

# 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 06 01 2011 through 06 30 2011

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 Anne M. Feleppelle  
Signature of Treasurer Electronically Filed by Anne M. Feleppelle Date 07 12 2011

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	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		33912.37
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	45323.62									
(c) Total Receipts (from Line 19) .....	14215.96	87588.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	59539.58	121500.58								
7. Total Disbursements (from Line 31) .....	20820.00	82781.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38719.58	38719.58								
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	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	3126.69	8195.86
(ii) Unitemized .....	11089.27	79392.35
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	14215.96	87588.21
(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) .....	14215.96	87588.21
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	14215.96	87588.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14215.96	87588.21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	20.00	81.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	20.00	81.00
22. Transfers to Affiliated/Other Party Committees.....	3000.00	9000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	6000.00	30725.00
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.....	11800.00	42975.00
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))..	20820.00	82781.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20820.00	82781.00

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) .....	14215.96	87588.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14215.96	87588.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20.00	81.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20.00	81.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 29  
(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)  
JEFFREY B WEEDEN

Mailing Address 7580 THISTLE LANE

City State Zip Code  
NOVELTY OH 44072-9500

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

Name of Employer Occupation  
KEYCORP CHIEF FINANCIAL OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2011

**Transaction ID:** 10108374

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL JOSEPH TOTH

Mailing Address 9701 WEATHERTOP LANE

City State Zip Code  
CHAGRIN FALLS OH 44023-5121

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIR, STRATEGY IMPL & INTEG

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.49

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR10380064950

Amount of Each Receipt this Period  
33.46

P/R Deduction (\$16.73 Bi-Weekly)

**C.**

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 ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR12866784950

Amount of Each Receipt this Period  
40.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1073.46**

**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 7 / 29
	<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) HUGH JAMES DONLON	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 55 MEEKER RD	<b>Transaction ID:</b> PR31131854950
	City State Zip Code BASKING RIDGE NJ 07920-2047	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT, KCB	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) WILLIAM CHARLES KUGLER	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 110 EDGEWOOD CT	<b>Transaction ID:</b> PR39386984950
	City State Zip Code CHAGRIN FALLS OH 44022-2564	Amount of Each Receipt this Period 51.92
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF MARKET RISK OFFICER	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 ▼ 337.48	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL W BICKERTON	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 582 LEGENDS ROW	<b>Transaction ID:</b> PR5399754950
	City State Zip Code AVON LAKE OH 44012-2269	Amount of Each Receipt this Period 36.08
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL CREDIT EXEC - CB	P/R Deduction (\$18.04 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>188.00</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 8 / 29  
(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)  
PAUL L MEINERDING

Mailing Address 3927 WINDWARD DRIVE

City State Zip Code  
SYLVANIA OH 43560-9112

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT RETAIL LEADER III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 30 / 2011

**Transaction ID:** PR5403834950

Amount of Each Receipt this Period 36.00

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

**B.**

Full Name (Last, First, Middle Initial)  
ANNETTE M HAZAPIS

Mailing Address 29674 DEVONSHIRE OVAL

City State Zip Code  
WESTLAKE OH 44145-3893

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIR, CLIENT EXPERIENCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt 06 / 30 / 2011

**Transaction ID:** PR5404594950

Amount of Each Receipt this Period 38.48

P/R Deduction (\$19.24 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
CONSTANCE F PAGE

Mailing Address 2811 CHATEAU CIRCLE

City State Zip Code  
COLUMBUS OH 43221-2553

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION RELATIONSHIP MGR III, KPB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2011

**Transaction ID:** PR5404664950

Amount of Each Receipt this Period 40.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 114.48

**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 / 29
	<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) LINDA A GRANDSTAFF		Date of Receipt
	Mailing Address 17301 RIVERWAY DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2011
	City	State	Zip Code
	LAKEWOOD	OH	44107-5315
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: PR5405064950
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation CHIEF OPERATIONAL RISK OFFICER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 616.20	94.80
			P/R Deduction (\$47.40 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) JOSEPH E MCGRAW		Date of Receipt
	Mailing Address 2305 S. MAIN		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2011
	City	State	Zip Code
	GOSHEN	IN	46526-5225
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: PR5406014950
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation DISTRICT CREDIT OFFICERIII-CB	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 203.52	22.95
			P/R Deduction (\$17.65 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) THOMAS M SPILMAN		Date of Receipt
	Mailing Address 5610 23RD AVE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 30 / 2011
	City	State	Zip Code
	TACOMA	WA	98422-1555
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: PR5406794950
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation DISTRICT PRESIDENT III	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.98	36.92
			P/R Deduction (\$18.46 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>154.67</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 10 / 29  
(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)  
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 ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5408024950

