

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.

KeyCorp Advocates Fund-Federal Only

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 David A. Bell

Signature of Treasurer David A. Bell [Electronically Filed] Date / /

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-Federal Only

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="21477.00"/>	<input type="text" value="21477.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="19668.42"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1610.06"/>	<input type="text" value="9320.48"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="21278.48"/>	<input type="text" value="30797.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10506.50"/>	<input type="text" value="20025.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10771.98"/>	<input type="text" value="10771.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal Only

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).....	888.84	2792.67
(ii) Unitemized	721.22	6527.81
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1610.06	9320.48
(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)	1610.06	9320.48
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1610.06	9320.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1610.06	9320.48

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6.50	25.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6.50	25.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	20000.00
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	0.00	0.00
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)) ..	10506.50	20025.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10506.50	20025.50

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)	1610.06	9320.48
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1610.06	9320.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6.50	25.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6.50	25.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<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	

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

A. JOHN E STINSON
Full Name (Last, First, Middle Initial)

Mailing Address 26245 SEMINARY ROAD

City PERRYSBURG State OH Zip Code 43551-6211

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MGR, CMML BKG REL TEAM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2013
Transaction ID : PR10379066852

Amount of Each Receipt this Period 40.00

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

B. PAUL E HENSON
Full Name (Last, First, Middle Initial)

Mailing Address 20515 BEACONSFIELD BLVD

City ROCKY RIVER State OH Zip Code 44116-1305

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SENIOR CREDIT EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.88

Date of Receipt 05 / 31 / 2013
Transaction ID : PR5401516852

Amount of Each Receipt this Period 46.16

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

C. AMY K CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 2884 WOODBURY RD

City SHAKER HEIGHTS State OH Zip Code 44120-2426

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation GRP HD, DCM ORIG & STRUCTURING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 528.88

Date of Receipt 05 / 31 / 2013
Transaction ID : PR5412916852

Amount of Each Receipt this Period 96.16

P/R Deduction (\$48.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 182.32

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 7 OF 12
	(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-Federal Only

A. DEREK WILLIAM CHAUVETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 18120 PARKLAND RD
 City State Zip Code
 SHAKER HEIGHTS OH 44122-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KEYBANK NATIONAL ASSOCIATION HEAD OF PUBLIC SECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : PR5437216852
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Bi-Weekly)

B. MITCHELL W MILLER
 Full Name (Last, First, Middle Initial)
 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 Occupation
 KEYBANK NATIONAL ASSOCIATION TEAM LDR, PUBLIC SEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : PR5471086852
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

C. DAVID J. SYLVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 BINGHAM CT
 City State Zip Code
 BRATENAHL OH 44108-1175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KEYBANC CAPITAL MARKETS INC. GROUP HEAD, MUNICIPALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2013
Transaction ID : PR5499976852
 Amount of Each Receipt this Period 51.92
 P/R Deduction (\$25.96 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	181.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<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. JEFFREY S FREESE
Full Name (Last, First, Middle Initial)
Mailing Address 20505 BRADGATE LANE
City STRONGSVILLE State OH Zip Code 44149-6779
FEC ID number of contributing federal political committee. **C**
Name of Employer KEYBANC CAPITAL MARKETS INC. Occupation LDR, PUBLIC FINANCE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 232.65

Date of Receipt 05 / 31 / 2013
Transaction ID : PR5542756852
Amount of Each Receipt this Period 42.30
P/R Deduction (\$21.15 Bi-Weekly)

B. BRIAN BRENNAN
Full Name (Last, First, Middle Initial)
Mailing Address 2961 EDGEWOOD DRIVE.
City PEPPER PIKE State OH Zip Code 44124-5101
FEC ID number of contributing federal political committee. **C**
Name of Employer KEYBANC CAPITAL MARKETS INC. Occupation NAT'L HD, FIX INC SLS & TRDNG
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2013
Transaction ID : PR5579596852
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 Bi-Weekly)

C. CHRISTOPHER A OHMACHT
Full Name (Last, First, Middle Initial)
Mailing Address 829 PUEBLO DRIVE
City FRANKLIN LAKES State NJ Zip Code 07417-1610
FEC ID number of contributing federal political committee. **C**
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation CO-CHIEF EXEC OFFICER, VCM
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2013
Transaction ID : PR5637096852
Amount of Each Receipt this Period 40.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 182.30
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
	<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-Federal Only

A. EDWARD J BURKE
Full Name (Last, First, Middle Initial)

Mailing Address 2720 WICKLOW ROAD

City State Zip Code
SHAKER HEIGHTS OH 44120-1336

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1057.65

Date of Receipt
05 / 31 / 2013
Transaction ID : PR5662196852

Amount of Each Receipt this Period
192.30

P/R Deduction (\$96.15 Bi-Weekly)

B. CHRISTOPHER GORMAN
Full Name (Last, First, Middle Initial)

Mailing Address 22401 SHAKER BLVD.

City State Zip Code
SHAKER HEIGHTS OH 44122-2649

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION PRESIDENT KEY CORPORATE BANK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
05 / 31 / 2013
Transaction ID : PR5687206852

Amount of Each Receipt this Period
100.00

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

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

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
05 / 31 / 2013
Transaction ID : PR5831236852

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional).....▶	342.30
TOTAL This Period (last page this line number only).....▶	888.84

**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-Federal Only

Full Name (Last, First, Middle Initial)

A. Steve Fincher for Congress

Mailing Address PO Box 11153

City Jackson State TN Zip Code 38308

Purpose of Disbursement

011

Candidate Name

Rep. Stephen Fincher

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	3

Transaction ID : 11638965

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Marcia L. Fudge for Congress

Mailing Address 23811 Chagrin Boulevard, Suite LL5

City Beachwood State OH Zip Code 44122

Purpose of Disbursement

011

Candidate Name

Marcia Fudge

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Transaction ID : 11647308

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

011

Candidate Name

Rep. Jeb Hensarling

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Transaction ID : 11647311

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

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

5	0	0	0	0	0	0	0	0	0

5	0	0	0	0	0	0	0	0	0

**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-Federal Only

Full Name (Last, First, Middle Initial)

A. Fitzpatrick for Congress

Mailing Address P. O. Box 185

City Langhorne State PA Zip Code 19047

Purpose of Disbursement

011

Candidate Name

Michael Fitzpatrick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Transaction ID : 11647312

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Joyce Beatty for Congress

Mailing Address 233 S. High Street, Suite #300

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011

Candidate Name

Ms. Joyce Beatty

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	3

Transaction ID : 11656786

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Huizenga for Congress

Mailing Address 441 Williams Court

City Zeeland State MI Zip Code 49464

Purpose of Disbursement

011

Candidate Name

Rep. Bill Huizenga

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	3

Transaction ID : 11657655

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

**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-Federal Only

Full Name (Last, First, Middle Initial)

A. Maloney for Congress

Mailing Address 24 East 93rd Street, Suite 1B

City New York State NY Zip Code 10128

Purpose of Disbursement

011

Category/
Type

Candidate Name

Carolyn Maloney

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2013

Transaction ID : 11657717

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

1000.00

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

10500.00