

# 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 08 01 2007 through 08 31 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 09 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	8

D	D
3	1

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 .....	32617.02									
(c) Total Receipts (from Line 19) .....	17585.82	154667.31								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	50202.84	181847.34								
7. Total Disbursements (from Line 31) .....	21273.50	152918.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	28929.34	28929.34								
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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	8

D	D
3	1

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	5320.00	23547.73
(i) Itemized (use Schedule A) .....	12265.82	131119.58
(ii) Unitemized .....	17585.82	154667.31
(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) .....	17585.82	154667.31
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)) .....	17585.82	154667.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17585.82	154667.31

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	28.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3.50	28.00
22. Transfers to Affiliated/Other Party Committees.....	3000.00	15000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	11400.00	29900.00
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.....	6870.00	107990.00
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))..	21273.50	152918.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	21273.50	152918.00

**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) .....	17585.82	154667.31
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17585.82	154667.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	28.00
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	28.00

**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 / 55
	<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)  
CHARLES W SULERZYSKI

Mailing Address 45002 FALLS RD.

City State Zip Code  
CHAGRIN FALLS OH 44022-2540

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

Name of Employer  
KEYBANK NATIONAL ASSOCIATION

Occupation  
REGIONAL PRESIDENT III

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 15 / 2007

Transaction ID: 4146181

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10080 PEMBURRY DR.

City State Zip Code  
GRANGER IN 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 ▼  
255.00

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

Transaction ID: PR5396091272

Amount of Each Receipt this Period  
30.00

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

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

Mailing Address 131 FIRESIDE LANE

City State Zip Code  
CAMILLUS NY 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 ▼  
204.00

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

Transaction ID: PR5396711272

Amount of Each Receipt this Period  
24.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **554.00**

**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 / 55
	<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)  
CHRISTOPHER K DYER

Mailing Address 38567 MISTY MEADOW TRAIL

City NORTH RIDGEVILLE State OH Zip Code 44039-1170

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

Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation MGR PORTFOLIO ADMINISTRATION

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.27

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

**Transaction ID:** PR5397361272

Amount of Each Receipt this Period  
20.16

P/R Deduction (\$13.44 Bi-Weekly)

**B.** 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**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SEGMENT HEAD COMMUNITY BANK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 686.46

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

**Transaction ID:** PR5398931272

Amount of Each Receipt this Period  
80.76

P/R Deduction (\$40.38 Bi-Weekly)

**C.** 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**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation REGIONAL CREDIT EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 306.68

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

**Transaction ID:** PR5399751272

Amount of Each Receipt this Period  
36.08

P/R Deduction (\$18.04 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>137.00</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 8 / 55
	<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) KEVIN P RILEY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5400441272	
Mailing Address 329 TIMBERIDGE TRAIL		Amount of Each Receipt this Period 41.66	
City GATES MILLS      State OH      Zip Code 44040-9319	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$41.66 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR IV, FINANCE	Aggregate Year-to-Date ▼ 666.56		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) MARCUS E HELMBRECHT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5400571272	
Mailing Address 6930 S. CAMELOT		Amount of Each Receipt this Period 18.82	
City MENTOR      State OH      Zip Code 44060-4075	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$11.58 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MANAGER IV ETO	Aggregate Year-to-Date ▼ 209.15		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) GEORGE E EMMONS JR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5400901272	
Mailing Address 699 COY LANE		Amount of Each Receipt this Period 83.32	
City CHAGRIN FALLS      State OH      Zip Code 44022-2679	FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$41.66 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PRESIDENT - COMMUNITY BANK	Aggregate Year-to-Date ▼ 708.22		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	143.80
<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 / 55
	<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. SUSAN P BROCKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401251272	
Mailing Address 28 ANNANDALE DRIVE		Amount of Each Receipt this Period 40.00	
City CHAGRIN FALLS	State OH	Zip Code 44022-4266	P/R Deduction (\$20.00 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYBANK NATIONAL ASSOCIATION	
Occupation HR DIR, ORG & EMPLOY DEVELOP		Aggregate Year-to-Date 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. ALVIN B COPPOLO</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401261272	
Mailing Address 306 KILBOURNE DR		Amount of Each Receipt this Period 26.00	
City HUDSON	State OH	Zip Code 44236-3424	P/R Deduction (\$13.00 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYBANK NATIONAL ASSOCIATION	
Occupation ENTERPRISE TECHNOLOGY DIRECTOR		Aggregate Year-to-Date 221.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. ANDREW R TYSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401461272	
Mailing Address 17431 FISH CREEK TRAIL		Amount of Each Receipt this Period 29.34	
City CHAGRIN FALLS	State OH	Zip Code 44023-2126	P/R Deduction (\$14.67 Bi-Weekly)
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer KEYCORP	
Occupation GROUP HEAD, STRATEGIC PLAN&DEV		Aggregate Year-to-Date 249.39	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	95.34
<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 / 55
	<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 E HENSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401511272
Mailing Address 20515 BEACONSFIELD BLVD		Amount of Each Receipt this Period 39.24
City ROCKY RIVER	State OH	Zip Code 44116-1305
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.62 Bi-Weekly)
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 ▼ 296.21	

<b>B.</b> Full Name (Last, First, Middle Initial) FLAVIO M GIUST		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402421272
Mailing Address 7285 SURREY LANE		Amount of Each Receipt this Period 24.00
City CHESTERLAND	State OH	Zip Code 44026-2032
FEC ID number of contributing federal political committee. C		P/R Deduction (\$12.00 Bi-Weekly)
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 ▼ 204.00	

