

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 Cleveland OH 44114 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 02 01 2008 through 02 29 2008

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 Erskine E. Cade

Signature of Treasurer Electronically Filed by Erskine E. Cade Date 03 11 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Table with 7 columns and 1 row for 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	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		31295.11
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	38386.12									
(c) Total Receipts (from Line 19)	17657.47	34851.98								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	56043.59	66147.09								
7. Total Disbursements (from Line 31)	16003.50	26107.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40040.09	40040.09								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

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	436.14	436.14
(i) Itemized (use Schedule A)		
(ii) Unitemized	17221.33	34415.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)	17657.47	34851.98
(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)	17657.47	34851.98
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))	17657.47	34851.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17657.47	34851.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	3.50	7.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	7.00
22. Transfers to Affiliated/Other Party Committees.....	5000.00	5000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	2500.00
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.....	11000.00	18600.00
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))..	16003.50	26107.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16003.50	26107.00

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)	17657.47	34851.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17657.47	34851.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	7.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.50	7.00

**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 / 14
	<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

A.	Full Name (Last, First, Middle Initial) JOHN R SINNENBERG	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 23276 LAURELDALE ROAD	Transaction ID: PR5480591792
	City State Zip Code SHAKER HEIGHTS OH 44122-2103	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer KEY PRINCIPAL PARTNERS CO- RP	Occupation CHAIRMAN, KEY PRINCIPAL PRTRNR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) STEVE YATES	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 7110 KINSMAN ROAD	Transaction ID: PR5831771792
	City State Zip Code NOVELTY OH 44072-9512	Amount of Each Receipt this Period 190.38
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$52.88 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD INFORMATION TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 327.88	

C.	Full Name (Last, First, Middle Initial) MICHAEL HENRY DULAN	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 373 ANGIER COURT NE	Transaction ID: PR5887481792
	City State Zip Code ATLANTA GA 30312-1068	Amount of Each Receipt this Period 105.76
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$52.88 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation BUS BKG SEGMENT HEAD COMM BK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.52	

SUBTOTAL of Receipts This Page (optional)	436.14
TOTAL This Period (last page this line number only)	436.14

**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 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

Transaction ID: 6525600

Date of Disbursement

Mailing Address 127 Public Square

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	8

City Cleveland State OH Zip Code 44114-1306

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

5000.00

**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

A.	Full Name (Last, First, Middle Initial) Citizens for Wagoner	Transaction ID: 6513358 Date of Disbursement 02 / 07 / 2008
	Mailing Address Mark Wagoner, Sr., Treasurer 3331 Pelham Road	Amount of Each Disbursement this Period 500.00
	City Toledo	State OH
	Zip Code 43606	
	Purpose of Disbursement Mark Wagoner, STATE SENATE 2nd OH	011 Category/ Type
	Candidate Name OH Rep. Mark Wagoner, Jr.	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District:	Mark Wagoner, STATE SENATE 2nd OH

B.	Full Name (Last, First, Middle Initial) Committee to Elect Niehaus	Transaction ID: 6513531 Date of Disbursement 02 / 08 / 2008
	Mailing Address Emily Niehaus, Treasurer 1131 Little Indian Creek Road	Amount of Each Disbursement this Period 500.00
	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	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District:	Thomas Niehaus, STATE SENATE 14th OH

C.	Full Name (Last, First, Middle Initial) Seitz for Senate Committee	Transaction ID: 6513529 Date of Disbursement 02 / 08 / 2008
	Mailing Address Steve Geiler, Treasurer 4401 Abby Court	Amount of Each Disbursement this Period 300.00
	City Cincinnati	State OH
	Zip Code 45248	
	Purpose of Disbursement William Seitz, STATE SENATE 8th OH	011 Category/ Type
	Candidate Name Representa William Seitz	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District:	William Seitz, STATE SENATE 8th OH

SUBTOTAL of Disbursements This Page (optional)	▶	1300.00
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>A. Full Name (Last, First, Middle Initial) Eugene R. Miller House District 10</p> <p>Mailing Address Charleen Johnson, Treasurer 540 E. 105th Street, Suite 305F</p> <p>City Cleveland State OH Zip Code 44108</p> <p>Purpose of Disbursement Eugene Miller, STATE HOUSE 10th OH</p> <p>Candidate Name OH Rep. Eugene Miller</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 6515345 Date of Disbursement 02 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Eugene Miller, STATE HOUSE 10th OH</p>
<p>B. Full Name (Last, First, Middle Initial) Mentel for Council</p> <p>Mailing Address 550 East Walnut Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Michael Mentel, LOCAL OH</p> <p>Candidate Name Michael C. Mentel</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2011 OH Primary</p>	<p>Transaction ID: 6514676 Date of Disbursement 02 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Michael Mentel, LOCAL OH</p>
<p>C. Full Name (Last, First, Middle Initial) Vote Wagner Committee</p> <p>Mailing Address Shayne Thomas, Treasurer 7760 S SR 100</p> <p>City Sycamore State OH Zip Code 44882</p> <p>Purpose of Disbursement Jeff Wagner, STATE HOUSE 81 OH</p> <p>Candidate Name Jeff Wagner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 81</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 OH Primary</p>	<p>Transaction ID: 6531379 Date of Disbursement 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>Jeff Wagner, STATE HOUSE 81 OH</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1800.00

