

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-01-27-1710
 Check if different than previously reported. (ACC)
Cleveland OH 44114

2. **FEC IDENTIFICATION NUMBER** C00073155
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIPCODE

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 01 2007 through 11 30 2007

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 12 12 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
KeyCorp Advocates Fund

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		27180.03
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	17770.14									
(c) Total Receipts (from Line 19)	27729.46	219244.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45499.60	246424.60								
7. Total Disbursements (from Line 31)	25453.50	226378.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20046.10	20046.10								
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
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	10504.65	46122.36
(i) Itemized (use Schedule A)	17224.81	173122.21
(ii) Unitemized	27729.46	219244.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	27729.46	219244.57
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))	27729.46	219244.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	27729.46	219244.57

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	38.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	38.50
22. Transfers to Affiliated/Other Party Committees.....	2000.00	17000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	47500.00
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.....	14950.00	161840.00
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))..	25453.50	226378.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	25453.50	226378.50

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)	27729.46	219244.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27729.46	219244.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	38.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.50	38.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 97
	<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"/>	<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

Full Name (Last, First, Middle Initial) A. JAMES F CARRIERO		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 26 SOMERSET DRIVE		Transaction ID: PR5395871446
City State Zip Code GLENMONT NY 12077-3116	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	

Full Name (Last, First, Middle Initial) B. NADINE M KUBISCH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 35 OLD SCHOOL ROAD		Transaction ID: PR5395971446
City State Zip Code SELKIRK NY 12158-2143	Amount of Each Receipt this Period _____ 23.96	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$3.27 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR PROJECT MGR, TECHNOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 222.95	

Full Name (Last, First, Middle Initial) C. JEFFREY STONE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10080 PEMBURRY DR.		Transaction ID: PR5396091446
City State Zip Code GRANGER IN 46530-6062	Amount of Each Receipt this Period _____ 45.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 98.96
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 97
	<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

Full Name (Last, First, Middle Initial) A. THOMAS C STEVENS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5396271446
Mailing Address 19800 SHAKER BOULEVARD		Amount of Each Receipt this Period 30.00
City State Zip Code SHAKER HEIGHTS OH 44122-1869	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation KEYCORP VICE CHAIR & CAO	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00	

Full Name (Last, First, Middle Initial) B. RICHARD M MAROTTA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5396321446
Mailing Address 2090 SCOTCH CHURCH ROAD		Amount of Each Receipt this Period 30.00
City State Zip Code PATTERSONVILLE NY 12137-2005	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION ASSET RECOVERY GROUP HEAD	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00	

Full Name (Last, First, Middle Initial) C. JEFFREY G ANDERSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5396481446
Mailing Address 16414 SAINT ANTHONY LN		Amount of Each Receipt this Period 30.00
City State Zip Code CLEVELAND OH 44111-2941	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP PORTFOLIO MANAGER	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. PATRICIA J WYANT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5396531446	
Mailing Address 65 PEACHTREE LANE		Amount of Each Receipt this Period 34.62	
City PAINESVILLE	State OH	Zip Code 44077-1451	P/R Deduction (\$11.54 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 276.96	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER, EMPLOYEE RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. RICHARD J VENNER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5396711446	
Mailing Address 131 FIRESIDE LANE		Amount of Each Receipt this Period 36.00	
City CAMILLUS	State NY	Zip Code 13031-1939	P/R Deduction (\$12.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 288.00	
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT EXECUTIVE - REC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. CHRISTOPHER K DYER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5397361446	
Mailing Address 38567 MISTY MEADOW TRAIL		Amount of Each Receipt this Period 36.29	
City NORTH RIDGEVILLE	State OH	Zip Code 44039-1170	P/R Deduction (\$9.41 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 286.29	
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation MGR PORTFOLIO ADMINISTRATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	106.91
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
CINDY P CROTTY

Mailing Address 2905 FAIRMOUNT BLVD

City State Zip Code
CLEVELAND HEIGHTS OH 44118-4021

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION SEGMENT HEAD COMMUNITY BANK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 969.12