<b>C.</b> Full Name (Last, First, Middle Initial) JAMES PEOPLES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402971272
Mailing Address 16827 SE 59TH STREET		Amount of Each Receipt this Period 83.32
City BELLEVUE	State WA	Zip Code 98006-5555
FEC ID number of contributing federal political committee. C		P/R Deduction (\$41.66 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 ▼ 708.22	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	146.56
<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 / 55
	<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. CRAIG T PLATT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 263 BELL STREET		<b>Transaction ID: PR5403081272</b>
City State Zip Code CHAGRIN FALLS OH 44022-2944	Amount of Each Receipt this Period _____ 27.79	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation LDR, SECURITIZATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 234.19	P/R Deduction (\$15.16 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. RENEE R CSUHRAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4839 SNOW BLOSSOM LANE		<b>Transaction ID: PR5403481272</b>
City State Zip Code BRECKSVILLE OH 44141-3359	Amount of Each Receipt this Period _____ 32.88	
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 ▼ _____ 326.62	P/R Deduction (\$21.92 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. GEORGE A VALKO</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10484 CANDLEWOOD DRIVE		<b>Transaction ID: PR5403631272</b>
City State Zip Code SCOTTSDALE AZ 85255-8034	Amount of Each Receipt this Period _____ 43.84	
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 ▼ _____ 329.93	P/R Deduction (\$21.92 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>104.51</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 12 / 55
	<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)  
SHELDON R HARTMAN

Mailing Address 31349 PINETREE ROAD

City State Zip Code  
PEPPER PIKE OH 44124-5907

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION ASSOC GENERAL COUNSEL

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 248.36

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

**Transaction ID:** PR5403771272

Amount of Each Receipt this Period  
12.15

P/R Deduction (\$3.47 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
PAUL L MEINERDING

Mailing Address 4320 BRITTANY

City State Zip Code  
OTTAWA HILLS OH 43615-2306

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT RETAIL LEADER II

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 306.00

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

**Transaction ID:** PR5403831272

Amount of Each Receipt this Period  
36.00

P/R Deduction (\$18.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
JOHN V AVALLONE

Mailing Address 4559 ROCKY MOUNTAIN DRIVE

City State Zip Code  
MEDINA OH 44256-6704

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION SALES MGR, GLOBAL TREASURY MGM

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 266.49

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

**Transaction ID:** PR5404131272

Amount of Each Receipt this Period  
32.30

P/R Deduction (\$16.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>80.45</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 13 / 55
	<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. CONSTANCE F PAGE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404661272	
Mailing Address 2811 CHATEAU CIRCLE		Amount of Each Receipt this Period 28.88	
City COLUMBUS      State OH      Zip Code 43221-2553	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation FINANCIAL ADVISOR IV, BANK	Aggregate Year-to-Date ▼ 214.57		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$14.44 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>B. LAWRENCE G BABIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404671272	
Mailing Address 28039 RED RAVEN RD		Amount of Each Receipt this Period 51.92	
City PEPPER PIKE      State OH      Zip Code 44124-4551	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation CIO LARGE CAP INVESTMENTS	Aggregate Year-to-Date ▼ 428.36		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.96 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>C. LINDA A GRANDSTAFF</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5405061272	
Mailing Address 17301 RIVERWAY DRIVE		Amount of Each Receipt this Period 56.30	
City LAKEWOOD      State OH      Zip Code 44107-5315	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation CHIEF BANK SECRECY ACT OFFICER	Aggregate Year-to-Date ▼ 388.51		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$28.15 Bi-Weekly)		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	137.10
<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 / 55
	<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. GEORGE H STORAR</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5495 CHANCERY BLVD.		<b>Transaction ID: PR5406591272</b>	
City GREENWOOD	State IN	Zip Code 46143-7170	Amount of Each Receipt this Period _____ 28.78
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 215.86		
		P/R Deduction (\$14.39 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: PR5406611272</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, MRKT RSK & SEC COMPLNC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 340.00		
		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: PR5406651272</b>	
City HINCKLEY	State OH	Zip Code 44233-9699	Amount of Each Receipt this Period _____ 39.24
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 ▼ _____ 270.71		
		P/R Deduction (\$19.62 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>108.02</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 16 / 55
	<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) ERIC D BABBERT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5406681272
Mailing Address 6743 BALLANTRAE PLACE		Amount of Each Receipt this Period 27.70
City DUBLIN      State OH      Zip Code 43016-6021	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT RETAIL LEADER II	Aggregate Year-to-Date ▼ 206.35	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$13.85 Bi-Weekly)	

<b>B.</b> Full Name (Last, First, Middle Initial) THOMAS M SPILMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5406791272
Mailing Address 5610 23RD AVE NE		Amount of Each Receipt this Period 36.92
City TACOMA      State WA      Zip Code 98422-1555	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT III	Aggregate Year-to-Date ▼ 313.82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$18.46 Bi-Weekly)	

<b>C.</b> Full Name (Last, First, Middle Initial) JOHN W MOODY JR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5407281272
Mailing Address 15608 BREWSTER		Amount of Each Receipt this Period 47.40
City EAST CLEVELAND      State OH      Zip Code 44112-3513	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, CREDIT ADMIN III	Aggregate Year-to-Date ▼ 257.62	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$26.79 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	112.02
<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 / 55
	<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) 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. <b>C</b>		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5407441272 Amount of Each Receipt this Period <input type="text"/> 10.00
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CHIEF MARKETING OFFICER Aggregate Year-to-Date ▼ <input type="text"/> 591.94	P/R Deduction (\$5.00 Bi-Weekly)

