

# 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-01-27-1816  
 Check if different than previously reported. (ACC)  
Cleveland OH 44114 1306

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 05 01 2009 through 05 31 2009

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 06 10 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		52994.30
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	36759.03									
(c) Total Receipts (from Line 19) .....	23120.71	92722.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	59879.74	145717.24								
7. Total Disbursements (from Line 31) .....	35057.00	120894.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	24822.74	24822.74								
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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	3482.36	5842.56
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	19638.35	81280.38
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	23120.71	87122.94
(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) .....	23120.71	87122.94
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	5600.00
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)) .....	23120.71	92722.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23120.71	92722.94

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	7.00	24.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	7.00	24.50
22. Transfers to Affiliated/Other Party Committees.....	5000.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	9500.00
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.....	30050.00	96370.00
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))..	35057.00	120894.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35057.00	120894.50

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	23120.71	87122.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23120.71	87122.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7.00	24.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7.00	24.50

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 31  
(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

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

NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.**

Full Name (Last, First, Middle Initial)  
JOHN E STINSON

Mailing Address 26245 SEMINARY ROAD

City State Zip Code  
PERRYSBURG OH 43551-6211

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION MGR, CMML BKG REL TEAM

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR10379062974

Amount of Each Receipt this Period  
57.75

P/R Deduction (\$19.25 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
ANTHONY GERARD FINK

Mailing Address 11077 CANARY ISLAND COURT

City State Zip Code  
PLANTATION FL 33324-8202

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION TEAM LDR, IPG

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.97

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR10617072974

Amount of Each Receipt this Period  
57.81

P/R Deduction (\$19.27 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
PATRICIA S MCDONALD

Mailing Address 3706 RIDGEWAY ROAD

City State Zip Code  
DAYTON OH 45419-1127

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION MULTI-MARKET SALES MGR, KPB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 317.35

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR12349942974

Amount of Each Receipt this Period  
86.55

P/R Deduction (\$28.85 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **202.11**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
JOHN BRYAN JENSEN

Mailing Address 6917 CHAFFEE CT

City State Zip Code  
BRECKSVILLE OH 44141-2418

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION ANALYTICS & REPORT MGR., COLL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR12866782974

Amount of Each Receipt this Period 60.00

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

**B.** Full Name (Last, First, Middle Initial)  
HUGH JAMES DONLON

Mailing Address 30 FAIRVIEW DRIVE EAST

City State Zip Code  
BASKING RIDGE NJ 07920-2324

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION REGIONAL PRESIDENT NE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR31131852974

Amount of Each Receipt this Period 150.00

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

**C.** Full Name (Last, First, Middle Initial)  
CINDY P CROTTY

Mailing Address 2905 FAIRMOUNT BLVD

City State Zip Code  
CLEVELAND HEIGHTS OH 44118-4021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION SEGMENT HEAD COMMUNITY BANK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 444.18

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR5398932974

Amount of Each Receipt this Period 121.14

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

**SUBTOTAL** of Receipts This Page (optional) ..... 331.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 8 / 31
	<input checked="" 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) PAUL E HENSON	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 20515 BEACONSFIELD BLVD	<b>Transaction ID:</b> PR5401512974
	City State Zip Code ROCKY RIVER OH 44116-1305	Amount of Each Receipt this Period 64.62
	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR. CREDIT EXECUTIVE - IB	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 ▼ 240.02	

<b>B.</b>	Full Name (Last, First, Middle Initial) RENEE R CSUHRAN	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 4839 SNOW BLOSSOM LANE	<b>Transaction ID:</b> PR5403482974
	City State Zip Code BRECKSVILLE OH 44141-3359	Amount of Each Receipt this Period 77.88
	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR REC CREDIT	P/R Deduction (\$25.96 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.12	

