

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

KeyCorp Advocates Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="35603.70"/>	<input type="text" value="35603.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33905.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="17328.12"/>	<input type="text" value="40742.45"/>
(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="51233.15"/>	<input type="text" value="76346.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26456.50"/>	<input type="text" value="51569.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24776.65"/>	<input type="text" value="24776.65"/>
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. 06/2004)

Write or Type Committee Name

KeyCorp Advocates Fund

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).....	1606.50	1756.50
(ii) Unitemized	15721.62	38985.95
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17328.12	40742.45
(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)	17328.12	40742.45
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))..... ▶	17328.12	40742.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	17328.12	40742.45

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	19.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6.50	19.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	6000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	19000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	19450.00	26550.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	26456.50	51569.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26456.50	51569.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	17328.12	40742.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17328.12	40742.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6.50	19.50
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	19.50

**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 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. HUGH JAMES DONLON
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 MEEKER RD
 City BASKING RIDGE State NJ Zip Code 07920-2047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation REGIONAL PRESIDENT, KCB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR31131856697
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. JAMES A HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2660 WESTCHESTER ROAD
 City OTTAWA HILLS State OH Zip Code 43615-2242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR5409766697
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$30.00 Bi-Weekly)

C. JOHN M RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8410 BAINBROOK DRIVE
 City CHAGRIN FALLS State OH Zip Code 44023-4802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIR, PORTFOLIO MGMT, KPB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.78

Date of Receipt 03 / 31 / 2013
Transaction ID : PR5415216697
 Amount of Each Receipt this Period 88.62
 P/R Deduction (\$29.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	328.62
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 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. MICHAEL S GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 3 GRAYSTONE ROAD

City CAPE ELIZABETH State ME Zip Code 04107-1642

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SALES MGR, ECP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR5429306697

Amount of Each Receipt this Period 90.00

P/R Deduction (\$30.00 Bi-Weekly)

B. MICHAEL V LUGLI
Full Name (Last, First, Middle Initial)

Mailing Address 638 TREESIDE LANE

City AVON LAKE State OH Zip Code 44012-2751

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation HEALTH CARE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR5437386697

Amount of Each Receipt this Period 225.00

P/R Deduction (\$75.00 Bi-Weekly)

C. DENISE MARCHESE
Full Name (Last, First, Middle Initial)

Mailing Address 5319 MAPLEWOOD CIRCLE

City SHEFFIELD VILLAGE State OH Zip Code 44054-2404

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR IV, FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR5468206697

Amount of Each Receipt this Period 135.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. CHARLES F JR CLARKE		Date of Receipt 03 / 31 / 2013 Transaction ID : PR5561686697
Mailing Address 200 GREY FOX RUN		Amount of Each Receipt this Period 150.00
City BENTLEYVILLE	State OH	Zip Code 44022-3398
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation KNB, CORP CENTER DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. ADAM D WARNER		Date of Receipt 03 / 31 / 2013 Transaction ID : PR5779926697
Mailing Address 4733 RAVEN RUN		Amount of Each Receipt this Period 150.00
City BROOMFIELD	State CO	Zip Code 80023-4636
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation PRESIDENT AND COO, LEASING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. JEFFERY JEROME WEAVER		Date of Receipt 03 / 31 / 2013 Transaction ID : PR5864266697
Mailing Address 19101 SOUTH PARK BLVD		Amount of Each Receipt this Period 115.38
City SHAKER HEIGHTS	State OH	Zip Code 44122-1854
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, CREDIT PORTFOLIO M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	

SUBTOTAL of Receipts This Page (optional).....▶	415.38
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 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. WILLIAM LLOYD HARTMANN
Full Name (Last, First, Middle Initial)
Mailing Address 773 VILLAGE TRAIL
City GATES MILLS State OH Zip Code 44040-9660
FEC ID number of contributing federal political committee. **C**
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation CHIEF RISK OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2013
Transaction ID : PR59606856697
Amount of Each Receipt this Period 150.00
P/R Deduction (\$50.00 Bi-Weekly)

B. MELISSA INGWERSEN
Full Name (Last, First, Middle Initial)
Mailing Address 173 SOUTH PARKVIEW AVE.
City COLUMBUS State OH Zip Code 43209-1647
FEC ID number of contributing federal political committee. **C**
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 343.28

Date of Receipt 03 / 31 / 2013
Transaction ID : PR67428346697
Amount of Each Receipt this Period 147.12
P/R Deduction (\$49.04 Bi-Weekly)

C. DEAN ANDREW KONTUL
Full Name (Last, First, Middle Initial)
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 SPSC, EXECUTIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 269.22

Date of Receipt 03 / 31 / 2013
Transaction ID : PR9056886697
Amount of Each Receipt this Period 115.38
P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	412.50
TOTAL This Period (last page this line number only).....	1606.50

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial)

A. America Works PAC

Mailing Address P. O. Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

America Works PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2013

Transaction ID : 11526233

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of Dave Joyce

Mailing Address 320 Kenarden Drive

City Cleveland State OH Zip Code 44143

Purpose of Disbursement

011

Candidate Name

Mr. David Joyce

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2013

Transaction ID : 11526236

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement

011

Candidate Name

Sen. Mitch McConnell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2013

Transaction ID : 11548376

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

Full Name (Last, First, Middle Initial)