<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 <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5407681272 Amount of Each Receipt this Period <input type="text"/> 30.00
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MULTI-MARKET SALES MGR, KPB Aggregate Year-to-Date ▼ <input type="text"/> 233.01	P/R Deduction (\$15.00 Bi-Weekly)

<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 <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5407931272 Amount of Each Receipt this Period <input type="text"/> 40.38
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation DIRECTOR, MARKETING Aggregate Year-to-Date ▼ <input type="text"/> 312.94	P/R Deduction (\$20.19 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 80.38
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 55
	<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		Transaction ID: PR5408021272
City STRONGSVILLE	State OH	Amount of Each Receipt this Period _____ 50.00
Zip Code 44149-0922		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ _____ 425.00	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		Transaction ID: PR5408521272
City WESTLAKE	State OH	Amount of Each Receipt this Period _____ 25.89
Zip Code 44145-2039		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ _____ 262.33	P/R Deduction (\$17.26 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		Transaction ID: PR5408641272
City SHAKER HEIGHTS	State OH	Amount of Each Receipt this Period _____ 31.16
Zip Code 44120-1733		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ _____ 251.00	P/R Deduction (\$13.85 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>107.05</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 / 55
	<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. CLINTON L WEDDELL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1116 FOREST ROAD		<b>Transaction ID: PR5408881272</b>	
City State Zip Code LAKEWOOD OH 44107-1043	Amount of Each Receipt this Period _____ 28.94		
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 ▼ _____ 220.86		
		P/R Deduction (\$15.23 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: PR5408891272</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 ▼ _____ 425.00		
		P/R Deduction (\$25.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. 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: PR5409651272</b>	
City State Zip Code AVON OH 44011-3221	Amount of Each Receipt this Period _____ 18.69		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SENIOR CREDIT OFFICER VI		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 226.66		
		P/R Deduction (\$7.79 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>97.63</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 / 55
	<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 A HOFFMAN

Mailing Address 2660 WESTCHESTER ROAD

City State Zip Code  
OTTAWA HILLS OH 43615-2242

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) ▼ 350.67

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

**Transaction ID:** PR5409761272

Amount of Each Receipt this Period  
32.45

P/R Deduction (\$24.96 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
JANICE L CULVER

Mailing Address 17311 RED FOX TRAIL

City State Zip Code  
CHAGRIN FALLS OH 44023-2110

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION TRUST RESOURCE CTR MGR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 221.98

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

**Transaction ID:** PR5410051272

Amount of Each Receipt this Period  
29.93

P/R Deduction (\$14.18 Bi-Weekly)

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

Mailing Address 288 ORION NE

City State Zip Code  
NORTH CANTON OH 44720-8602

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION PORTFOLIO MANAGER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 218.08

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

**Transaction ID:** PR5410411272

Amount of Each Receipt this Period  
29.54

P/R Deduction (\$14.77 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>91.92</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 / 55
	<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. CAREYL SPENCER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5599 - B N. GREENWAY CT		<b>Transaction ID: PR5410641272</b>	
City <b>HIGHLAND HEIGHTS</b>	State <b>OH</b>	Zip Code <b>44143</b>	Amount of Each Receipt this Period _____ 22.59
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR FINANCIAL ADVISOR, BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 218.90		
		P/R Deduction (\$14.80 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL P BARNUM</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 363 WALMAR DRIVE		<b>Transaction ID: PR5410681272</b>	
City <b>BAY VILLAGE</b>	State <b>OH</b>	Zip Code <b>44140-1459</b>	Amount of Each Receipt this Period _____ 48.46
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD I, OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 370.73		
		P/R Deduction (\$24.23 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. 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: PR5410901272</b>	
City <b>MENTOR</b>	State <b>OH</b>	Zip Code <b>44060-5969</b>	Amount of Each Receipt this Period _____ 29.60
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 ▼ _____ 232.45		
		P/R Deduction (\$15.58 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>100.65</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 / 55
	<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. ROBERT G KULA</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411001272
Mailing Address 6627 BENEDICT DRIVE		Amount of Each Receipt this Period 25.00
City MIDDLEBURG HEIGHTS State OH Zip Code 44130-7924	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 DIR. QUANTITATIVE RISK ANALYTI	Aggregate Year-to-Date 212.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. ROSALYN A CIULLA</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411501272
Mailing Address 17601 HARLAND AVE		Amount of Each Receipt this Period 27.10
City CLEVELAND State OH Zip Code 44119-1929	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$14.26 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TEAM LEADER IV, CDL	Aggregate Year-to-Date 206.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. STEPHEN J MATESEVAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411511272
Mailing Address 499 SAWGRASS DR.		Amount of Each Receipt this Period 27.55
City FAIRLAWN State OH Zip Code 44333-9224	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$14.50 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PORTFOLIO MANAGER	Aggregate Year-to-Date 200.40	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	79.65
<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 / 55
	<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 J BLAKE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411981272
Mailing Address 3404 ORCHESTRA STREET		Amount of Each Receipt this Period 40.64
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 ▼ 286.15	P/R Deduction (\$20.32 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. DONALD P HENDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412341272
Mailing Address 17441 LAKESEDGE TRAIL		Amount of Each Receipt this Period 8.08
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 ▼ 230.97	P/R Deduction (\$8.08 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. AMY K CARLSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412911272
Mailing Address 2884 WOODBURY RD		Amount of Each Receipt this Period 57.70
City SHAKER HEIGHTS State OH Zip Code 44120-2426		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 366.38	P/R Deduction (\$28.85 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	106.42
<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 / 55
	<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) RICHARD E MCERLEANJR Mailing Address 7511 LASCALA DRIVE City HUDSON State OH Zip Code 44236-1845 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5412931272 Amount of Each Receipt this Period <input type="text"/> 18.15
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 231.00	P/R Deduction (\$1.65 Bi-Weekly)