<b>C.</b>	Full Name (Last, First, Middle Initial) LAWRENCE G BABIN	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 28039 RED RAVEN RD	<b>Transaction ID:</b> PR5404672974
	City State Zip Code PEPPER PIKE OH 44124-4551	Amount of Each Receipt this Period 77.88
	FEC ID number of contributing federal political committee. C	
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation CIO LARGE CAP INVESTMENTS	P/R Deduction (\$25.96 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.78	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	220.38
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
LINDA A GRANDSTAFF

Mailing Address 17301 RIVERWAY DRIVE

City State Zip Code  
LAKEWOOD OH 44107-5315

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION CHIEF OPERATIONAL RISK OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.25

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR5405062974

Amount of Each Receipt this Period 67.56

P/R Deduction (\$22.52 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
THOMAS M SPILMAN

Mailing Address 5610 23RD AVE NE

City State Zip Code  
TACOMA WA 98422-1555

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.06

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR5406792974

Amount of Each Receipt this Period 55.38

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

**C.** Full Name (Last, First, Middle Initial)  
BRUCE D MURPHY

Mailing Address 18935 BALLYMORE CIRCLE

City State Zip Code  
STRONGSVILLE OH 44149-0922

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION COMMUNITY DEVELOPMENT BKG EXEC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR5408022974

Amount of Each Receipt this Period 75.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 197.94

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 31
	<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) JAMES A HOFFMAN	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 2660 WESTCHESTER ROAD	<b>Transaction ID:</b> PR5409762974
	City State Zip Code OTTAWA HILLS OH 43615-2242	Amount of Each Receipt this Period 77.88
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.42	P/R Deduction (\$25.96 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL P BARNUM	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 363 WALMAR DRIVE	<b>Transaction ID:</b> PR5410682974
	City State Zip Code BAY VILLAGE OH 44140-1459	Amount of Each Receipt this Period 72.70
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP HEAD I, OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.04	P/R Deduction (\$23.37 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) AMY K CARLSON	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 2884 WOODBURY RD	<b>Transaction ID:</b> PR5412912974
	City State Zip Code SHAKER HEIGHTS OH 44120-2426	Amount of Each Receipt this Period 144.24
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GRP HD, DCM ORIG & STRUCTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.88	P/R Deduction (\$48.08 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>294.82</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 31  
(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
							17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.**

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. **C**

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIR HR RELATIONSHIP MGMT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.76

Date of Receipt 05 / 31 / 2009  
**Transaction ID:** PR5414382974  
 Amount of Each Receipt this Period 52.88  
 P/R Deduction (\$10.13 Bi-Weekly)

**B.**

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 ▼ 213.75

Date of Receipt 05 / 31 / 2009  
**Transaction ID:** PR5415112974  
 Amount of Each Receipt this Period 56.25  
 P/R Deduction (\$22.50 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
RONALD J DUGAS

Mailing Address 5707 WESTMINSTER DRIVE

City SOLON State OH Zip Code 44139-1979

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation CHIEF COMPLIANCE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.47

Date of Receipt 05 / 31 / 2009  
**Transaction ID:** PR5416282974  
 Amount of Each Receipt this Period 62.31  
 P/R Deduction (\$20.77 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 171.44

