

# 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-Federal Only

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** 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 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 (12S)  
Election on 10 15 2010 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 10 01 2010 through 10 13 2010

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 10 15 2010

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-Federal Only

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		15953.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	10551.48									
(c) Total Receipts (from Line 19) .....	567.04	10682.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	11118.52	26636.02								
7. Total Disbursements (from Line 31) .....	1000.00	16517.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10118.52	10118.52								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal Only

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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) .....	462.04	6244.15
(ii) Unitemized .....	105.00	4438.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	567.04	10682.76
(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) .....	567.04	10682.76
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)) .....	567.04	10682.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	567.04	10682.76

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	17.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	17.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	16500.00
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.....	0.00	0.00
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))..	1000.00	16517.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	16517.50

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	567.04	10682.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	567.04	10682.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	17.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	17.50

**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 / 11
	<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 Only

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD W OWENS		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 560 BEACON HILL DRIVE		Transaction ID: PR5399144274
	City CHAGRIN FALLS	State OH	Zip Code 44022-2186
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.26
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, BANK CAPITAL MKTS	P/R Deduction (\$43.26 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 865.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) JEFFREY M SPETRINO		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 4506 GLEN EAGLE DRIVE		Transaction ID: PR5405134274
	City BRECKSVILLE	State OH	Zip Code 44141-2934
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR. PORT. MGR, PUBL. SECTOR	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) AMY K CARLSON		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 2884 WOODBURY RD		Transaction ID: PR5412914274
	City SHAKER HEIGHTS	State OH	Zip Code 44120-2426
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.08
	Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GRP HD, DCM ORIG & STRUCTURING	P/R Deduction (\$48.08 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 961.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	116.34
<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 7 / 11  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund-Federal Only

**A.**

Full Name (Last, First, Middle Initial)  
HELEN W FRANCE

Mailing Address 124 HASKELL DRIVE

City State Zip Code  
BRATENAHL OH 44108-1157

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

Name of Employer  
KEYBANK NATIONAL ASSOCIATION

Occupation  
MD, INSTITUTIONAL BKNG

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
383.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** PR5425434274

Amount of Each Receipt this Period  
20.19

P/R Deduction (\$20.19 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
MITCHELL W MILLER

Mailing Address 1758 RANDOLPH ROAD

City State Zip Code  
SCHENECTADY NY 12308-2020

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

Name of Employer  
KEYBANK NATIONAL ASSOCIATION

Occupation  
REGIONAL MGR - PUBLIC SECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** PR5471084274

Amount of Each Receipt this Period  
25.00

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

**C.**

Full Name (Last, First, Middle Initial)  
PAMELA A CARSON

Mailing Address 17431 FISH CREEK TRAIL

City State Zip Code  
CHAGRIN FALLS OH 44023-2126

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

Name of Employer  
KEYBANK NATIONAL ASSOCIATION

Occupation  
GROUP HEAD, GLOBAL TREASURY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
484.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** PR5500434274

Amount of Each Receipt this Period  
24.23

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

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **69.42**

**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 8 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) JEFFREY S FREESE</p> <p>Mailing Address 20505 BRADGATE LANE</p> <p>City State Zip Code STRONGSVILLE OH 44149-6779</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer KEYBANC CAPITAL MARKETS INC.</p> <p>Occupation LDR, PUBLIC FINANCE</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">423.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> PR5542754274</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">21.15</span></p> <p>P/R Deduction (\$21.15 Bi-Weekly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) BRIAN BRENNAN</p> <p>Mailing Address 2961 EDGEWOOD DRIVE.</p> <p>City State Zip Code PEPPER PIKE OH 44124-5101</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer KEYBANC CAPITAL MARKETS INC.</p> <p>Occupation NAT'L HD, FIX INC SLS &amp; TRDNG</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> PR5579594274</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p> <p>P/R Deduction (\$50.00 Bi-Weekly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) KIM S MONSON</p> <p>Mailing Address 205 290TH AVE SE</p> <p>City State Zip Code FALL CITY WA 98024-7405</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer KEYBANK NATIONAL ASSOCIATION</p> <p>Occupation TEAM LDR, PUBLIC SEC</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">230.60</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> PR5625234274</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">11.53</span></p> <p>P/R Deduction (\$11.53 Bi-Weekly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">82.68</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) EDWARD J BURKE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 2720 WICKLOW ROAD	<b>Transaction ID:</b> PR5662194274
	City State Zip Code SHAKER HEIGHTS OH 44120-1336	Amount of Each Receipt this Period 96.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION HEAD OF REC AND CORP BKG SERV Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 961.50	P/R Deduction (\$96.15 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) PATRICIA J JAMIESON	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 412 SOUTH STONEHAVEN DRIVE	<b>Transaction ID:</b> PR5679034274
	City State Zip Code HIGHLAND HTS OH 44143-3633	Amount of Each Receipt this Period 46.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION DIRECTOR IV, FINANCE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 923.00	P/R Deduction (\$46.15 Bi-Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) LARA DELEONE	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 1 0
	Mailing Address 2237 OXFORD ROAD	<b>Transaction ID:</b> PR5754324274
	City State Zip Code COLUMBUS OH 43221-4008	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION TEAM LDR, PUBLIC SEC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	P/R Deduction (\$15.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>157.30</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 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
GERHARD OLIVER VOGGEL

Mailing Address 450 TRILLIUM WOODS LANE

City State Zip Code  
TULLY NY 13159-9406

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

Name of Employer Occupation  
KEYBANK NATIONAL ASSOCIATION TEAM LDR, PUBLIC SEC

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 226.00

Date of Receipt  
MM / DD / YYYY  
10 / 13 / 2010

**Transaction ID:** PR5785304274

Amount of Each Receipt this Period  
11.30

P/R Deduction (\$11.30 Bi-Weekly)

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

Mailing Address 32477 SPRINGSIDE LANE

City State Zip Code  
SOLOH 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) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 13 / 2010

**Transaction ID:** PR5831234274

Amount of Each Receipt this Period  
25.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **36.30**

**TOTAL** This Period (last page this line number only) ..... ► **462.04**

**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 11 / 11

<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-Federal Only

A.

Full Name (Last, First, Middle Initial)  
Latta for Congress

Mailing Address 300 North Main Street

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement

Candidate Name  
Mr. Robert Latta

Office Sought:  House  
 Senate  
 President  
State: OH District: 05

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 9561761  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00