<b>B.</b> Full Name (Last, First, Middle Initial) KAREN BLUE Mailing Address 1800 HALLS CARRIAGE PATH City WESTLAKE State OH Zip Code 44145-2031 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5414381272 Amount of Each Receipt this Period <input type="text"/> 43.88
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 ▼ <input type="text"/> 335.27	P/R Deduction (\$22.50 Bi-Weekly)

<b>C.</b> Full Name (Last, First, Middle Initial) MARYANN HOGAN Mailing Address 22827 LAKE ROAD UNIT # 6 City ROCKY RIVER State OH Zip Code 44116-1065 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/> <b>Transaction ID:</b> PR5414431272 Amount of Each Receipt this Period <input type="text"/> 28.51
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 ▼ <input type="text"/> 230.39	P/R Deduction (\$14.64 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 90.54
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 / 55
	<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)  
KEVIN M BLAKELY

Mailing Address 2078 E. HIGHGATE COURT

City HUDSON State OH Zip Code 44236-2277

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

Name of Employer KEYCORP Occupation CHIEF RISK REVIEW OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 739.21

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

**Transaction ID:** PR5414501272

Amount of Each Receipt this Period  
 29.81

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

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

Mailing Address 2020 BERKSHIRE ROAD

City GATES MILLS State OH Zip Code 44040-9764

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 692.32

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

**Transaction ID:** PR5414871272

Amount of Each Receipt this Period  
 86.54

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

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

Mailing Address 14730 RINDLEWOOD LANE

City NOVELTY State OH Zip Code 44072-9590

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

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

**Transaction ID:** PR5415111272

Amount of Each Receipt this Period  
 45.00

P/R Deduction (\$22.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>161.35</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 26 / 55
	<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. JOHN M RYAN</b>		Date of Receipt
Mailing Address 8410 BAINBROOK DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>CHAGRIN FALLS</b>	State <b>OH</b>	Zip Code <b>44023-4802</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID: PR5415211272</b>
Name of Employer KEYBANK NATIONAL ASSOCIATION		Amount of Each Receipt this Period <input type="text"/> 23.86
Occupation PORTFOLIO MANAGER		P/R Deduction (\$8.52 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 243.71	

Full Name (Last, First, Middle Initial) <b>B. DONALD F STAWOWY</b>		Date of Receipt
Mailing Address 20553 BRADGATE LANE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>STRONGSVILLE</b>	State <b>OH</b>	Zip Code <b>44149-6779</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID: PR5415531272</b>
Name of Employer KEYBANK NATIONAL ASSOCIATION		Amount of Each Receipt this Period <input type="text"/> 23.88
Occupation DIRECTOR II, FINANCE		P/R Deduction (\$15.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 235.63	

Full Name (Last, First, Middle Initial) <b>C. RONALD J DUGAS</b>		Date of Receipt
Mailing Address 5707 WESTMINSTER DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>SOLOM</b>	State <b>OH</b>	Zip Code <b>44139-1979</b>
FEC ID number of contributing federal political committee.		<b>Transaction ID: PR5416281272</b>
Name of Employer KEYBANK NATIONAL ASSOCIATION		Amount of Each Receipt this Period <input type="text"/> 41.54
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 ▼ <input type="text"/> 353.09	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<input type="text"/> 89.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>



# 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 / 55
	<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) LARRY T BURKE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419071272
Mailing Address 10014 DAY ROAD NE		Amount of Each Receipt this Period 35.16
City BAINBRIDGE ISLAND	State WA	Zip Code 98110-3306
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$20.68 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.41	

<b>B.</b> Full Name (Last, First, Middle Initial) THOMAS A ELMER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419181272
Mailing Address 11357 S.E. HIGHLAND LOOP		Amount of Each Receipt this Period 27.84
City CLACKAMAS	State OR	Zip Code 97015-7234
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$13.19 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.33	

<b>C.</b> Full Name (Last, First, Middle Initial) GARY P KOCH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419641272
Mailing Address 5981 SE ARCADIA RD.		Amount of Each Receipt this Period 40.00
City SHELTON	State WA	Zip Code 98584-8330
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$20.00 Bi-Weekly)
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 ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	103.00
<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 29 / 55
	<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 E HELFRICH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2751 SHERBROOKE ROAD		<b>Transaction ID: PR5420081272</b>
City State Zip Code SHAKER HEIGHTS OH 44122-1829	Amount of Each Receipt this Period _____ 10.00	
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 ▼ _____ 598.24	P/R Deduction (\$5.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. MICHELE A SEYRANIAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 24545 SHAKER BLVD.		<b>Transaction ID: PR5420881272</b>
City State Zip Code BEACHWOOD OH 44122-2349	Amount of Each Receipt this Period _____ 37.66	
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 ▼ _____ 320.11	P/R Deduction (\$18.83 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. 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: PR5421301272</b>
City State Zip Code LAKE OSWEGO OR 97034-6134	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 - PNW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 212.50	P/R Deduction (\$12.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>72.66</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 30 / 55
	<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)  
BRUCE E TRENT

Mailing Address 35 MALLARD DR.