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 31
	<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 MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 10014 DAY ROAD NE	<b>Transaction ID:</b> PR5419072974
	City State Zip Code BAINBRIDGE ISLAND WA 98110-3306	Amount of Each Receipt this Period 55.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DISTRICT CREDIT OFFICERIII-CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 203.42	P/R Deduction (\$14.91 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) GARY P KOCH	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 5981 SE ARCADIA RD.	<b>Transaction ID:</b> PR5419642974
	City State Zip Code SHELTON WA 98584-8330	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION BUS BNKNG SALES LEADER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHELE A SEYRANIAN	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 24545 SHAKER BLVD.	<b>Transaction ID:</b> PR5420882974
	City State Zip Code BEACHWOOD OH 44122-2349	Amount of Each Receipt this Period 56.49
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP EXECUTIVE - E/C Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 207.13	P/R Deduction (\$18.83 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>171.87</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 31
	<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) THOMAS TULODZIESKI		Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 2865 CARRINGTON ST. N.W.		Transaction ID: PR5425472974
	City NORTH CANTON	State OH	Zip Code 44720-8176
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 58.50
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	P/R Deduction (\$19.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 214.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) CATHY L ROWLEY		Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 434 FOXBOROUGH DR		Transaction ID: PR5425662974
	City BRUNSWICK	State OH	Zip Code 44212-4340
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 54.81
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR HR RELATIONSHIP MGMT	P/R Deduction (\$18.27 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.97	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN R SINNENBERG		Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 23276 LAURELDALE ROAD		Transaction ID: PR5480592974
	City SHAKER HEIGHTS	State OH	Zip Code 44122-2103
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 210.00
	Name of Employer KEY PRINCIPAL PARTNERS CORP	Occupation CHAIRMAN, KEY PRINCIPAL PRTRNR	P/R Deduction (\$70.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 770.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>323.31</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 31  
(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
							17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.**

Full Name (Last, First, Middle Initial)  
EDWARD J BURKE

Mailing Address 429 W. 57TH TERRACE

City State Zip Code  
KANSAS CITY MO 64113-1271

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION HEAD OF REC AND CORP BKG SERV

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 389.69

Date of Receipt: 05 / 31 / 2009  
Transaction ID: PR5662192974  
Amount of Each Receipt this Period: 121.14  
P/R Deduction (\$40.38 Bi-Weekly)

**B.**

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

Mailing Address 540 HAWTHORNE STREET

City State Zip Code  
BIRMINGHAM MI 48009-3715

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIRECTOR, KEYVOLUTION

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 31 / 2009  
Transaction ID: PR5681662974  
Amount of Each Receipt this Period: 75.00  
P/R Deduction (\$25.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
ANDREW J PAINE III

Mailing Address 2501 MARLBORO ROAD

City State Zip Code  
CLEVELAND HEIGHTS OH 44118-4027

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

Name of Employer Occupation  
KEYBANC CAPITAL MARKETS INC. SEGMENT HD, INSTITUTIONAL BKNGB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.09

Date of Receipt: 05 / 31 / 2009  
Transaction ID: PR5688022974  
Amount of Each Receipt this Period: 60.57  
P/R Deduction (\$20.19 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **256.71**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 31
	<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) DAVID A RENTA	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 1712 WRIGHT AVE	<b>Transaction ID:</b> PR5693192974
	City State Zip Code ROCKY RIVER OH 44116-1912	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION SECTOR MGR, FX SALES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) KEN L SCHROEDER	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 25852 W 67TH ST	<b>Transaction ID:</b> PR5696052974
	City State Zip Code SHAWNEE KS 66226-3331	Amount of Each Receipt this Period 72.45
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION INFO SYSTEMS DIVISION MGR III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.65	P/R Deduction (\$24.15 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) MARGOT J COPELAND	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 13900 SHAKER BOULEVARD SUITE 1216	<b>Transaction ID:</b> PR5724832974
	City State Zip Code CLEVELAND OH 44120-1575	Amount of Each Receipt this Period 60.57
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DIRECTOR, CORP CONTR & DIVER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.09	P/R Deduction (\$20.19 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>193.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 31  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) ERSKINE E CADE</p> <p>Mailing Address 701 WEST LAKESIDE AVENUE PH2B</p> <p>City State Zip Code CLEVELAND OH 44113-5519</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DIRECTOR- GOVERNMENT AFFAIRS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">300.41</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2009</span></p> <p><b>Transaction ID:</b> PR5758192974</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">81.93</span></p> <p>P/R Deduction (\$27.31 Bi-Weekly)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) CLARK JONATHAN WULF</p> <p>Mailing Address 1949 BORDEAUX WAY</p> <p>City State Zip Code WESTLAKE OH 44145-3066</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION CORPORATE TAX DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">220.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2009</span></p> <p><b>Transaction ID:</b> PR5801282974</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">60.00</span></p> <p>P/R Deduction (\$20.00 Bi-Weekly)</p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) MARC A VOSEN</p> <p>Mailing Address 32477 SPRINGSIDE LANE</p> <p>City State Zip Code SOLOM OH 44139-2058</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation KEY INVESTMENT SERVICES, LLC PRESIDENT, KIS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">253.88</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2009</span></p> <p><b>Transaction ID:</b> PR5831232974</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">69.24</span></p> <p>P/R Deduction (\$23.08 Bi-Weekly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">211.17</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 31
	<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) STEVE YATES	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 7110 KINSMAN ROAD	<b>Transaction ID:</b> PR5831772974
	City State Zip Code NOVELTY OH 44072-9512	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$105.77 Bi-Weekly)
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP HEAD INFORMATION TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.97	

