

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

ADDRESS (number and street) 127 Public Square
OH-01-27-0200
Cleveland OH 44114
 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 / 2018 through 08 / 31 / 2018

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, , ,
Type or Print Name of Treasurer

Signature of Treasurer Pugliese, Christopher, , , [Electronically Filed] Date 09 / 18 / 2018

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

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="2018"/>	<input type="text" value="44274.94"/>	<input type="text" value="44274.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="11253.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4928.42"/>	<input type="text" value="20752.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="16182.01"/>	<input type="text" value="65027.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3506.50"/>	<input type="text" value="52352.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12675.51"/>	<input type="text" value="12675.51"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 01 / 2018 To: M M / D D / Y Y Y Y 08 / 31 / 2018

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).....	1418.42	10584.70
(ii) Unitemized	510.00	7167.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1928.42	17752.57
(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)	1928.42	17752.57
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.....	3000.00	3000.00
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)).....▶	4928.42	20752.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4928.42	20752.57

DETAILED SUMMARY PAGE
of Disbursements

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	6.50	32.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6.50	32.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	52300.00
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	19.50
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)) ..	3506.50	52352.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3506.50	52352.00

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)	1928.42	17752.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1928.42	17752.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6.50	32.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6.50	32.50

**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 17
<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-Federal

A. Barry, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Wiltshire Ln
 City Avon State CT Zip Code 06001-3175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Deputy Chief Risk Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 10 / 2018
Transaction ID : 8969234864DF445EA64B
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Barry, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Wiltshire Ln
 City Avon State CT Zip Code 06001-3175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Deputy Chief Risk Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 24 / 2018
Transaction ID : 76B1BDEF0FC341FE9F62
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Belgio, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Bauer Rd
 City Monaca State PA Zip Code 15061-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Sr Learning Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 10 / 2018
Transaction ID : 18EED1261F544541A563
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.38
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 17
<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

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

A. Belgio, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Bauer Rd
 City Monaca State PA Zip Code 15061-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Sr Learning Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 24 / 2018
Transaction ID : 16A7E37273EF420A9412
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Brennan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Edgewood Rd
 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 / 10 / 2018
Transaction ID : 51C7E40846D441BD9121
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Brennan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Edgewood Rd
 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 / 24 / 2018
Transaction ID : 207C30E70FB6464386DD
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	88.46
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 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Burleyson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 Stockton Ln
 City Aurora State IL Zip Code 60502-6962
 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 08 / 10 / 2018
Transaction ID : 92F928119B9542F3939C
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Burleyson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2271 Stockton Ln
 City Aurora State IL Zip Code 60502-6962
 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 08 / 24 / 2018
Transaction ID : B7D2022F167E4BC392D4
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Carlson, Amy, , ,
 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
 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
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 10 / 2018
Transaction ID : F5E31902DA3B4008AFC3
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.38
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 9 OF 17
	<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

A. Carlson, Amy, , ,
 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
 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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 24 / 2018
Transaction ID : B4EAE6ED998743F7A40E
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Chauvette, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18120 Parkland Dr
 City Shaker Heights State OH Zip Code 44122-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1961.46

Date of Receipt 08 / 10 / 2018
Transaction ID : 502383C840F24BA49157
 Amount of Each Receipt this Period 115.38
 Memo Item

C. Chauvette, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18120 Parkland Dr
 City Shaker Heights State OH Zip Code 44122-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1961.46

Date of Receipt 08 / 24 / 2018
Transaction ID : 523FA932DDD448E49060
 Amount of Each Receipt this Period 115.38
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	269.22
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 OF 17
	<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

A. Clarke, Charles, , ,
 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 / 10 / 2018
Transaction ID : 3744E15FF1E340E2BBD0
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Clarke, Charles, , ,
 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 / 24 / 2018
Transaction ID : 825C50480D294B2ABB54
 Amount of Each Receipt this Period 50.00
 Memo Item

C. 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 / 10 / 2018
Transaction ID : 433FFDB7E8C847CDA12E
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	138.46
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 11 OF 17
	<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	<input type="checkbox"/> 17