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5398931446

Amount of Each Receipt this Period
121.14

P/R Deduction (\$40.38 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
ROBERT G DOLLAR

Mailing Address 679 NEW SCOTLAND AVE

City State Zip Code
ALBANY NY 12208-1716

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION INVESTMT & TRUST CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5398971446

Amount of Each Receipt this Period
30.00

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

C. Full Name (Last, First, Middle Initial)
MICHAEL W BICKERTON

Mailing Address 582 LEGENDS ROW

City State Zip Code
AVON LAKE OH 44012-2269

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION REGIONAL CREDIT EXEC - CB

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.96

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5399751446

Amount of Each Receipt this Period
54.12

P/R Deduction (\$18.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	205.26
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 97
	<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

Full Name (Last, First, Middle Initial) A. DEBORAH BAKER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1368 WILSON ROAD		Transaction ID: PR5399821446	
City M A C E D O N	State N Y	Zip Code 14502-8936	Amount of Each Receipt this Period _____ 27.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT RETAIL LEADER I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 216.00		

P/R Deduction (\$9.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. MONTGOMERY D YURCHISON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7515 ANTOINETTE COURT		Transaction ID: PR5400001446	
City S C H E N E C T A D Y	State N Y	Zip Code 12303-5253	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER V ETO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

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

Full Name (Last, First, Middle Initial) C. STEPHEN D FOURNIER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1004JANOL WAY		Transaction ID: PR5400311446	
City C A M I L L U S	State N Y	Zip Code 13152	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

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

SUBTOTAL of Receipts This Page (optional) ▶	_____ 87.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 97
	<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

Full Name (Last, First, Middle Initial) A. MARCUS E HELMBRECHT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6930 S. CAMELOT		Transaction ID: PR5400571446	
City State Zip Code MENTOR OH 44060-4075	Amount of Each Receipt this Period _____ 40.53		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER IV ETO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 306.12		P/R Deduction (\$13.03 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. MICHAEL ORSINO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7 WOODLAND PARK ROAD		Transaction ID: PR5400761446	
City State Zip Code BELLPORT NY 11713-2314	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. KATHLEEN A HUTKA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 36906 CHESTNUT RIDGE ROAD		Transaction ID: PR5400821446	
City State Zip Code NORTH RIDGEVILLE OH 44039-8948	Amount of Each Receipt this Period _____ 28.90		
FEC ID number of contributing federal political committee. C			
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation SR EQUITY TRADER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 225.34		P/R Deduction (\$8.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 99.43
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 97
	<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

Full Name (Last, First, Middle Initial) A. GEORGE E EMMONS JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 699 COY LANE		Transaction ID: PR5400901446
City State Zip Code CHAGRIN FALLS OH 44022-2679	Amount of Each Receipt this Period _____ 124.98	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$41.66 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PRESIDENT - COMMUNITY BANK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 999.84	

Full Name (Last, First, Middle Initial) B. SUSAN P BROCKETT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 28 ANNANDALE DRIVE		Transaction ID: PR5401251446
City State Zip Code CHAGRIN FALLS OH 44022-4266	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation HR DIR, ORG & EMPLOY DEVELOP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 480.00	

Full Name (Last, First, Middle Initial) C. ALVIN B COPPOLO		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 306 KILBOURNE DR		Transaction ID: PR5401261446
City State Zip Code HUDSON OH 44236-3424	Amount of Each Receipt this Period _____ 39.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$13.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation ENTERPRISE TECHNOLOGY DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 312.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 223.98
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 97
	<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