<b>B.</b>	Full Name (Last, First, Middle Initial) JEFFERY JEROME WEAVER	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 19101 SOUTH PARK BLVD	<b>Transaction ID:</b> PR5864262974
	City State Zip Code SHAKER HEIGHTS OH 44122-1854	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$38.46 Bi-Weekly)
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP HEAD, CREDIT PORTFOLIO M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

<b>C.</b>	Full Name (Last, First, Middle Initial) DEAN ILJASIC	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 3281 ABERDEEN RD.	<b>Transaction ID:</b> PR5870522974
	City State Zip Code SHAKER HEIGHTS OH 44120-3325	Amount of Each Receipt this Period 118.26
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$39.42 Bi-Weekly)
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DIR, CLIENT INSIGHT/PROG MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 433.62	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>508.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 18 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
EDWARD B. REILLY

Mailing Address 1031 PAXON DR.

City State Zip Code  
BELLBROOK OH 45305-8952

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT III

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 285.56

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR5894702974

Amount of Each Receipt this Period  
77.88

P/R Deduction (\$25.96 Bi-Weekly)

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

Mailing Address 4104 NARROW RIDGE DRIVE

City State Zip Code  
AUSTIN TX 78730-3442

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

Name of Employer Occupation  
AUSTIN CAPITAL MANAGEMENT SR MANAGING DIRECTOR CIO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR5903692974

Amount of Each Receipt this Period  
75.00

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

**C.** Full Name (Last, First, Middle Initial)  
STUART WILLIAM PATTISON

Mailing Address 10719 MARCOTT STREET

City State Zip Code  
PARKER CO 80134-7644

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT III

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 215.82

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR5918732974

Amount of Each Receipt this Period  
58.86

P/R Deduction (\$19.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 211.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 31
	(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)  
DEAN ANDREW KONTUL

Mailing Address 37390 BROADSTONE DR

City SOLON State OH Zip Code 44139-5692

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR VIRTUAL DISTRIBUTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR9056882974

Amount of Each Receipt this Period 115.38

P/R Deduction (\$38.46 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
ROBERT SCOTT FREDEY

Mailing Address 3774 CASCADE OAKS TRAIL

City RICHFIELD State OH Zip Code 44286-9168

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIR, NATIONAL COLLCTN/RECVRY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.53

Date of Receipt 05 / 31 / 2009

**Transaction ID:** PR9058202974

Amount of Each Receipt this Period 72.69

P/R Deduction (\$24.23 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>188.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3482.36</b>

