH	Zip Code 44118-4030
FEC ID number of contributing federal political committee. C		P/R Deduction (\$59.37 Bi-Weekly)
Name of Employer KEYCORP	Occupation GENERAL COUNSEL & SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.81	

Full Name (Last, First, Middle Initial) B. WILLIAM F RANDOLPH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5791261175
Mailing Address 40 ASTON COURT		Amount of Each Receipt this Period 109.38
City POWELL	State OH	Zip Code 43065-9122
FEC ID number of contributing federal political committee. C		P/R Deduction (\$36.46 Bi-Weekly)
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) ▼	Aggregate Year-to-Date ▼ 473.98	

Full Name (Last, First, Middle Initial) C. JULIE JOSEFORSKY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5800271175
Mailing Address 2375 SPRINGSIDE OVAL		Amount of Each Receipt this Period 75.00
City BRECKSVILLE	State OH	Zip Code 44141-3358
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, HOME EQUITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶	362.49
TOTAL 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 / 39
	<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)
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 ▼ 260.00

Date of Receipt
 / /

Transaction ID: PR5801281175

Amount of Each Receipt this Period
 60.00

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

B. Full Name (Last, First, Middle Initial)
CHARLES STEPHEN HYLE

Mailing Address 2994 COURTLAND BLVD.

City SHAKER HEIGHTS State OH Zip Code 44122-2804

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation EVP, CHIEF RISK OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 874.90

Date of Receipt
 / /

Transaction ID: PR5821081175

Amount of Each Receipt this Period
 201.90

P/R Deduction (\$67.30 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
SCOTT JOSEPH BROWN

Mailing Address 12996 MARINER COURT

City MC CORDSVILLE State IN Zip Code 46055-9657

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 ▼ 270.01

Date of Receipt
 / /

Transaction ID: PR5823791175

Amount of Each Receipt this Period
 62.31

P/R Deduction (\$20.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	324.21
TOTAL 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 / 39
	<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) A. STEVE YATES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7110 KINSMAN ROAD		Transaction ID: PR5831771175	
City NOVELTY	State OH	Zip Code 44072-9512	Amount of Each Receipt this Period _____ 278.84
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 ▼ _____ 1201.89		
		P/R Deduction (\$96.15 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. MICHAEL A MILLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8817 NE 132ND STREET		Transaction ID: PR5852061175	
City KIRKLAND	State WA	Zip Code 98034-2639	Amount of Each Receipt this Period _____ 60.00
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 ▼ _____ 260.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. ROBERT MCCAMBRIDGE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5700 64TH AVE., NE		Transaction ID: PR5852261175	
City SEATTLE	State WA	Zip Code 98105-2042	Amount of Each Receipt this Period _____ 86.55
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 ▼ _____ 375.05		
		P/R Deduction (\$28.85 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 425.39
TOTAL 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 / 39
	<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) A. ALAN BUFFINGTON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2969 EATON ROAD		Transaction ID: PR5857521175
City State Zip Code SHAKER HEIGHTS OH 44122-2515	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, APPLICATIONS DEVLPMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JEFFERY JEROME WEAVER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 19101 SOUTH PARK BLVD		Transaction ID: PR5864261175
City State Zip Code SHAKER HEIGHTS OH 44122-1854	Amount of Each Receipt this Period 115.38	
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, CREDIT PORTFOLIO M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. DEAN ILJASIC		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1278 W. 9TH STREET # 1216		Transaction ID: PR5870521175
City State Zip Code CLEVELAND OH 44113-5504	Amount of Each Receipt this Period 118.26	
FEC ID number of contributing federal political committee. C		
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 ▼ 512.46	P/R Deduction (\$39.42 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	353.64
TOTAL 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 / 39
	<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) A. MICHAEL HENRY DULAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 373 ANGIER COURT NE		Transaction ID: PR5887481175	
City ATLANTA State GA Zip Code 30312-1068	Amount of Each Receipt this Period _____ 158.64		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation BUS BKG SEGMENT HEAD COMM BK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 687.44		
		P/R Deduction (\$52.88 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. CHARLES THORPE MANUEL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 64 WEST STREET		Transaction ID: PR5890191175	
City BEVERLY State MA Zip Code 01915-2228	Amount of Each Receipt this Period _____ 72.12		
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 ▼ _____ 312.52		
		P/R Deduction (\$24.04 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. EDWARD B. REILLY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5625 MURFIELD DR.		Transaction ID: PR5894701175	
City ROCHESTER HILLS State MI Zip Code 48306-2357	Amount of Each Receipt this Period _____ 77.88		
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 ▼ _____ 337.48		
		P/R Deduction (\$25.96 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 308.64
TOTAL 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 29 / 39	
	(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 ▼ 325.00