Amount of Each Receipt this Period 50.00

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

**B.**

Full Name (Last, First, Middle Initial)  
CLINTON L WEDDELL

Mailing Address 1116 FOREST ROAD

City State Zip Code  
LAKEWOOD OH 44107-1043

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION SECTOR CREDIT EXECUTIVE - IB

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.94

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5408884950

Amount of Each Receipt this Period 35.08

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

**C.**

Full Name (Last, First, Middle Initial)  
JAMES A HOFFMAN

Mailing Address 2660 WESTCHESTER ROAD

City State Zip Code  
OTTAWA HILLS OH 43615-2242

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT III

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 345.02

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5409764950

Amount of Each Receipt this Period 53.08

P/R Deduction (\$26.54 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **138.16**

**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 / 29
	<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) MICHAEL P BARNUM	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 363 WALMAR DRIVE	<b>Transaction ID:</b> PR5410684950
	City State Zip Code BAY VILLAGE OH 44140-1459	Amount of Each Receipt this Period 58.26
	FEC ID number of contributing federal political committee. C	
	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 ▼ 378.69	P/R Deduction (\$29.13 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) WILLIAM J BLAKE	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 3404 ORCHESTRA STREET	<b>Transaction ID:</b> PR5411984950
	City State Zip Code CUYAHOGA FALLS OH 44223-3556	Amount of Each Receipt this Period 36.69
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DEPUTY GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 234.85	P/R Deduction (\$17.82 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) DONALD P HENDERSON	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 17441 LAKESEDGE TRAIL	<b>Transaction ID:</b> PR5412344950
	City State Zip Code CHAGRIN FALLS OH 44023-2118	Amount of Each Receipt this Period 32.89
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION AVIATION DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 209.46	P/R Deduction (\$17.31 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	127.84
<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 12 / 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD E MCERLEANJR	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 7511 LASCALA DRIVE	<b>Transaction ID:</b> PR5412934950
	City State Zip Code HUDSON OH 44236-1845	Amount of Each Receipt this Period 34.38
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$17.19 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICERIII-CB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.47	

<b>B.</b>	Full Name (Last, First, Middle Initial) KAREN BLUE	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 1800 HALLS CARRIAGE PATH	<b>Transaction ID:</b> PR5414384950
	City State Zip Code WESTLAKE OH 44145-2031	Amount of Each Receipt this Period 46.16
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$23.08 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR HR RELATIONSHIP MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.04	

<b>C.</b>	Full Name (Last, First, Middle Initial) KARL G GRUNAWALT	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 14730 RINDLEWOOD LANE	<b>Transaction ID:</b> PR5415114950
	City State Zip Code NOVELTY OH 44072-9590	Amount of Each Receipt this Period 45.58
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$22.79 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CORP BANK CREDIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.27	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>126.12</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 / 29
	<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) JOHN M RYAN	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 8410 BAINBROOK DRIVE	<b>Transaction ID:</b> PR5415214950
	City State Zip Code CHAGRIN FALLS OH 44023-4802	Amount of Each Receipt this Period 59.08
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGING DIR, CHIEF INVESTMENT	P/R Deduction (\$29.54 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.02	