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Mike Moran</p> <p>Mailing Address Robert Swedenborg, Treasurer 94 Aurora Street</p> <p>City Hudson State OH Zip Code 44236</p> <p>Purpose of Disbursement Mike Moran, STATE HOUSE 42nd OH</p> <p>Candidate Name OH Rep. Mike Moran</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 42</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844376 <b>Date of Disbursement</b> 05 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>Mike Moran, STATE HOUSE 42nd OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Heard</p> <p>Mailing Address Lillian Gray, Treasurer 87 South Hampton Road</p> <p>City Columbus State OH Zip Code 43213</p> <p>Purpose of Disbursement Tracy Heard, STATE HOUSE 26th OH</p> <p>Candidate Name OH Rep. Tracy Heard</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 26</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844930 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Tracy Heard, STATE HOUSE 26th OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Coughlin for Ohio</p> <p>Mailing Address Robert J. Kollar, Treasurer 2324 Iota Avenue</p> <p>City Cuyahoga Falls State OH Zip Code 44223</p> <p>Purpose of Disbursement Kevin Coughlin, STATE SENATE 27th OH</p> <p>Candidate Name Kevin Coughlin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844936 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Kevin Coughlin, STATE SEN- ATE 27th OH</p>

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

1300.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stebelton for State Representative Committee</p> <p>Mailing Address Linda Sheridan, Treasurer 129 West Chestnut Street</p> <p>City Lancaster State OH Zip Code 43130</p> <p>Purpose of Disbursement Gerald Stebelton, STATE HOUSE 5th OH</p> <p>Candidate Name OH Rep. Gerald Stebelton</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844939 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Gerald Stebelton, STATE HOUSE 5th OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect David Goodman</p> <p>Mailing Address Ben Kanzeg, Treasurer 7250 Talanth Place</p> <p>City New Albany State OH Zip Code 43054</p> <p>Purpose of Disbursement David Goodman, STATE SENATE 3rd OH</p> <p>Candidate Name David Goodman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844943 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>David Goodman, STATE SENATE 3rd OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Stephen Slesnick</p> <p>Mailing Address Matt Gagnon, Treasurer 4725 Greenbriar Square, NE</p> <p>City Canton State OH Zip Code 44714</p> <p>Purpose of Disbursement Stephen Slesnick, STATE HOUSE 52nd OH</p> <p>Candidate Name OH Rep. Stephen Slesnick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 52</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844949 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Stephen Slesnick, STATE HOUSE 52nd OH</p>

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

1000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Sandra Williams</p> <p>Mailing Address Genola Williams, Treasurer 12518 Fairhill Road</p> <p>City Cleveland State OH Zip Code 44120</p> <p>Purpose of Disbursement Sandra Williams, STATE HOUSE 11th OH</p> <p>Candidate Name OH Rep. Sandra Williams</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844950 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Sandra Williams, STATE HO-USE 11th OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Kris Jordan</p> <p>Mailing Address Randy Turner, Treasurer 161 Stonebend Drive</p> <p>City Powell State OH Zip Code 43065</p> <p>Purpose of Disbursement Kris Jordan, STATE HOUSE 2nd OH</p> <p>Candidate Name Kris Jordan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844951 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Kris Jordan, STATE HOUSE 2nd OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Zehringer</p> <p>Mailing Address David Wolters, Treasurer 2191 Oak Street</p> <p>City Maria Stein State OH Zip Code 45860</p> <p>Purpose of Disbursement James Zehringer, STATE HOUSE 77th OH</p> <p>Candidate Name OH Rep. James Zehringer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 77</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7844954 <b>Date of Disbursement</b> 05 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>James Zehringer, STATE HO-USE 77th OH</p>

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

1250.00

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

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

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

FOR LINE NUMBER: (check only one)

<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

A.	Full Name (Last, First, Middle Initial) Friends of Armond Budish	Transaction ID: 7846391 Date of Disbursement 05 / 08 / 2009
	Mailing Address Jennifer Peck, Treasurer 23240 Chagrin Blvd., Bldg. 4, Ste.	Amount of Each Disbursement this Period 7000.00
	City Beachwood State OH Zip Code 44122	
	Purpose of Disbursement Armond Budish, STATE HOUSE 8th OH	011 Category/ Type
	Candidate Name Mr. Armond Budish	
	Office Sought: <input checked="" 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: 08	Armond Budish, STATE HOUSE 8th OH