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

Transaction ID: PR5903691175

Amount of Each Receipt this Period
75.00

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

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	5719.12

**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 30 / 39

<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)

A. Friends of Charlie Wilson

Mailing Address Terry Lee, Treasurer
252 West Main Street

City St. Clairsville State OH Zip Code 43950

Purpose of Disbursement

Candidate Name
Charles Wilson

Office Sought: House
 Senate
 President

State: OH District: 6

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 4023097

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

**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)

PAGE 31 / 39

<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) A. Friends of Senator Spada		Transaction ID: 3918355 Date of Disbursement 06 / 01 / 2007
Mailing Address 5962 Royalwood Road		Amount of Each Disbursement this Period 300.00
City North Royalton	State OH	
Zip Code 44133		Robert Spada, STATE SENATE OH
Purpose of Disbursement Robert Spada, STATE SENATE OH		
Candidate Name Robert Spada		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 24		

Full Name (Last, First, Middle Initial) B. Martin J. Sweeney for Council		Transaction ID: 3918360 Date of Disbursement 06 / 01 / 2007
Mailing Address John Gallagher, Treasurer 3612 West 133rd Street		Amount of Each Disbursement this Period 1000.00
City Cleveland	State OH	
Zip Code 44111		Martin Sweeney, LOCAL OH
Purpose of Disbursement Martin Sweeney, LOCAL OH		
Candidate Name Martin Sweeney		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District:		

Full Name (Last, First, Middle Initial) C. Jennifer Garrison for State Rep. Committee		Transaction ID: 3918356 Date of Disbursement 06 / 01 / 2007
Mailing Address Holly Dexter, Treasurer 427 Fifth Street		Amount of Each Disbursement this Period 250.00
City Marietta	State OH	
Zip Code 45750		Jennifer Garrison, STATE HOUSE 93rd OH
Purpose of Disbursement Jennifer Garrison, STATE HOUSE 93rd OH		
Candidate Name Jennifer Garrison		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 93		

SUBTOTAL of Disbursements This Page (optional) ▶	1550.00
TOTAL 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 32 / 39

<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) A. Ohio Senate Democrats		Transaction ID: 3918371 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2007
Mailing Address Lois Jones, Treasurer 271 East State Street		Amount of Each Disbursement this Period 1000.00
City Columbus	State OH	
Zip Code 43215		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type 011

Full Name (Last, First, Middle Initial) B. Friends of Faber		Transaction ID: 3918353 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2007
Mailing Address Dale Schwieterman, Treasurer 7706 State Route 703		Amount of Each Disbursement this Period 300.00
City Celina	State OH	
Zip Code 45822		
Purpose of Disbursement Keith Faber, STATE SENATE OH Candidate Name OH Sen. Keith Faber Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type 011 Keith Faber, STATE SENATE OH

Full Name (Last, First, Middle Initial) C. Citizens to Elect Dan Dodd		Transaction ID: 3918366 Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2007
Mailing Address Leslie Harley, Treasurer 106 North Main Street		Amount of Each Disbursement this Period 350.00
City New Lexington	State OH	
Zip Code 43764		
Purpose of Disbursement Dan Dodd, STATE HOUSE 91st OH Candidate Name OH Rep. Dan Dodd Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 91		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type 011 Dan Dodd, STATE HOUSE 91st OH

SUBTOTAL of Disbursements This Page (optional) ▶	1650.00
TOTAL 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)

PAGE 33 / 39

<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) A. Okey for Ohio Committee		Transaction ID: 3918357 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address Kathleen Stoneman, Treasurer 63 2nd Street, NW		Amount of Each Disbursement this Period 250.00
City Carrolton State OH Zip Code 44615		
Purpose of Disbursement Mark Okey, STATE HOUSE 61st OH		Mark Okey, STATE HOUSE 61-st OH
Candidate Name OH Rep. Mark Okey		
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: 61		

Full Name (Last, First, Middle Initial) B. Committee to Elect Thom Collier		Transaction ID: 3918528 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address Yvonne Aujello, Treasurer 500 East Burgess Street		Amount of Each Disbursement this Period 300.00
City Mount Vernon State OH Zip Code 43050		
Purpose of Disbursement Thom Collier, STATE HOUSE 90th OH		Thom Collier, STATE HOUSE 90th OH
Candidate Name Thom Collier		
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: 90		