City REXFORD State NY Zip Code 12148-1515

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

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation MANAGER V ETO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.11

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

**Transaction ID:** PR5423531272

Amount of Each Receipt this Period  
20.37

P/R Deduction (\$11.88 Bi-Weekly)

**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. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation MANAGER III ETO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

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

**Transaction ID:** PR5423701272

Amount of Each Receipt this Period  
30.00

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

**C.** 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. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION  
Occupation ARG ADMINISTRATIVE EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.12

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

**Transaction ID:** PR5425421272

Amount of Each Receipt this Period  
23.79

P/R Deduction (\$12.64 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>74.16</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 31 / 55
	<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: PR5425431272</b>		
City State Zip Code BRATENAHL OH 44108-1157	Amount of Each Receipt this Period _____ 28.84		P/R Deduction (\$14.42 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 SR BANKER, INV/CORP BK IND Aggregate Year-to-Date ▼ _____ 219.20			

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: PR5425471272</b>		
City State Zip Code NORTH CANTON OH 44720-8176	Amount of Each Receipt this Period _____ 39.00		P/R Deduction (\$19.50 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 DISTRICT PRESIDENT III Aggregate Year-to-Date ▼ _____ 331.50			

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: PR5425661272</b>		
City State Zip Code BRUNSWICK OH 44212-4340	Amount of Each Receipt this Period _____ 36.54		P/R Deduction (\$18.27 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 SR MGR HR RELATIONSHIP MGMT Aggregate Year-to-Date ▼ _____ 310.59			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>104.38</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: (check only one)	PAGE 32 / 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. MELISSA RODRIGUE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 82 SCOTT ROAD		<b>Transaction ID: PR5431101272</b>	
City SOUTH PORTLAND	State ME	Zip Code 04106-3417	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ _____ 212.50		
		P/R Deduction (\$12.50 Bi-Weekly)	

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 _____	
Mailing Address 12531 COOPERS RUN		<b>Transaction ID: PR5463701272</b>	
City STRONGSVILLE	State OH	Zip Code 44149-9242	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ _____ 212.50		
		P/R Deduction (\$12.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. JAN G PYNAPPEL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6360 TRAILRIDGE CT		<b>Transaction ID: PR5479661272</b>	
City LOVELAND	State OH	Zip Code 45140-8156	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ _____ 255.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>80.00</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 / 55
	<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 J MONROE

Mailing Address 6973 GATES RD

City State Zip Code  
GATES MILLS OH 44040-9666

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIRECTOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 850.00

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

**Transaction ID:** PR5479821272

Amount of Each Receipt this Period  
100.00

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

**B.** Full Name (Last, First, Middle Initial)  
SCOTT P SHOPE

Mailing Address 7423 LEE REA ROAD

City State Zip Code  
CHARLOTTE NC 28226-7598

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIRECTOR-KEY HOME IMPROVEMENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 255.00

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

**Transaction ID:** PR5483741272

Amount of Each Receipt this Period  
30.00

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

**C.** 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) ▼ 294.27

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

**Transaction ID:** PR5483921272

Amount of Each Receipt this Period  
34.62

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 34 / 55
	<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: PR5489351272
Mailing Address 343 W BRAMBLE CIR		Amount of Each Receipt this Period 31.24
City <b>COPLEY</b>	State OH	Zip Code 44321-2780
FEC ID number of contributing federal political committee. C		
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 ▼ 265.54	P/R Deduction (\$15.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. KEVIN P VON BUSCH</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5573831272
Mailing Address 22 ASTOR PLACE		Amount of Each Receipt this Period 37.66
City <b>ROCKY RIVER</b>	State OH	Zip Code 44116-1545
FEC ID number of contributing federal political committee. C		
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 ▼ 286.22	P/R Deduction (\$18.83 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. PATRICE P O'CONNELL</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584431272
Mailing Address 16620 YELLOWSTONE CIRCLE		Amount of Each Receipt this Period 30.00
City <b>EAGLE RIVER</b>	State AK	Zip Code 99577-9407
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICER I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	98.90
<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 / 55
	<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. MARY G MURRAY</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584761272	
Mailing Address 243 HIGH STREET		Amount of Each Receipt this Period 24.12	
City CHAGRIN FALLS      State OH      Zip Code 44022-2558	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SECTOR CREDIT EXECUTIVE	Aggregate Year-to-Date ▼ 205.02		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$12.06 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>B. MICHAEL B HOBBS</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584981272	
Mailing Address 3166 SOUTH HILLS COURT		Amount of Each Receipt this Period 38.50	
City DENVER      State CO      Zip Code 80210-6830	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation REGIONAL PRESIDENT I	Aggregate Year-to-Date ▼ 327.25		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$19.25 Bi-Weekly)		

Full Name (Last, First, Middle Initial) <b>C. TERRY D KOUBELE</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5615061272	
Mailing Address 33105 10TH PL SW		Amount of Each Receipt this Period 25.00	
City FEDERAL WAY      State WA      Zip Code 98023-5204	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIV MGR IV, OPERATIONS	Aggregate Year-to-Date ▼ 212.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$12.50 Bi-Weekly)		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	87.62
<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 / 55
	<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 X GEISEL</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 25 NEWELL COURT		<b>Transaction ID: PR5634121272</b>
City <b>MENANDS</b>	State <b>NY</b>	Zip Code <b>12204-1226</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25.00</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>REGIONAL PRESIDENT II</b>	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 ▼ <b>212.50</b>	

Full Name (Last, First, Middle Initial) <b>B. 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: PR5645091272</b>
City <b>CLEVELAND</b>	State <b>OH</b>	Zip Code <b>44103-3527</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>48.66</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>MARKET SPACE SEGMENT MGR II</b>	P/R Deduction (\$24.33 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>413.61</b>	