B.	Full Name (Last, First, Middle Initial) Jason Wilson for Senate Committee	Transaction ID: 7846397 Date of Disbursement 05 / 08 / 2009
	Mailing Address Terry Lee, Treasurer 252 West Main Street	Amount of Each Disbursement this Period 500.00
	City St. Clairsville State OH Zip Code 43950	
	Purpose of Disbursement Jason Wilson, STATE SENATE 30th OH	011 Category/ Type
	Candidate Name OH Sen. Jason Wilson	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District:	Jason Wilson, STATE SENATE 30th OH

C.	Full Name (Last, First, Middle Initial) The Committee to Elect Bill Harris	Transaction ID: 7846920 Date of Disbursement 05 / 08 / 2009
	Mailing Address Jim Hess, Treasurer 1238 Township Road	Amount of Each Disbursement this Period 2500.00
	City Ashland State OH Zip Code 44805	
	Purpose of Disbursement Bill Harris, STATE SENATE 19th OH	011 Category/ Type
	Candidate Name Bill Harris	
	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:	Bill Harris, STATE SENATE 19th OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10000.00
<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Nina Turner</p> <p>Mailing Address Sherlynn Allen-Harris, Treasurer 3718 Blanche Road</p> <p>City Cleveland Heights State OH Zip Code 44118</p> <p>Purpose of Disbursement Nina Turner, STATE SENATE 25th OH</p> <p>Candidate Name OH Sen. Nina Turner</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7847454 <b>Date of Disbursement</b> 05 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Nina Turner, STATE SENATE 25th OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Jarrod B. Martin</p> <p>Mailing Address Ralph C. Harper, Treasurer 2098 Fairknoll Drive</p> <p>City Beavercreek State OH Zip Code 45431</p> <p>Purpose of Disbursement Jarrod Martin, STATE HOUSE 70th OH</p> <p>Candidate Name OH Rep. Jarrod B. Martin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 70</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7847475 <b>Date of Disbursement</b> 05 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Jarrod Martin, STATE HOUSE 70th OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Anthony C. Zielinski</p> <p>Mailing Address Tom Newbould, Treasurer 6211 Manchester Road</p> <p>City Parma State OH Zip Code 44129</p> <p>Purpose of Disbursement Anthony Zielinski, LOCAL OH</p> <p>Candidate Name Anthony Zielinski</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7866283 <b>Date of Disbursement</b> 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Anthony Zielinski, LOCAL OH</p>

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

1500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 25 / 31

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Gary W. Cates</p> <p>Mailing Address Jill Cates, Treasurer 6542 Seminole Drive</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement Gary Cates, STATE SENATE 4th OH</p> <p>Candidate Name Gary Cates</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7866520 <b>Date of Disbursement</b> 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Gary Cates, STATE SENATE 4th OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Chandler</p> <p>Mailing Address Charles Chandler, Treasurer 428 Danel Street</p> <p>City Kent State OH Zip Code 44240</p> <p>Purpose of Disbursement Kathleen Chandler, STATE HOUSE 68th OH</p> <p>Candidate Name Kathleen Chandler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 68</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7866524 <b>Date of Disbursement</b> 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Kathleen Chandler, STATE HOUSE 68th OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Amstutz</p> <p>Mailing Address Dale E. Long, Treasurer 172 South Sunset Drive</p> <p>City Orrville State OH Zip Code 44667</p> <p>Purpose of Disbursement Ron Amstutz, STATE HOUSE 3rd OH</p> <p>Candidate Name Mr. Ron Amstutz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7866528 <b>Date of Disbursement</b> 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Ron Amstutz, STATE HOUSE 3rd OH</p>

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

1650.00

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

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

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

FOR LINE NUMBER: (check only one)