A. Kasich Taylor for Ohio

Mailing Address **Bradley K. Sinnott, Treasurer**
211 South Fifth Street

City **Columbus** State **OH** Zip Code **43215**

Purpose of Disbursement
John Kasich, GOVERNOR OH

Candidate Name
John Kasich

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 11545805

Amount of Each Disbursement this Period

John Kasich, GOVERNOR OH

Full Name (Last, First, Middle Initial)

B. Friends of Faber

Mailing Address **Dale Schwieterman, Treasurer**
7706 State Route 703

City **Celina** State **OH** Zip Code **45822**

Purpose of Disbursement
Keith Faber, STATE SENATE 12th OH

Candidate Name
OH Sen. Keith Faber

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

/ /

Transaction ID : 11545855

Amount of Each Disbursement this Period

Keith Faber, STATE SENATE 12th OH

Full Name (Last, First, Middle Initial)

C. Committee to Elect Richard Adams

Mailing Address **John Brown, Treasurer**
1075 Hillcrest Drive

City **Troy** State **OH** Zip Code **45373**

Purpose of Disbursement
Richard Adams, STATE HOUSE 80th OH

Candidate Name
OH Rep. Richard Adams

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 80

Date of Disbursement

/ /

Transaction ID : 11545856

Amount of Each Disbursement this Period

Richard Adams, STATE HOUSE 80th OH

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial)

A. Citizens for Hottinger

Mailing Address **Larry Wise, Treasurer**
2135 Horns Hill Road

City **Newark** State **OH** Zip Code **43055**

Purpose of Disbursement
Jay Hottinger, STATE HOUSE 71st OH

Candidate Name
OH Rep. Jay Hottinger

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: **OH** District: **71**

Date of Disbursement

/ /

Transaction ID : 11545857

Amount of Each Disbursement this Period

Jay Hottinger, STATE HOUSE 71st OH

B. Committee for Jim Hughes

Mailing Address **Brad Sinnott, Treasurer**
14 E. Gay Street, 2nd Floor

City **Columbus** State **OH** Zip Code **43215**

Purpose of Disbursement
James Hughes, STATE SENATE 16th OH

Candidate Name
James Hughes

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: **OH** District:

Date of Disbursement

/ /

Transaction ID : 11545861

Amount of Each Disbursement this Period

James Hughes, STATE SENATE 16th OH

C. Citizens for Kevin Bacon

Mailing Address **Suzanne Marshall, Treasurer**
5325 Ponderosa Drive

City **Columbus** State **OH** Zip Code **43231**

Purpose of Disbursement
Kevin Bacon, STATE SENATE 3rd OH

Candidate Name
OH Sen. Kevin Bacon

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: **OH** District:

Date of Disbursement

/ /

Transaction ID : 11545862

Amount of Each Disbursement this Period

Kevin Bacon, STATE SENATE 3rd OH

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial)

A. Team Burke

Mailing Address **Michael Rose, Treasurer**
275 West 4th Street

City **Marysville** State **OH** Zip Code **43040**

Purpose of Disbursement
Dave Burke, STATE SENATE 26th OH

Candidate Name
OH Sen. Dave Burke

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: **OH** District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 14 / 2013

Transaction ID : 11545864
Amount of Each Disbursement this Period
500.00

Dave Burke, STATE SENATE 26th OH

Full Name (Last, First, Middle Initial)

B. Friends of John Eklund

Mailing Address **Greg Schmidt, Treasurer**
12040 Burlington Glen Drive

City **Chardon** State **OH** Zip Code **44024**

Purpose of Disbursement
John Eklund, STATE SENATE 18th OH

Candidate Name
OH Sen. John Eklund

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: **OH** District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 14 / 2013

Transaction ID : 11545865
Amount of Each Disbursement this Period
500.00

John Eklund, STATE SENATE 18th OH

Full Name (Last, First, Middle Initial)

C. Butler for Ohio

Mailing Address **Bryan Michael, Treasurer**
2321 Miami Village Drive

City **Miamisburg** State **OH** Zip Code **45342**

Purpose of Disbursement
James Butler, STATE HOUSE 41st OH

Candidate Name
OH Rep. James Butler

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: **OH** District: **41**

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 14 / 2013

Transaction ID : 11545866
Amount of Each Disbursement this Period
500.00

James Butler, STATE HOUSE 41st OH

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

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

1500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial)

A. Hagan for Ohio

Mailing Address 11301 Marlboro Avenue

City Alliance State OH Zip Code 44601

Purpose of Disbursement
Christina Hagan, STATE HOUSE 50th OH

Candidate Name
OH Rep. Christina Hagan

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: OH District: 50

Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 14 / 2013

Transaction ID : 11545868

Amount of Each Disbursement this Period

Christina Hagan, STATE HOUSE 50th OH

B.

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:

Category/
Type

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

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:

Category/
Type

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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