<b>B.</b>	Full Name (Last, First, Middle Initial) DONALD F STAWOWY	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 20681 DONEGAL LN	<b>Transaction ID:</b> PR5415534950
	City State Zip Code STRONGSVILLE OH 44149-0982	Amount of Each Receipt this Period 36.46
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCE DIRECTOR 3	P/R Deduction (\$18.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.99	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHELE A SEYRANIAN	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 24545 SHAKER BLVD.	<b>Transaction ID:</b> PR5420884950
	City State Zip Code BEACHWOOD OH 44122-2349	Amount of Each Receipt this Period 37.66
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP EXECUTIVE - E/C	P/R Deduction (\$18.83 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.79	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>133.20</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 14 / 29
	<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) THOMAS TULODZIESKI	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 2865 CARRINGTON ST. N.W.	<b>Transaction ID:</b> PR5425474950
	City State Zip Code NORTH CANTON OH 44720-8176	Amount of Each Receipt this Period 39.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT, KCB	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 ▼ 253.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) CATHY L ROWLEY	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 434 FOXBOROUGH DR	<b>Transaction ID:</b> PR5425664950
	City State Zip Code BRUNSWICK OH 44212-4340	Amount of Each Receipt this Period 36.54
	FEC ID number of contributing federal political committee. <b>C</b>	
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 ▼ 237.51	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL S GORDON	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 3 GRAYSTONE ROAD	<b>Transaction ID:</b> PR5429304950
	City State Zip Code CAPE ELIZABETH ME 04107-1642	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SALES MGR, GLOBAL TREASURY MGM	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>115.54</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 15 / 29
	<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) MICHAEL V LUGLI	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 638 TREESIDE LANE	<b>Transaction ID:</b> PR5437384950
	City AVON LAKE State OH Zip Code 44012-2751	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation LOAN WORKOUT SR MGR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	P/R Deduction (\$75.00 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) DENISE MARCHESE	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 5319 MAPLEWOOD CIRCLE	<b>Transaction ID:</b> PR5468204950
	City SHEFFIELD VILLAGE State OH Zip Code 44054-2404	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR IV, FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	P/R Deduction (\$35.00 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN R SINNENBERG	Date of Receipt MM / DD / YYYY 06 / 30 / 2011
	Mailing Address 23276 LAURELDALE ROAD	<b>Transaction ID:</b> PR5480594950
	City SHAKER HEIGHTS State OH Zip Code 44122-2103	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer KEY PRINCIPAL PARTNERS CORP	Occupation CHAIRMAN, KEY PRINCIPAL PRTRNR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	P/R Deduction (\$70.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>290.00</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 / 29

(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)  
KEVIN P VON BUSCH

Mailing Address 22 ASTOR PLACE

City State Zip Code  
ROCKY RIVER OH 44116-1545

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIR. LENDING, KPB

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.27

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5573834950

Amount of Each Receipt this Period

39.46

P/R Deduction (\$20.77 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER A OHMACHT

Mailing Address 711 SMOKE HOLLOW TRAIL

City State Zip Code  
FRANKLIN LAKES NJ 07417-1719

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

Name of Employer Occupation  
KEY ASSET MANAGEMENT, INC. CO-CHIEF EXEC OFFICER, VCM

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5637094950

Amount of Each Receipt this Period

40.00

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

**C.**

Full Name (Last, First, Middle Initial)  
JONATHAN O CRANE

Mailing Address 7658 WOODSPRING LANE

City State Zip Code  
HUDSON OH 44236-1857

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

Name of Employer Occupation  
KEY CAPITAL MARKETS, INC MD, INSTITUTIONAL BKNG

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.03

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5669204950

Amount of Each Receipt this Period

34.62

P/R Deduction (\$17.31 Bi-Weekly)

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

114.08

**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: PAGE 17 / 29  
(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)  
WILLIAM R KOEHLER

Mailing Address 525 BLOOMFIELD COURT

City BIRMINGHAM State MI Zip Code 48009-3876

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PRESIDENT KEY COMMUNITY BANK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2011  
Transaction ID: PR5681664950  
Amount of Each Receipt this Period 50.00  
P/R Deduction (\$25.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
DAVID A RENTA

Mailing Address 1712 WRIGHT AVE

City ROCKY RIVER State OH Zip Code 44116-1912

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SALES REP SR, FX

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2011  
Transaction ID: PR5693194950  
Amount of Each Receipt this Period 40.00  
P/R Deduction (\$20.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
MARGOT J COPELAND

Mailing Address 13900 SHAKER BOULEVARD SUITE 1216

City CLEVELAND State OH Zip Code 44120-1575

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, CORP CONTR & DIVER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.47

Date of Receipt 06 / 30 / 2011  
Transaction ID: PR5724834950  
Amount of Each Receipt this Period 40.38  
P/R Deduction (\$20.19 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 130.38

**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: PAGE 18 / 29

(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)  
BRIAN K RICE

Mailing Address 7770 SW FAIRMOOR ST

City State Zip Code  
PORTLAND OR 97225-2744

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) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5768664950

Amount of Each Receipt this Period

50.00

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

**B.**

Full Name (Last, First, Middle Initial)  
CLARK JONATHAN WULF

Mailing Address 1949 BORDEAUX WAY

City State Zip Code  
WESTLAKE OH 44145-3066

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION CORPORATE TAX DIRECTOR

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5801284950

Amount of Each Receipt this Period

40.00

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

**C.**

Full Name (Last, First, Middle Initial)  
MARC A VOSEN

Mailing Address 32477 SPRINGSIDE LANE

City State Zip Code  
SOLON OH 44139-2058

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

Name of Employer Occupation  
KEY INVESTMENT SERVICES, LLC PRESIDENT, KIS

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.04

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: PR5831234950

Amount of Each Receipt this Period

46.16

P/R Deduction (\$23.08 Bi-Weekly)