<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

A.	Full Name (Last, First, Middle Initial) Committee to Elect John Adams	Transaction ID: 7867016 Date of Disbursement 05 / 18 / 2009
	Mailing Address Steve Hamby, Treasurer 1509 Bon Air Circle	Amount of Each Disbursement this Period 250.00
	City Sidney State OH Zip Code 45365	
	Purpose of Disbursement John Adams, STATE HOUSE 78th OH	011 Category/ Type
	Candidate Name OH Rep. John Adams	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 78	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		John Adams, STATE HOUSE 78th OH

B.	Full Name (Last, First, Middle Initial) Friends of Tom Patton	Transaction ID: 7867017 Date of Disbursement 05 / 18 / 2009
	Mailing Address John Southworth, Treasurer 17157 Rabbit Run Drive	Amount of Each Disbursement this Period 1000.00
	City Strongsville State OH Zip Code 44136	
	Purpose of Disbursement Thomas Patton, STATE SENATE 24th OH	011 Category/ Type
	Candidate Name OH Sen. Thomas Patton	
	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) ▼
		Thomas Patton, STATE SENA- TE 24th OH

C.	Full Name (Last, First, Middle Initial) Jimmy Stewart for State Senate	Transaction ID: 7867018 Date of Disbursement 05 / 18 / 2009
	Mailing Address Steve Jeffers, Treasurer 1021 Four Mile Creek Road	Amount of Each Disbursement this Period 400.00
	City Coolville State OH Zip Code 45723	
	Purpose of Disbursement Jimmy Stewart, STATE SENATE 20th OH	011 Category/ Type
	Candidate Name Jimmy Stewart	
	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) ▼
		Jimmy Stewart, STATE SENA- TE 20th OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1650.00
<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

**A.** Full Name (Last, First, Middle Initial)  
Idaho Bankers Association-PAC

Mailing Address Dann Justice, Treasurer  
512 West Bannock Street, Suite B

City Boise State ID Zip Code 83702

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

**Transaction ID:** 7870445  
**Date of Disbursement:** 05 / 18 / 2009

Amount of Each Disbursement this Period: 1800.00

011  
Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Committee to Elect Fred Strahorn

Mailing Address Tom Roberts, Treasurer  
531 Belemonte Pike #1001

City Dayton State OH Zip Code 45405

Purpose of Disbursement  
Fred Strahorn, STATE SENATE 5th OH

Candidate Name  
Senator Fred Strahorn

Office Sought:  House  Senate  President  
State: OH District:

Disbursement For: 2010  Primary  General  
 Other (specify) ▼

**Transaction ID:** 7876696  
**Date of Disbursement:** 05 / 21 / 2009

Amount of Each Disbursement this Period: 350.00

011  
Category/Type

Fred Strahorn, STATE SENA-TE 5th OH

**C.** Full Name (Last, First, Middle Initial)  
Friends of Matt Szollosi

Mailing Address Thomas Jaffee, Treasurer  
1660 Grand Bay Drive

City Oregon State OH Zip Code 43616

Purpose of Disbursement  
Matt Szollosi, STATE HOUSE 49th OH

Candidate Name  
OH Rep. Matt Szollosi

Office Sought:  House  Senate  President  
State: OH District: 49

Disbursement For: 2010  Primary  General  
 Other (specify) ▼

**Transaction ID:** 7876697  
**Date of Disbursement:** 05 / 21 / 2009

Amount of Each Disbursement this Period: 1000.00

011  
Category/Type

Matt Szollosi, STATE HOUSE 49th OH

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 3150.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frank G. Jackson for a Better Cleveland</p> <p>Mailing Address Scott Finerman, Treasurer 3029 Prospect Avenue</p> <p>City Cleveland State OH Zip Code 44115</p> <p>Purpose of Disbursement Frank Jackson, LOCAL OH</p> <p>Candidate Name Frank Jackson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7877455 <b>Date of Disbursement</b> 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>Frank Jackson, LOCAL OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Bob Hagan</p> <p>Mailing Address Carol Morris, Treasurer 562 Madera Avenue</p> <p>City Youngstown State OH Zip Code 44504</p> <p>Purpose of Disbursement Robert Hagan, STATE HOUSE 60th OH</p> <p>Candidate Name OH Rep. Robert Hagan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 60</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7877815 <b>Date of Disbursement</b> 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>Robert Hagan, STATE HOUSE 60th OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Wagoner</p> <p>Mailing Address Mark Wagoner, Sr., Treasurer 7445 Airport Highway</p> <p>City Holland State OH Zip Code 43528</p> <p>Purpose of Disbursement Mark Wagoner, STATE SENATE 2nd OH</p> <p>Candidate Name OH Rep. Mark Wagoner, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 7877817 <b>Date of Disbursement</b> 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Mark Wagoner, STATE SENATE 2nd OH</p>

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

2800.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<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

A.	Full Name (Last, First, Middle Initial) Citizens for Carey	Transaction ID: 7877818 Date of Disbursement 05 / 21 / 2009
	Mailing Address Karen Hammond, Treasurer 401 S. Arkansas Avenue	Amount of Each Disbursement this Period 500.00
	City Wellston	State OH
	Zip Code 45692	
	Purpose of Disbursement John Carey, STATE SENATE 17th OH	011 Category/ Type
	Candidate Name John Carey	
	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:	John Carey, STATE SENATE 17th OH

B.	Full Name (Last, First, Middle Initial) Committee to Elect Niehaus	Transaction ID: 7881004 Date of Disbursement 05 / 27 / 2009
	Mailing Address Emily Niehaus, Treasurer 1131 Little Indian Creek Road	Amount of Each Disbursement this Period 2000.00
	City New Richmond	State OH
	Zip Code 45157	
	Purpose of Disbursement Thomas Niehaus, STATE SENATE 14th OH	011 Category/ Type
	Candidate Name Thomas Niehaus	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District:	Thomas Niehaus, STATE SEN- ATE 14th OH

C.	Full Name (Last, First, Middle Initial) Friends of Faber	Transaction ID: 7881189 Date of Disbursement 05 / 27 / 2009
	Mailing Address Dale Schwieterman, Treasurer 7706 State Route 703	Amount of Each Disbursement this Period 1000.00
	City Celina	State OH
	Zip Code 45822	
	Purpose of Disbursement Keith Faber, STATE SENATE 12th OH	011 Category/ Type
	Candidate Name OH Sen. Keith Faber	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District:	Keith Faber, STATE SENATE 12th OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3500.00
<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

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

NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

A.

Full Name (Last, First, Middle Initial)  
Garrison for Ohio

Mailing Address Holly Dexter, Treasurer  
427 Fifth Street

City Marietta State OH Zip Code 45750

Purpose of Disbursement  
Jennifer Garrison, STATE HOUSE 93rd OH

Candidate Name  
Jennifer Garrison

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: OH District: 93

Transaction ID: 7881190  
Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

1000.00

Jennifer Garrison, STATE HOUSE 93rd OH

B.

Full Name (Last, First, Middle Initial)  
Committee to Elect W. Carlton Weddington

Mailing Address Jephtha J. Paul, Treasurer  
85 E. Gay Street, Suite 403

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
W. Carlton Weddington, STATE HOUSE 27th OH

Candidate Name  
Mr. W. Carlton Weddington

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: OH District: 27

Transaction ID: 7881409  
Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

500.00

W. Carlton Weddington, STATE HOUSE 27th OH

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

1500.00

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

29300.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 31

<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

A.

Full Name (Last, First, Middle Initial)  
KeyCorp Advocates Fund-New York

Transaction ID: 7882277

Date of Disbursement

Mailing Address 127 Public Square

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	9

City Cleveland State OH Zip Code 44114-1306

Amount of Each Disbursement this Period

5000.00
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Purpose of Disbursement

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

5000.00
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TOTAL This Period (last page this line number only) ..... ►

5000.00
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