Full Name (Last, First, Middle Initial) C. Friends for Ginther		Transaction ID: 3918527 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address Robert O'Shaughnessy, Treasurer 405 East Town Street		Amount of Each Disbursement this Period 250.00
City Columbus State OH Zip Code 43215		
Purpose of Disbursement Andrew Ginther, LOCAL OH		Andrew Ginther, LOCAL OH
Candidate Name Andrew J. Ginther		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: OH District: 2007 OH General		

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
TOTAL 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

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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) A. Citizens for Austria		Transaction ID: 3920336 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address Arnold Fife, Treasurer 2537 Obetz Drive		Amount of Each Disbursement this Period 750.00
City Beavercreek	State OH	
Zip Code 45434		Steven Austria, STATE SEN- ATE OH
Purpose of Disbursement Steven Austria, STATE SENATE OH		
Candidate Name Steven Austria		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 10		

Full Name (Last, First, Middle Initial) B. Friends of Matthew J. Dolan		Transaction ID: 3920354 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address Robert Dolan, Treasurer 100 7th Avenue, #12		Amount of Each Disbursement this Period 5000.00
City Chardon	State OH	
Zip Code 44024		Matthew Dolan, STATE HOUSE 98th OH
Purpose of Disbursement Matthew Dolan, STATE HOUSE 98th OH		
Candidate Name Matthew Dolan		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 98		

Full Name (Last, First, Middle Initial) C. Barrett for Representative		Transaction ID: 3920339 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address John Elminger, Treasurer 353 Golden Russett Boulevard		Amount of Each Disbursement this Period 300.00
City Amherst	State OH	
Zip Code 44001		Matthew Barrett, STATE HO- USE 58th OH
Purpose of Disbursement Matthew Barrett, STATE HOUSE 58th OH		
Candidate Name OH Rep. Matthew Barrett		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 58		

SUBTOTAL of Disbursements This Page (optional) ▶	6050.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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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) A. Committee for Joyce Beatty State Representative		Transaction ID: 3920684 Date of Disbursement 06 / 08 / 2007	
Mailing Address Glenna Watson, Treasurer 233 South High Street		Amount of Each Disbursement this Period 5000.00	
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. Friends of Michael J. Skindell		Transaction ID: 3920686 Date of Disbursement 06 / 08 / 2007	
Mailing Address Donna J. Taylor-Kolis, Treasurer 16800 Delaware Avenue		Amount of Each Disbursement this Period 250.00	
City Lakewood	State OH		011 Category/ Type
Purpose of Disbursement Michael Skindell, STATE HOUSE 13rd OH			
Candidate Name Michael Skindell			
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: 13		Michael Skindell, STATE HOUSE 13rd OH	

Full Name (Last, First, Middle Initial) C. Committee to Elect Joe Uecker		Transaction ID: 3920741 Date of Disbursement 06 / 11 / 2007	
Mailing Address J. Uecker, Treasurer 298 Indianview Drive		Amount of Each Disbursement this Period 300.00	
City Loveland	State OH		011 Category/ Type
Purpose of Disbursement Joseph Uecker, STATE HOUSE 66th OH			
Candidate Name OH Rep. Joseph Uecker			
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: 66		Joseph Uecker, STATE HOUSE 66th OH	

SUBTOTAL of Disbursements This Page (optional) ▶	5550.00
TOTAL 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

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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) A. The Redfern Committee		Transaction ID: 3923660 Date of Disbursement 06 / 18 / 2007
Mailing Address Mark Mulligan, Treasurer 2841 Bluff Ridge Road		Amount of Each Disbursement this Period 500.00
City Port Clinton	State OH	
Zip Code 43452		Chris Redfern, STATE HOUSE 80th OH
Purpose of Disbursement Chris Redfern, STATE HOUSE 80th OH		
Candidate Name Chris Redfern		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 80	

Full Name (Last, First, Middle Initial) B. Tyrone K. Yates for the Ohio House Committee		Transaction ID: 3923849 Date of Disbursement 06 / 18 / 2007
Mailing Address Aryeh Alex, Treasurer 2200 Victory Parkway, Suite 707		Amount of Each Disbursement this Period 500.00
City Cincinnati	State OH	
Zip Code 45206		Tyrone Yates, STATE HOUSE 33rd OH
Purpose of Disbursement Tyrone Yates, STATE HOUSE 33rd OH		
Candidate Name Tyrone Yates		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 33	

