

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
KeyCorp Advocates Fund-Federal Only

ADDRESS (number and street) 127 Public Square
OH-01-27-0200
Cleveland OH 44114-1306

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00399063 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) 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 (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 08 / 01 / 2017 through 08 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Pugliese, Christopher J., , ,
Type or Print Name of Treasurer

Signature of Treasurer Pugliese, Christopher J., , , [Electronically Filed] Date 09 / 12 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal Only

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		52111.16
(b) Cash on Hand at Beginning of Reporting Period.....	47485.41	
(c) Total Receipts (from Line 19)	1830.26	15239.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	49315.67	67350.67
7. Total Disbursements (from Line 31).....	6713.50	24748.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	42602.17	42602.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

KeyCorp Advocates Fund-Federal Only

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1505.66	10740.59
(ii) Unitemized	324.60	4498.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1830.26	15239.51
(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)	1830.26	15239.51
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1830.26	15239.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1830.26	15239.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13.50	48.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13.50	48.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6700.00	24700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6713.50	24748.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6713.50	24748.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	1830.26	15239.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1830.26	15239.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13.50	48.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13.50	48.50

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

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

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

NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal Only

A. Wise, Charles, Burton, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7174 Fox Lake Drive
 City Blacklick State OH Zip Code 43004-9545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) VP, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2017
Transaction ID : PR103774813817
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

B. Henson, Paul, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20515 Beaconsfield Blvd
 City Rocky River State OH Zip Code 44116-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Chief Credit Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.36

Date of Receipt 08 / 31 / 2017
Transaction ID : PR54015113817
 Amount of Each Receipt this Period 46.16
 Memo Item
 P/R Deduction (\$23.08 Bi-Weekly)

C. Schosser, Douglas, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 Burberry Court
 City Avon State OH Zip Code 44011-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyCorp Occupation (for Individual) Corporate Accounting Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 31 / 2017
Transaction ID : PR54023913817
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	203.08
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 7 OF 12
	<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-Federal Only

A. Carlson, Amy, K, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2884 Woodbury Rd

City Shaker Heights	State OH	Zip Code 44120-2426
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBank National Association	Occupation (for Individual) Grp Hd, DCM Orig & Structuring
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
817.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

Transaction ID : PR54129113817

Amount of Each Receipt this Period
96.16

Memo Item

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

B. Chauvette, Derek, William, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18120 Parkland Rd

City Shaker Heights	State OH	Zip Code 44122-3447
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBank National Association	Occupation (for Individual) Head of Public Sector
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1961.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

Transaction ID : PR54372113817

Amount of Each Receipt this Period
230.76

Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

C. Miller, Mitchell, W, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1758 Randolph Road

City Schenectady	State NY	Zip Code 12308-2001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBank National Association	Occupation (for Individual) Director, Public Sector
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
748.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2017

Transaction ID : PR54710813817

Amount of Each Receipt this Period
88.00

Memo Item

P/R Deduction (\$44.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	414.92
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 8 OF 12
	<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-Federal Only

A. Freese, Jeffrey, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 West 19th Street
 City Cleveland State OH Zip Code 44113-3549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.55

Date of Receipt 08 / 31 / 2017
Transaction ID : PR55427513817
 Amount of Each Receipt this Period 42.30
 Memo Item
 P/R Deduction (\$21.15 Bi-Weekly)

B. Clarke, Charles, F Jr, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Grey Fox Run
 City Bentleyville State OH Zip Code 44022-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Regional Sales Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2017
Transaction ID : PR55616813817
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Bi-Weekly)

C. Brennan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Edgewood Drive.
 City Pepper Pike State OH Zip Code 44124-5101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Nat'l Hd, Fix Inc Sls & Trdng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 31 / 2017
Transaction ID : PR55795913817
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	192.30
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 9 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal Only

A. Paine III, Andrew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 Marlboro Road
 City Cleveland Heights State OH Zip Code 44118-4027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Co-Head Corporate Bank
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 31 / 2017
Transaction ID : PR56880213817
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. DeLeone, Lara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 Cheshire Rd
 City Columbus State OH Zip Code 43221-4132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 31 / 2017
Transaction ID : PR57543213817
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. Kozlowski, Sterling, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Marigold Lane
 City Falmouth State ME Zip Code 04105-1289
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Regional Sales Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 31 / 2017
Transaction ID : PR59185413817
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	541.52
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 10 OF 12
(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-Federal Only

A. Wozniak, Walter, Joseph, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1931 Stanford Rd

City Columbus	State OH	Zip Code 43212-1054
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBank National Association	Occupation (for Individual) Director, Public Sector
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
653.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2017

Transaction ID : PR677477613817

Amount of Each Receipt this Period
76.92

Memo Item

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

B. Burleyson, James, Randall, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2271 Stockton Lane

City Aurora	State IL	Zip Code 60502-6962
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBanc Capital Markets Inc.	Occupation (for Individual) Trader Sr, Inst FI
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
653.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2017

Transaction ID : PR796719313817

Amount of Each Receipt this Period
76.92

Memo Item

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

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	153.84
TOTAL This Period (last page this line number only).....	1505.66

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

KeyCorp Advocates Fund-Federal Only

Full Name (Last, First, Middle Initial)

A. Heller for Senate

Mailing Address Chrissie Hastie, Treasurer
P. O. Box 371907

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

Category/
Type

Candidate Name

Heller, Dean, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15050085

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Stivers for Congress

Mailing Address 211 South Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Category/
Type

Candidate Name

Stivers, Steven, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: OH District: 15

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15050086

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Stivers for Congress

Mailing Address 211 South Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Category/
Type

Candidate Name

Stivers, Steven, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15050087

Amount of Each Disbursement this Period

Memo Item

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

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

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NAME OF COMMITTEE (In Full)

KeyCorp Advocates Fund-Federal Only

Full Name (Last, First, Middle Initial)

A. McConnell Senate Committee

Mailing Address Larry J. Steinberg, Treasurer
P. O. Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement

Category/
Type

Candidate Name

McConnell, Mitch, , Sen.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: KY District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15050088

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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