

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

KeyCorp Advocates Fund

ADDRESS (number and street) 127 Public Square

OH-01-27-1816 Cleveland OH 44114-1306

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00073155

3. IS THIS REPORT NEW (N) OR AMENDED (A)  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [03] / [01] / [2012] through [03] / [31] / [2012]

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 Anne M. Feleppelle [Electronically Filed] Date 08 / 09 / 2012

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									
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**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="2012"/>		60592.52
(b) Cash on Hand at Beginning of Reporting Period.....	64218.04	
(c) Total Receipts (from Line 19) .....	19694.63	47281.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	83912.67	107873.67
7. Total Disbursements (from Line 31).....	13505.50	37466.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	70407.17	70407.17
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:  /  /  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).....	1680.60	2485.60
(ii) Unitemized .....	18014.03	44445.55
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19694.63	46931.15
(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) .....	19694.63	46931.15
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	350.00
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))..... ▶	19694.63	47281.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19694.63	47281.15

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	5.50	16.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5.50	16.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	6000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6750.00	16750.00
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 .....	6750.00	14700.00
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)) ..	13505.50	37466.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13505.50	37466.50

**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) .....	19694.63	46931.15
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19694.63	46931.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5.50	16.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.50	16.50

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

The Vocus application was reporting refunds of contributions from state entities on line 16 instead of line 17.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 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. 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 / 2012  
**Transaction ID : PR31131855567**

Amount of Each Receipt this Period 150.00

P/R Deduction (\$50.00 Bi-Weekly)

**B. THOMAS C STEVENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 19800 SHAKER BOULEVARD

City SHAKER HEIGHTS State OH Zip Code 44122-1869

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

Name of Employer KEYCORP Occupation VICE CHAIR & CAO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR5396275567**

Amount of Each Receipt this Period 30.00

P/R Deduction (\$10.00 Bi-Weekly)

**C. 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 / 2012  
**Transaction ID : PR5409765567**

Amount of Each Receipt this Period 90.00

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

**SUBTOTAL** of Receipts This Page (optional).....▶ 270.00

**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:	PAGE 8 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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 P BARNUM**  
Full Name (Last, First, Middle Initial)

Mailing Address 363 WALMAR DRIVE

City BAY VILLAGE State OH Zip Code 44140-1459

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation GROUP HEAD I, OPERATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.91

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR5410685567**

Amount of Each Receipt this Period 87.39

P/R Deduction (\$29.13 Bi-Weekly)

**B. 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 MANAGING DIR, CHIEF INVESTMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.78

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR5415215567**

Amount of Each Receipt this Period 88.62

P/R Deduction (\$29.54 Bi-Weekly)

**C. 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, GLOBAL TREASURY MGM

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR5429305567**

Amount of Each Receipt this Period 90.00

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

**SUBTOTAL** of Receipts This Page (optional).....▶ 266.01

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

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

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

FOR LINE NUMBER: PAGE 9 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**KeyCorp Advocates Fund**

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

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  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : PR5437385567**

Amount of Each Receipt this Period  
**225.00**

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

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

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  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : PR5468205567**

Amount of Each Receipt this Period  
**135.00**

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

Full Name (Last, First, Middle Initial)  
**C. JEFFERY JEROME WEAVER**

Mailing Address **19101 SOUTH PARK BLVD**

City **SHAKER HEIGHTS** State **OH** Zip Code **44122-1854**

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **269.22**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : PR5864265567**

Amount of Each Receipt this Period  
**115.38**

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **475.38**

**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 10 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. DEAN ILIJASIC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1852 COLTMAN RD.  
City CLEVELAND State OH Zip Code 44106-1916  
FEC ID number of contributing federal political committee. **C**  
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, INNOVATION  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.94

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR5870525567**  
Amount of Each Receipt this Period 118.26  
P/R Deduction (\$39.42 Bi-Weekly)

**B. 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 CREDIT OFFICER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR59606855567**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Bi-Weekly)

**C. 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 / 2012  
**Transaction ID : PR67428345567**  
Amount of Each Receipt this Period 147.12  
P/R Deduction (\$49.04 Bi-Weekly)

**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: PAGE 11 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**KeyCorp Advocates Fund**

**A. JOHNNI CAY BECKEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 369 NORTH MAIN STREET  
 City State Zip Code  
 CHAGRIN FALLS OH 44022-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KEYCORP EVP & CHIEF HR OFFICER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 323.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR68107805567**  
 Amount of Each Receipt this Period  
 138.45  
 P/R Deduction (\$46.15 Bi-Weekly)