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

136.16

**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 / 29  
(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)  
JEFFERY JEROME WEAVER

Mailing Address 19101 SOUTH PARK BLVD

City State Zip Code  
SHAKER HEIGHTS OH 44122-1854

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION GROUP HEAD, CREDIT PORTFOLIO M

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 499.98

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5864264950

Amount of Each Receipt this Period  
76.92

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

**B.**

Full Name (Last, First, Middle Initial)  
DEAN ILJASIC

Mailing Address 1852 COLTMAN RD.

City State Zip Code  
CLEVELAND OH 44106-1916

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION DIR, SEG STRATEGY/CLNT INSIGHT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 512.46

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5870524950

Amount of Each Receipt this Period  
78.84

P/R Deduction (\$39.42 Bi-Weekly)

**C.**

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) ▼ 337.48

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2011

**Transaction ID:** PR5894704950

Amount of Each Receipt this Period  
51.92

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **207.68**

**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 20 / 29	
	(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"/> 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) DEAN ANDREW KONTUL		Date of Receipt		
	Mailing Address 37390 BROADSTONE DR		M M / D D / Y Y Y Y 06 / 30 / 2011		
	City SOLOON	State OH	Zip Code 44139-5692	<b>Transaction ID:</b> PR9056884950	
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92		
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR VIRTUAL DISTRIBUTION	P/R Deduction (\$38.46 Bi-Weekly)		

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	76.92
<b>TOTAL</b> This Period (last page this line number only) .....	3126.69

# 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 21 / 29

<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)  
Ohio House Republican Organizational Committee

Mailing Address Matt Huffman, Chair  
4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 10055229

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

500.00

011  
Category/  
Type

**B.** 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: 2012  Primary  General  Other (specify) ▼

Transaction ID: 10055230

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

350.00

011  
Category/  
Type

Matt Szollosi, STATE HOUSE  
49th OH

**C.** Full Name (Last, First, Middle Initial)  
Batchelder for Representative Committee

Mailing Address Homer Davis, Treasurer  
4086 Irvine Oval

City Medina State OH Zip Code 44256

Purpose of Disbursement  
William Batchelder, STATE HOUSE 69th OH

Candidate Name  
William Batchelder

Office Sought:  House  Senate  President

State: OH District: 69

Disbursement For: 2012  Primary  General  Other (specify) ▼

Transaction ID: 10064830

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

William Batchelder, STATE  
HOUSE 69th OH

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

1850.00

**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)

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<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) Republican Senate Campaign Committee</p> <p>Mailing Address J. Matthew Yuskewich, Treasurer 4679 Winterset Drive</p> <p>City Columbus State OH Zip Code 43220</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10064831 <b>Date of Disbursement</b> 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kathleen Clyde Committee</p> <p>Mailing Address Linda Fankhauser, Treasurer 1641 Overlook Road</p> <p>City Kent State OH Zip Code 44240</p> <p>Purpose of Disbursement Kathleen Clyde, STATE HOUSE 68th OH</p> <p>Candidate Name OH Rep. Kathleen Clyde</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10065859 <b>Date of Disbursement</b> 06 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>Kathleen Clyde, STATE HOUSE 68th OH</p>
<p><b>C.</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 SENATE 19th OH</p> <p>Candidate Name Kris Jordan</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10065864 <b>Date of Disbursement</b> 06 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>011 Category/ Type</p> <p>Kris Jordan, STATE SENATE 19th OH</p>

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

3100.00

**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)

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<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 Faber	Transaction ID: 10088670 Date of Disbursement 06 / 16 / 2011
	Mailing Address Dale Schwieterman, Treasurer 7706 State Route 703	Amount of Each Disbursement this Period 500.00
	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 State: OH District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Keith Faber, STATE SENATE 12th OH

B.	Full Name (Last, First, Middle Initial) Sykes for Office	Transaction ID: 10088682 Date of Disbursement 06 / 16 / 2011
	Mailing Address Louise Gissendaner, Treasurer 133 Furnace Run Drive	Amount of Each Disbursement this Period 500.00
	City Akron State OH Zip Code 44307	
	Purpose of Disbursement Vernon Sykes, STATE HOUSE 44th OH	011 Category/ Type
	Candidate Name Vernon Sykes	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 44	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Vernon Sykes, STATE HOUSE 44th OH