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

A. 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 / 24 / 2018
Transaction ID : 18A018546B964F939A03
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Freese, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 W 19th St
 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 / 10 / 2018
Transaction ID : 157C3853824D4D0AA5C1
 Amount of Each Receipt this Period 21.15
 Memo Item

C. Freese, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 W 19th St
 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 / 24 / 2018
Transaction ID : 7AB43216EE2A483BB7E4
 Amount of Each Receipt this Period 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.76
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 OF 17
<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

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

A. Henson, Paul, , ,
 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 / 10 / 2018
Transaction ID : 5DEEDED0D33488F8D4E
 Amount of Each Receipt this Period 23.08
 Memo Item

B. Henson, Paul, , ,
 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 / 24 / 2018
Transaction ID : BE8C7B3830F243A1901B
 Amount of Each Receipt this Period 23.08
 Memo Item

C. Moules, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1028 Summerset Dr
 City Pittsburgh State PA Zip Code 15217-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Ldr II - Mkt Pr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 10 / 2018
Transaction ID : 55DDCC3C05714B23A26A
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	84.62
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 13 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Moules, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1028 Summerset Dr
 City Pittsburgh State PA Zip Code 15217-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Ldr II - Mkt Pr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 24 / 2018
Transaction ID : 6835DD3CE67C45EFA667
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Mulvihill, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 Andrew St
 City Manhasset State NY Zip Code 11030-2309
 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 ▼ 850.00

Date of Receipt 08 / 10 / 2018
Transaction ID : 8C04783CAAD14C90B64A
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Mulvihill, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 Andrew St
 City Manhasset State NY Zip Code 11030-2309
 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 ▼ 850.00

Date of Receipt 08 / 24 / 2018
Transaction ID : C9FE5F6AD0C64F219A6D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	138.46
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 14 OF 17
	<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

A. Paine III, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 Marlboro Rd
 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 ▼ 1961.46

Date of Receipt 08 / 10 / 2018
Transaction ID : A19E1A53C68B4ACD9F29
 Amount of Each Receipt this Period 115.38
 Memo Item

B. Paine III, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 Marlboro Rd
 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 ▼ 1961.46

Date of Receipt 08 / 24 / 2018
Transaction ID : 51318E204EF1420AAD3B
 Amount of Each Receipt this Period 115.38
 Memo Item

C. Schosser, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 Burberry Ct
 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 / 10 / 2018
Transaction ID : 3ABFE1C8F406406AB63D
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	269.22
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 OF 17
	<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

A. Schosser, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 Burberry Ct
 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 / 24 / 2018
Transaction ID : FB8282F26E6F477CA433
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Wise, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7174 Fox Lake Dr
 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 / 10 / 2018
Transaction ID : 67973A699D8E4C2CAAE3
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Wise, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7174 Fox Lake Dr
 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 / 24 / 2018
Transaction ID : C3EEB2F2B5F646D7BDA6
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.46
TOTAL This Period (last page this line number only).....	1418.42

**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 16 OF 17
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Balderson For Congress

Mailing Address PO Box 8197

City Zanesville	State OH	Zip Code 43702-8197
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FEC ID number of contributing federal political committee. **C** C00662650

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	13	/	2018

Transaction ID : 080717B9D4631BB0353

Amount of Each Receipt this Period
3000.00

Memo Item
Contribution Refund

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	3000.00

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

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

FOR LINE NUMBER:
(check only one)

<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

A. Bond Dealers Of America Political Action Committee

Full Name (Last, First, Middle Initial)

Mailing Address 21 Dupont Circle, NW
Suite 750

City Washington State DC Zip Code 20036

Purpose of Disbursement 2018 Contribution

Candidate Name **Bond Dealers Of America Political Action Committee**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) Contribution

State: District:

Date of Disbursement 08 / 20 / 2018

FEC Identification Number **C00456699**
Transaction ID : 9CDBCD553E

Amount of Each Disbursement this Period 2500.00

Memo Item

B. Tom Reed For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 10847

City Rochester State NY Zip Code 14610-0847

Purpose of Disbursement 2018 General

Candidate Name **Reed, Thomas, W., , II.**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: NY District: 23

Date of Disbursement 08 / 01 / 2018

FEC Identification Number **C00464032**
Transaction ID : 42ACA1718F1

Amount of Each Disbursement this Period 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	3500.00