**B. DEAN ANDREW KONTUL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37390 BROADSTONE DR  
 City State Zip Code  
 SOLON OH 44139-5692  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KEYBANK NATIONAL ASSOCIATION DIRECTOR VIRTUAL DISTRIBUTION  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 269.22

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : PR9056885567**  
 Amount of Each Receipt this Period  
 115.38  
 P/R Deduction (\$38.46 Bi-Weekly)

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	253.83
<b>TOTAL</b> This Period (last page this line number only).....▶	1680.60



**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. Friends of Jeb Hensarling**

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Jeb Hensarling**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2012

**Transaction ID : 10717840**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Gibbs for Congress**

Mailing Address P. O. Box 21

City Lakeville State OH Zip Code 44638-0021

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Robert Gibbs**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	28	/	2012

**Transaction ID : 10722674**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Flemming for Congress**

Mailing Address Martha Flemming, Treasurer  
9315 Gravelly Lake Drive SW

City Lakewood State WA Zip Code 98499

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mr. Stanley Flemming**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	28	/	2012

**Transaction ID : 10722675**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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**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. Kilmer for Congress**

Mailing Address Phil Lloyd, Treasurer  
PO Box 1574

City Gig Harbor State WA Zip Code 98335

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mr. Derek Kilmer**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2012

**Transaction ID : 10722677**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Charlie Wilson**

Mailing Address P. O. Box 334

City Bridgeport State OH Zip Code 43912

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Charlie Wilson**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2012

**Transaction ID : 10722687**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2000.00

6750.00

**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. Committee to Elect Chris Widener**

Mailing Address Peggy Hupp, Treasurer  
23 South Center Street

City Springfield State OH Zip Code 45502

Purpose of Disbursement  
Christopher Widener, STATE SENATE 10th OH

Candidate Name  
**OH Sen. Christopher Widener**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

**Transaction ID : 10702894**

Amount of Each Disbursement this Period

500.00
--------

Christopher Widener, STATE SENATE 10th OH

Full Name (Last, First, Middle Initial)

**B. Friends of Bill Coley**

Mailing Address Carolyn Coley, Treasurer  
8265 Cherry Laurel Drive

City Liberty Township State OH Zip Code 45044

Purpose of Disbursement  
William Coley, STATE SENATE 4th OH

Candidate Name  
**OH Sen. William Coley**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

**Transaction ID : 10703231**

Amount of Each Disbursement this Period

500.00
--------

William Coley, STATE SENATE 4th OH

Full Name (Last, First, Middle Initial)

**C. 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  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: OH District: 69

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2012

**Transaction ID : 10712178**

Amount of Each Disbursement this Period

1000.00
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William Batchelder, STATE HOUSE 69th OH

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

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

2000.00
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**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 Bill Beagle**

Mailing Address Rick Mains, Jr., Treasurer  
115 S. Tippecanoe Drive

City Tipp City State OH Zip Code 45371

Purpose of Disbursement  
Bill Beagle, STATE SENATE 5th OH

Candidate Name  
**OH Sen. Bill Beagle**

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

**011**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
03 / 23 / 2012

**Transaction ID : 10717834**

Amount of Each Disbursement this Period  
500.00

Bill Beagle, STATE SENATE 5th OH

Full Name (Last, First, Middle Initial)

**B. Ohio House Republican Organizational Committee**

Mailing Address J. Matthew Yuskewich, Treasurer  
4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement

Candidate Name

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

**011**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
03 / 26 / 2012

**Transaction ID : 10719072**

Amount of Each Disbursement this Period  
1000.00

Full Name (Last, First, Middle Initial)

**C. Republican Senate Campaign Committee**

Mailing Address J. Matthew Yuskewich, Treasurer  
4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement

Candidate Name

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

**011**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
03 / 26 / 2012

**Transaction ID : 10719082**

Amount of Each Disbursement this Period  
2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

4000.00

**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. Montgomery County Democratic Party**

Mailing Address **Mark E. Owens, Chairman**  
131 S. Wilkinson Street

City **Dayton** State **OH** Zip Code **45402**

Purpose of Disbursement

**011**

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : 10722690**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Citizens for Ashford**

Mailing Address **Weldon Douthitt, Co-Chairman**  
2910 Collingwood Boulevard

City **Toledo** State **OH** Zip Code **43610**

Purpose of Disbursement  
**Michael Ashford, STATE HOUSE 48th OH**

**011**

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: **OH** District: **48**

Date of Disbursement

/  /

**Transaction ID : 10722842**

Amount of Each Disbursement this Period

Michael Ashford, STATE HOUSE 48th OH

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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