Full Name (Last, First, Middle Initial) C. Committee to Elect Jim McGregor		Transaction ID: 3923631 Date of Disbursement 06 / 18 / 2007
Mailing Address Paul W. Leithart, Treasurer 133 Misty Oak Place		Amount of Each Disbursement this Period 250.00
City Gahanna	State OH	
Zip Code 43230		Jim McGregor, STATE HOUSE 20th OH
Purpose of Disbursement Jim McGregor, STATE HOUSE 20th OH		
Candidate Name Jim McGregor		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 20	

SUBTOTAL of Disbursements This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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) A. Citizens for Sayre		Transaction ID: 3923884 Date of Disbursement 06 / 18 / 2007	
Mailing Address Linda Yosick, Treasurer 1420 Parkdale Drive		Amount of Each Disbursement this Period 300.00	
City Dover	State OH		011 Category/ Type
Purpose of Disbursement Allan Sayre, STATE HOUSE 96th OH			
Candidate Name Allan Sayre			
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) ▼	Allan Sayre, STATE HOUSE 96th OH	
State: OH District: 96			

Full Name (Last, First, Middle Initial) B. Citizens for Josh Mandel		Transaction ID: 3923639 Date of Disbursement 06 / 18 / 2007	
Mailing Address Brendan R. Doyle, Treasurer 2119 Cottingham Drive		Amount of Each Disbursement this Period 300.00	
City Lyndhurst	State OH		011 Category/ Type
Purpose of Disbursement Josh Mandel, STATE HOUSE 17th OH			
Candidate Name Josh Mandel			
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) ▼	Josh Mandel, STATE HOUSE 17th OH	
State: OH District: 17			

Full Name (Last, First, Middle Initial) C. Friends of Mayor Westfall		Transaction ID: 4023109 Date of Disbursement 06 / 22 / 2007	
Mailing Address Sharon White, Treasurer 6800 Chadbourne Drive		Amount of Each Disbursement this Period 750.00	
City Valley View	State OH		011 Category/ Type
Purpose of Disbursement Randy Westfall, MAYOR OH			
Candidate Name Randy Westfall			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Randy Westfall, MAYOR OH	
State: OH District: 2007 OH General			

SUBTOTAL of Disbursements This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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) A. Fende for State Representative		Transaction ID: 4023107 Date of Disbursement 06 / 22 / 2007
Mailing Address Nick Cindric, Treasurer 30128 Forestgrove		Amount of Each Disbursement this Period 300.00
City Willowick State OH Zip Code 44095	011 Category/ Type	
Purpose of Disbursement Lorraine Fende, STATE HOUSE 62nd OH		
Candidate Name Lorraine Fende		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 62	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Lorraine Fende, STATE HOUSE 62nd OH

Full Name (Last, First, Middle Initial) B. Frank G. Jackson for a Better Cleveland		Transaction ID: 4023100 Date of Disbursement 06 / 22 / 2007
Mailing Address Scott Finerman, Treasurer 3029 Prospect Avenue		Amount of Each Disbursement this Period 2000.00
City Cleveland State OH Zip Code 44115	011 Category/ Type	
Purpose of Disbursement Frank Jackson, LOCAL OH		
Candidate Name Frank Jackson		
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) ▼	Frank Jackson, LOCAL OH

Full Name (Last, First, Middle Initial) C. The Cordray Committee		Transaction ID: 4023103 Date of Disbursement 06 / 22 / 2007
Mailing Address Mary Ellen Withrow, Treasurer 1480 Dublin Road		Amount of Each Disbursement this Period 10000.00
City Columbus State OH Zip Code 43215	011 Category/ Type	
Purpose of Disbursement Richard Cordray, TREASURER OH		
Candidate Name Richard Cordray		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Richard Cordray, TREASURER OH

SUBTOTAL of Disbursements This Page (optional) ▶	12300.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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) A. Friends of Jennifer Brady		Transaction ID: 4023105	
Mailing Address Margaret Weitzel, Treasurer 3438 W. 150th Street		Date of Disbursement MM / DD / YYYY 06 / 22 / 2007	
City Cleveland	State OH	Zip Code 44111	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Jennifer Brady, STATE HOUSE 16th OH		011 Category/ Type	
Candidate Name OH Rep. Jennifer Brady		Jennifer Brady, STATE HOUSE 16th OH	
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: 16		

SUBTOTAL of Disbursements This Page (optional)	250.00
TOTAL This Period (last page this line number only)	30750.00