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>A. Full Name (Last, First, Middle Initial) Committee to Elect Charles T. Brown</p> <p>Mailing Address Lisa Amantea, Treasurer 4776 Edenwood</p> <p>City South Euclid State OH Zip Code 44121</p> <p>Purpose of Disbursement Charles Brown, LOCAL OH</p> <p>Candidate Name Charles T. Brown</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 OH Primary</p>	<p>Transaction ID: 6531378 Date of Disbursement: MM / DD / YYYY 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Charles Brown, LOCAL OH</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Chris Widener</p> <p>Mailing Address Peggy Hupp, Treasurer 23 South Center Street, Suite 103</p> <p>City Springfield State OH Zip Code 45502</p> <p>Purpose of Disbursement Christopher Widener, STATE HOUSE 84 OH</p> <p>Candidate Name Christopher Widener</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 84</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 OH Primary</p>	<p>Transaction ID: 6553297 Date of Disbursement: MM / DD / YYYY 02 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Christopher Widener, STATE HOUSE 84 OH</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Tom Patton</p> <p>Mailing Address John D. Southworth, Jr., Treasurer 17157 Rabbit Run Drive</p> <p>City Strongsville State OH Zip Code 44136</p> <p>Purpose of Disbursement Thomas Patton, STATE HOUSE 18th OH</p> <p>Candidate Name Thomas Patton</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2008 OH Primary</p>	<p>Transaction ID: 6553300 Date of Disbursement: MM / DD / YYYY 02 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>Thomas Patton, STATE HOUSE 18th OH</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1300.00

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) Citizens for Sayre <hr/> Mailing Address Linda Yosick, Treasurer 176 Downey Hill Drive, Ext. NE <hr/> City Dover State OH Zip Code 44622 <hr/> Purpose of Disbursement Allan Sayre, STATE HOUSE 96 OH Candidate Name Allan Sayre <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 96 2008 OH Primary	Transaction ID: 6553298 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 <hr/> Allan Sayre, STATE HOUSE 96 OH

B. Full Name (Last, First, Middle Initial) Friends of Faber <hr/> Mailing Address Dale Schwieterman, Treasurer 7706 State Route 703 <hr/> City Celina State OH Zip Code 45822 <hr/> Purpose of Disbursement Keith Faber, STATE SENATE 12th OH Candidate Name OH Sen. Keith Faber <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 2008 OH Primary	Transaction ID: 6553458 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <hr/> Keith Faber, STATE SENATE 12th OH

C. Full Name (Last, First, Middle Initial) Friends of Joe Kozuria <hr/> Mailing Address Joe Kozuria, Treasurer 5308 Gargasz <hr/> City Lorain State OH Zip Code 44053 <hr/> Purpose of Disbursement Joe Kozuria, STATE HOUSE 56 OH Candidate Name Joe Kozuria <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 56 2008 OH Primary	Transaction ID: 6553461 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 <hr/> Joe Kozuria, STATE HOUSE 56 OH

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

A.	Full Name (Last, First, Middle Initial) Friends of Michael J. Skindell Mailing Address Donna J. Taylor-Kolis, Treasurer 16800 Delaware Avenue City Lakewood State OH Zip Code 44107 Purpose of Disbursement Michael Skindell, STATE HOUSE 13th OH Candidate Name Michael Skindell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 13 2008 OH Primary	Transaction ID: 6555900 Date of Disbursement 02 / 25 / 2008 Amount of Each Disbursement this Period 500.00 Michael Skindell, STATE HOUSE 13th OH	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Citizens to Elect John Patrick Carney Mailing Address Martin T. Lanning, Treasurer 357 E. Torrence Road City Columbus State OH Zip Code 43214 Purpose of Disbursement John Carney, STATE HOUSE 22 OH Candidate Name John Patrick Carney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 22 2008 OH Primary	Transaction ID: 6555889 Date of Disbursement 02 / 25 / 2008 Amount of Each Disbursement this Period 500.00 John Carney, STATE HOUSE 22 OH	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Cuyahoga County Democratic Party Mailing Address Rudy M. Stralka, Director of Opera 1466 St. Clair Avenue City Cleveland State OH Zip Code 44114 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 6556312 Date of Disbursement 02 / 26 / 2008 Amount of Each Disbursement this Period 1750.00	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

<p>A. Full Name (Last, First, Middle Initial) Friends of Mamie Mitchell</p> <p>Mailing Address Scott Shelton, Treasurer 12701 Shaker Boulevard</p> <p>City Cleveland State OH Zip Code 44120</p> <p>Purpose of Disbursement Mamie Mitchell, LOCAL OH</p> <p>Candidate Name Mamie Mitchell</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary2008</p>	<p>Transaction ID: 6558935 Date of Disbursement 02 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Mamie Mitchell, LOCAL OH</p>
<p>B. Full Name (Last, First, Middle Initial) John A. Donofrio Campaign Committee</p> <p>Mailing Address Melinda A. Gullace, Treasurer 3842 Dogwood Street, N.W.</p> <p>City Uniontown State OH Zip Code 44685</p> <p>Purpose of Disbursement John Donofrio, LOCAL OH</p> <p>Candidate Name John Donofrio</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 6559020 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>John Donofrio, LOCAL OH</p>
<p>C. Full Name (Last, First, Middle Initial) Antonini for Treasurer</p> <p>Mailing Address Brenda J. Brezovsky Antonini, Trea 4233 Selkirk Avenue</p> <p>City Youngstown State OH Zip Code 44511</p> <p>Purpose of Disbursement Lisa Antonini, LOCAL OH</p> <p>Candidate Name Lisa A. Antonini</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 6559017 Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Lisa Antonini, LOCAL OH</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

10650.00