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: PR5662191272</b>
City <b>KANSAS CITY</b>	State <b>MO</b>	Zip Code <b>64113-1271</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75.00</b>
Name of Employer <b>KEYBANK NATIONAL ASSOCIATION</b>	Occupation <b>HEAD OF REAL ESTATE CAPITAL</b>	P/R Deduction (\$40.38 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>535.40</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>148.66</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 37 / 55
	<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 Transaction ID: PR5669201272
Mailing Address 7658 WOODSPRING LANE		Amount of Each Receipt this Period 34.62
City HUDSON      State OH      Zip Code 44236-1857		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 294.27	P/R Deduction (\$17.31 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM R KOEHLER</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5681661272
Mailing Address 2923 BRIGHTON RD.		Amount of Each Receipt this Period 50.00
City SHAKER HEIGHTS      State OH      Zip Code 44120-1720		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 425.00	P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. LYNN F MOHL</b>		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5684651272
Mailing Address 4528 SECRETARIAT COURT		Amount of Each Receipt this Period 28.80
City AVON      State OH      Zip Code 44011-3648		
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ 244.80	P/R Deduction (\$14.40 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	113.42
<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 / 55
	<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) 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. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR5693191272 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
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 ▼ 340.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MARGOT J COPELAND Mailing Address 13900 SHAKER BOULEVARD SUITE 1216 City State Zip Code CLEVELAND OH 44120-1575 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> PR5724831272 Amount of Each Receipt this Period 40.38 P/R Deduction (\$20.19 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, CORP CONTR & DIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 343.23		

<b>C.</b> Full Name (Last, First, Middle Initial) DANIEL G FINNEGAN Mailing Address 10546 GREENCREST DRIVE City State Zip Code TAMPA FL 33626-5201 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> PR5753221272 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TEAM SLS LDR, CRE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>120.38</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: (check only one)	PAGE 39 / 55
	<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) ERSKINE E CADE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5758191272	
Mailing Address 635 WEST LAKESIDE AVENUE UNIT 601		Amount of Each Receipt this Period 54.62	
City CLEVELAND      State OH      Zip Code 44113-1093	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 DIRECTOR- GOVERNMENT AFFAIRS Aggregate Year-to-Date ▼ 464.27		
		P/R Deduction (\$27.31 Bi-Weekly)	

<b>B.</b> Full Name (Last, First, Middle Initial) PAUL N HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5763291272	
Mailing Address 2889 NORTH PARK BLVD		Amount of Each Receipt this Period 20.00	
City CLEVELAND HEIGHTS      State OH      Zip Code 44118-4030	FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEYCORP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation GENERAL COUNSEL & SECRETARY Aggregate Year-to-Date ▼ 861.18		
		P/R Deduction (\$10.00 Bi-Weekly)	

<b>C.</b> Full Name (Last, First, Middle Initial) BRUCE A WHITING		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5769201272	
Mailing Address 2025 NE 134TH PLACE		Amount of Each Receipt this Period 29.84	
City PORTLAND      State OR      Zip Code 97230-3141	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 COMM DEV COMPLIANCE TEAM LDR Aggregate Year-to-Date ▼ 253.64		
		P/R Deduction (\$14.92 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	104.46
<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 / 55
	<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. ADAM D WARNER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 37W360 MISSION HILLS DRIVE		<b>Transaction ID: PR5779921272</b>
City SAINT CHARLES State IL Zip Code 60175-6209	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEY EQUIPMENT FINANCE INC. Occupation KEF COMM LEASING SVCS DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 255.00	P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. WILLIAM F RANDOLPH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 40 ASTON COURT		<b>Transaction ID: PR5791261272</b>
City POWELL State OH Zip Code 43065-9122	Amount of Each Receipt this Period _____ 72.92	
FEC ID number of contributing federal political committee. <b>C</b>		
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 ▼ _____ 619.82	P/R Deduction (\$36.46 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. MARK L WITT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 18756 SHARON DRIVE		<b>Transaction ID: PR5800181272</b>
City CHAGRIN FALLS State OH Zip Code 44023-4980	Amount of Each Receipt this Period _____ 28.92	
FEC ID number of contributing federal political committee. <b>C</b>		
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) ▼	Aggregate Year-to-Date ▼ _____ 222.36	P/R Deduction (\$14.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>131.84</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 / 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) <b>A. JULIE JOSEFORSKY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2375 SPRINGSIDE OVAL		<b>Transaction ID: PR5800271272</b>	
City State Zip Code BRECKSVILLE OH 44141-3358	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ _____ 425.00		P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. CLARK JONATHAN WULF</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1949 BORDEAUX WAY		<b>Transaction ID: PR5801281272</b>	
City State Zip Code WESTLAKE OH 44145-3066	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 CORPORATE TAX DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 340.00		P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. WILLIAM PAUL KOFFLER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4324 CESAR CHAVEZ STREET		<b>Transaction ID: PR5818641272</b>	
City State Zip Code SAN FRANCISCO CA 94131-1817	Amount of Each Receipt this Period _____ 43.26		
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ _____ 259.56		P/R Deduction (\$28.84 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>133.26</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 42 / 55
	<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. CHARLES STEPHEN HYLE</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2994 COURTLAND BLVD.		<b>Transaction ID: PR5821081272</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 ▼ _____ 972.20	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: PR5823791272</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 ▼ _____ 353.09	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: PR5831771272</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 ▼ _____ 1584.58	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 44 / 55
	<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. ALAN BUFFINGTON</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2969 EATON ROAD		<b>Transaction ID: PR5857521272</b>
City State Zip Code <b>SHAKER HEIGHTS OH 44122-2515</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 80.00
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, APPLICATIONS DEVLPMT	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 ▼ 680.00	