C.	Full Name (Last, First, Middle Initial) Committee to Elect Niehaus	Transaction ID: 10089263 Date of Disbursement 06 / 16 / 2011
	Mailing Address Emily Niehaus, Treasurer 1131 Little Indian Creek Road	Amount of Each Disbursement this Period 1000.00
	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 State: OH District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Thomas Niehaus, STATE SEN- ATE 14th OH

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<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)

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<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 John E. Barnes, Jr.</p> <p>Mailing Address Richard Drucker, Esq., Treasurer The Hoyt Block-Suite 214, 700 West</p> <p>City Cleveland State OH Zip Code 44114</p> <p>Purpose of Disbursement John Barnes, STATE HOUSE 12th OH</p> <p>Candidate Name John Barnes</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12</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> 10095982 <b>Date of Disbursement</b> 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>John Barnes, STATE HOUSE 12th OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Patmon</p> <p>Mailing Address Willie Marrow, Treasurer 867 East Boulevard</p> <p>City Cleveland State OH Zip Code 44108</p> <p>Purpose of Disbursement Bill Patmon, STATE HOUSE 10th OH</p> <p>Candidate Name OH Rep. Bill Patmon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 10</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> 10095986 <b>Date of Disbursement</b> 06 / 20 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Bill Patmon, STATE HOUSE 10th OH</p>
<p><b>C.</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: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10096215 <b>Date of Disbursement</b> 06 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Frank Jackson, LOCAL OH</p>

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

2500.00

**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)

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<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 Greg Hartmann

Mailing Address 3536 Edwards Road, Suite 201

City State Zip Code  
Cincinnati OH 45208

Purpose of Disbursement  
Greg Hartmann, LOCAL OH

Candidate Name  
Mr. Greg Hartmann

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10097375  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Greg Hartmann, LOCAL OH

B.

Full Name (Last, First, Middle Initial)  
Mecklenborg for State Representative

Mailing Address James D. Krause, Treasurer  
6648 Pownerfarm Drive

City State Zip Code  
Cincinnati OH 45248

Purpose of Disbursement  
Robert Mecklenborg, STATE HOUSE 30th OH

Candidate Name  
Mr. Robert Mecklenborg

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 30

Transaction ID: 10098007  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Robert Mecklenborg, STATE HOUSE 30th OH

C.

Full Name (Last, First, Middle Initial)  
Citizens for Mike Dovilla

Mailing Address Heather Tenney, Treasurer  
62 Harnagy Street

City State Zip Code  
Berea OH 44017

Purpose of Disbursement  
Mike Dovilla, STATE HOUSE 18th OH

Candidate Name  
OH Rep. Mike Dovilla

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 18

Transaction ID: 10098008  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Mike Dovilla, STATE HOUSE 18th 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)

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<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 Cheryl Grossman

Transaction ID: 10098017

Date of Disbursement

Mailing Address Larry Earman, CPA, Treasurer  
3955 Brown Park Drive, Suite A

/   /

City Hilliard State OH Zip Code 43206

Amount of Each Disbursement this Period

Purpose of Disbursement  
Cheryl Grossman, STATE HOUSE 23rd OH

Category/  
Type

Candidate Name  
Ms. Cheryl Grossman

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 23

Cheryl Grossman, STATE HO-  
USE 23rd 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)  
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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

<b>A.</b> Full Name (Last, First, Middle Initial) LaTourette for Congress <hr/> Mailing Address Scott E. Coleman, Treasurer 320 Kenarden Drive <hr/> City Highland Heights State OH Zip Code 44143 <hr/> Purpose of Disbursement <hr/> Candidate Name Steven LaTourette <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10065851 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011

<b>B.</b> Full Name (Last, First, Middle Initial) Latta for Congress <hr/> Mailing Address 300 North Main Street <hr/> City Bowling Green State OH Zip Code 43402 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Robert Latta <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10096823 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011

<b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Josh Mandel <hr/> Mailing Address 50 West Broad Street, Suite 1900 <hr/> City Columbus State OH Zip Code 43215 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Josh Mandel <hr/> 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) ▼	Transaction ID: 10100326 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6000.00

**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 29 / 29

<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

Mailing Address 127 Public Square

City Cleveland State OH Zip Code 44114-1306

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 10066323

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	1

Amount of Each Disbursement this Period

3000.00
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011
Category/ Type

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

3000.00
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TOTAL This Period (last page this line number only) ..... ►

3000.00
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