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: PR5864261272</b>
City State Zip Code <b>SHAKER HEIGHTS OH 44122-1854</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 76.92
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, CREDIT PORTFOLIO M	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 ▼ 653.82	

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: PR5870521272</b>
City State Zip Code <b>CLEVELAND OH 44113-5504</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 78.84
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, MARKETING	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 ▼ 670.14	

<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 45 / 55
	<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) ▼ 245.14

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

**Transaction ID:** PR5875781272

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) ▼ 898.96

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

**Transaction ID:** PR5887481272

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 OFFICER III  
ION

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 255.00

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

**Transaction ID:** PR5888801272

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 46 / 55
	<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) CHARLES THORPE MANUEL Mailing Address 64 WEST STREET City BEVERLY State MA Zip Code 01915-2228 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> PR5890191272 Amount of Each Receipt this Period 48.08 P/R Deduction (\$24.04 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 ▼ 408.68		

<b>B.</b> Full Name (Last, First, Middle Initial) DENNIS DARELL EDWARDS Mailing Address 20045 KILLIANS GROVE City STRONGSVILLE State OH Zip Code 44149-0935 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> PR5891891272 Amount of Each Receipt this Period 25.38 P/R Deduction (\$12.69 Bi-Weekly)
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 ▼ 215.73		

<b>C.</b> Full Name (Last, First, Middle Initial) EDWARD B. REILLY Mailing Address 1031 PAXON DR. City BELLBROOK State OH Zip Code 45305-8952 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> PR5894701272 Amount of Each Receipt this Period 51.92 P/R Deduction (\$25.96 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 ▼ 441.32		

<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 47 / 55	
	(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 ▼  
425.00

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

**Transaction ID: PR5903691272**

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) .....	▶	5320.00

**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 48 / 55

<input type="checkbox"/> 21b	<input checked="" 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 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. KeyCorp Advocates Fund-New York</b>		Transaction ID: 4132523 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7	
Mailing Address 127 Public Square		Amount of Each Disbursement this Period 3000.00	
City Cleveland State OH Zip Code 44114-1306	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	

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

**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 49 / 55

<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. Voinovich for Senate</b>		Transaction ID: 4068931 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 7
Mailing Address 1500 West 3rd Street, Suite 120		Amount of Each Disbursement this Period 2500.00
City Cleveland State OH Zip Code 44113		
Purpose of Disbursement	011 Category/ Type	
Candidate Name George Voinovich 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: 2		

Full Name (Last, First, Middle Initial) <b>B. Voinovich for Senate</b>		Transaction ID: 4068937 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 7
Mailing Address 1500 West 3rd Street, Suite 120		Amount of Each Disbursement this Period 2500.00
City Cleveland State OH Zip Code 44113		
Purpose of Disbursement	011 Category/ Type	
Candidate Name George Voinovich Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 2		

Full Name (Last, First, Middle Initial) <b>C. John Bocchieri for U. S. Congress</b>		Transaction ID: 4073115 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address P. O. Box 54		Amount of Each Disbursement this Period 400.00
City New Middletown State OH Zip Code 44442		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Mr. John Bocchieri 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		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5400.00
<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)

PAGE 50 / 55

<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. Friends of Sherrod Brown</b>		<b>Transaction ID:</b> 4128400 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 7
Mailing Address Judy Zamore, Treasurer 22453 Lake Road, Suite C409		Amount of Each Disbursement this Period 1000.00
City Rocky River State OH Zip Code 44116		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Hoyer For Congress</b>		<b>Transaction ID:</b> 4128570 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 7
Mailing Address 7905 Malcolm Road, Suite 102		Amount of Each Disbursement this Period 2000.00
City Clinton State MD Zip Code 20735		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Steny Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Stephanie Tubbs Jones for U.S. Congress Committee</b>		<b>Transaction ID:</b> 4132546 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7
Mailing Address Sandra Draper Berry, Treasurer 3729 Silsby Road		Amount of Each Disbursement this Period 3000.00
City Cleveland State OH Zip Code 44118		
Purpose of Disbursement	011 Category/Type	
Candidate Name Stephanie Jones		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11	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) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	11400.00

**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 51 / 55

<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. Montgomery County Democratic Party</b>		<b>Transaction ID:</b> 4068930 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 7
Mailing Address Mark E. Owens, Treasurer 131 S. Wilkinson Street		Amount of Each Disbursement this Period 600.00
City Dayton State OH Zip Code 45402		
Purpose of Disbursement Candidate Name	011 Category/ Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Citizens for Robinson</b>		<b>Transaction ID:</b> 4070261 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 7
Mailing Address J. B. Hadden, Treasurer 130 Northridge Road		Amount of Each Disbursement this Period -500.00
City Columbus State OH Zip Code 43214		
Purpose of Disbursement Void - Citizens for Robinson Candidate Name David Robinson	011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 22	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. The Don Plusquellic Committee</b>		<b>Transaction ID:</b> 4070556 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 7
Mailing Address Russ Balthis, Treasurer 625 Plainfield Road		Amount of Each Disbursement this Period 300.00
City Akron State OH Zip Code 44312		
Purpose of Disbursement Don Plusquellic, MAYOR OH Candidate Name Don Plusquellic	011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 OH General	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<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)

<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. Ralph Becker-Salt Lake City Mayor</b>		<b>Transaction ID: 4070546</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 7
Mailing Address Steven Borg, Treasurer 145 South 400 East		Amount of Each Disbursement this Period 250.00
City Salt Lake City State UT Zip Code 84110	011 Category/ Type	
Purpose of Disbursement Ralph Becker, LOCAL UT		
Candidate Name Mr. Ralph Becker		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Ralph Becker, LOCAL UT

Full Name (Last, First, Middle Initial) <b>B. Citizens for Longo</b>		<b>Transaction ID: 4073046</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address Steve Tater, Treasurer 11112 Edgepark Drive		Amount of Each Disbursement this Period 280.00
City Garfield Hts. State OH Zip Code 44125	011 Category/ Type	
Purpose of Disbursement Thomas Longo, LOCAL OH		
Candidate Name Thomas Longo		
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) ▼	Thomas Longo, LOCAL OH

Full Name (Last, First, Middle Initial) <b>C. Friends of Timothy J. DeGeeter</b>		<b>Transaction ID: 4073122</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address Shelley Cullins, Treasurer 5580 Ridge Road		Amount of Each Disbursement this Period 200.00
City Parma State OH Zip Code 44129	011 Category/ Type	
Purpose of Disbursement Timothy DeGeeter, STATE HOUSE 15th OH		
Candidate Name Timothy DeGeeter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Timothy DeGeeter, STATE HOUSE 15th OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	730.00
<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)

<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 to Elect Brian G. Williams</b>		Transaction ID: 4073117 Date of Disbursement MM / DD / YYYY 08 / 16 / 2007
Mailing Address Sue Williams, Treasurer 1725 Brookwood Drive		Amount of Each Disbursement this Period 300.00
City Akron State OH Zip Code 44313	011 Category/ Type	
Purpose of Disbursement Brian Williams, STATE HOUSE 41st OH		Brian Williams, STATE HOUSE 41st OH
Candidate Name Brian Williams		
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: 41		

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Niehaus</b>		Transaction ID: 4073118 Date of Disbursement MM / DD / YYYY 08 / 16 / 2007
Mailing Address Emily Niehaus, Treasurer 1131 Little Indian Creek Road		Amount of Each Disbursement this Period 750.00
City New Richmond State OH Zip Code 45157	011 Category/ Type	
Purpose of Disbursement Thomas Niehaus, STATE SENATE OH		Thomas Niehaus, STATE SENATE OH
Candidate Name Thomas Niehaus		
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: 14		

Full Name (Last, First, Middle Initial) <b>C. John A. Donofrio Campaign Committee</b>		Transaction ID: 4128459 Date of Disbursement MM / DD / YYYY 08 / 20 / 2007
Mailing Address Melinda A. Gullace, Treasurer 3842 Dogwood Street, N.W.		Amount of Each Disbursement this Period 240.00
City Uniontown State OH Zip Code 44685	011 Category/ Type	
Purpose of Disbursement John Donofrio, LOCAL OH		John Donofrio, LOCAL OH
Candidate Name John Donofrio		
Office Sought: <input 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1290.00
<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)

<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. The People for Joe Cimperman</b>		Transaction ID: 4128402 Date of Disbursement 08 / 20 / 2007
Mailing Address Genesis Brown, Treasurer 3053 W. 12th Street		Amount of Each Disbursement this Period 500.00
City Cleveland State OH Zip Code 44113	011 Category/ Type  Joe Cimperman, LOCAL OH	
Purpose of Disbursement Joe Cimperman, LOCAL OH		
Candidate Name Joe Cimperman		
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. Ted Strickland for Governor</b>		Transaction ID: 4128418 Date of Disbursement 08 / 20 / 2007
Mailing Address P. O. Box 15055		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215	011 Category/ Type  Ted Strickland, GOVERNOR OH	
Purpose of Disbursement Ted Strickland, GOVERNOR OH		
Candidate Name Ted Strickland		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ohio Democratic Party</b>		Transaction ID: 4128401 Date of Disbursement 08 / 20 / 2007
Mailing Address Chris Redfern, Treasurer 271 East State Street		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43215	011 Category/ Type  Ohio Democratic Party	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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)

<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 Kapszukiewicz</b>		Transaction ID: 4128992 Date of Disbursement 08 / 24 / 2007
Mailing Address Ed Cichy, Treasurer 2536 Meadowwood		Amount of Each Disbursement this Period 500.00
City Toledo State OH Zip Code 43606	011 Category/ Type	
Purpose of Disbursement Wade Kapszukiewicz, LOCAL OH		Wade Kapszukiewicz, LOCAL OH
Candidate Name Wade Kapszukiewicz		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Lance T. Mason</b>		Transaction ID: 4129001 Date of Disbursement 08 / 24 / 2007
Mailing Address Aisha F. Mason, Treasurer 3046 Ashwood Road		Amount of Each Disbursement this Period 500.00
City Cleveland State OH Zip Code 44120	011 Category/ Type	
Purpose of Disbursement Lance Mason, STATE SENATE OH		Lance Mason, STATE SENATE OH
Candidate Name OH Sen. Lance Mason		
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: 25		

Full Name (Last, First, Middle Initial) <b>C. Dann for Ohio</b>		Transaction ID: 4132544 Date of Disbursement 08 / 31 / 2007
Mailing Address Bruce Lev, Treasurer 1179 Academy Drive		Amount of Each Disbursement this Period 250.00
City Youngstown State OH Zip Code 44505	011 Category/ Type	
Purpose of Disbursement Marc Dann, ATTORNEY GENERAL OH		Marc Dann, ATTORNEY GENER- AL OH
Candidate Name Marc Dann		
Office Sought: <input type="checkbox"/> House <input 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6170.00