Full Name (Last, First, Middle Initial) A. THOMAS L RATHBURN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 25610 TAYLOR ST		Transaction ID: PR5401421446	
City OLMSTED FALLS	State OH	Zip Code 44138-1944	Amount of Each Receipt this Period _____ 27.79
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation TAX MANAGER III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 204.16		
		P/R Deduction (\$7.53 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. RONALD J SWINER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 31419 CARLTON DRIVE		Transaction ID: PR5401441446	
City BAY VILLAGE	State OH	Zip Code 44140-1436	Amount of Each Receipt this Period _____ 27.94
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation RISK MGMT & LOSS PREVENT MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 234.49		
		P/R Deduction (\$9.31 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. ANDREW R TYSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 17431 FISH CREEK TRAIL		Transaction ID: PR5401461446	
City CHAGRIN FALLS	State OH	Zip Code 44023-2126	Amount of Each Receipt this Period _____ 44.01
FEC ID number of contributing federal political committee. C			
Name of Employer KEYCORP	Occupation GROUP HEAD, STRATEGIC PLAN&DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 352.08		
		P/R Deduction (\$14.67 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 99.74
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) PAUL E HENSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401511446	
Mailing Address 20515 BEACONSFIELD BLVD		Amount of Each Receipt this Period 46.97	
City State Zip Code ROCKY RIVER OH 44116-1305	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT EXECUTIVE - IB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.69		
		P/R Deduction (\$6.13 Bi-Weekly)	

B. Full Name (Last, First, Middle Initial) KATHLEEN M WORHATCH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401561446	
Mailing Address 796 TEAKWOOD DR		Amount of Each Receipt this Period 35.17	
City State Zip Code YOUNGSTOWN OH 44512-5016	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR OPERATION EFFECTIVENESS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.73		
		P/R Deduction (\$8.63 Bi-Weekly)	

C. Full Name (Last, First, Middle Initial) FRED J WEIGLE JR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401621446	
Mailing Address 646 CANTER COURT		Amount of Each Receipt this Period 32.88	
City State Zip Code AVON LAKE OH 44012-4026	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MGR, SALES SUPPORT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.04		
		P/R Deduction (\$10.96 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	115.02
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 97
	<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

Full Name (Last, First, Middle Initial) A. WILLIAM R ALLEN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5401721446
Mailing Address 10315 BUCKEY TRAIL		Amount of Each Receipt this Period 30.00
City NORTH ROYALTON State OH Zip Code 44133-6196	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation HEAD OF SECURITIES LENDING	Aggregate Year-to-Date 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. FLAVIO M GIUST		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402421446
Mailing Address 7285 SURREY LANE		Amount of Each Receipt this Period 36.00
City CHESTERLAND State OH Zip Code 44026-2032	FEC ID number of contributing federal political committee. C	P/R Deduction (\$12.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SECTOR MGR, FX SALES	Aggregate Year-to-Date 288.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. SUSAN J WALKER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402461446
Mailing Address 18152 CLIFTON ROAD		Amount of Each Receipt this Period 33.10
City LAKEWOOD State OH Zip Code 44107-1051	FEC ID number of contributing federal political committee. C	P/R Deduction (\$8.91 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR SOURCING MANAGER	Aggregate Year-to-Date 256.61	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	99.10
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 97
	<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

Full Name (Last, First, Middle Initial) A. ROBERT A MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402481446
Mailing Address 10108 WILLOW COURT		Amount of Each Receipt this Period 30.00
City BRECKSVILLE	State OH	Zip Code 44141-3631
FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SEGMENT HD, INSTITUTIONAL BKNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. JAMES PEOPLES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5402971446
Mailing Address 16827 SE 59TH STREET		Amount of Each Receipt this Period 124.98
City BELLEVUE	State WA	Zip Code 98006-5555
FEC ID number of contributing federal political committee. C		P/R Deduction (\$41.66 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.84	

Full Name (Last, First, Middle Initial) C. RENEE R CSUHRAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5403481446
Mailing Address 4839 SNOW BLOSSOM LANE		Amount of Each Receipt this Period 63.57
City BRECKSVILLE	State OH	Zip Code 44141-3359
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.73 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR REC CREDIT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.68	

SUBTOTAL of Receipts This Page (optional) ▶	218.55
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
WILLIAM P CLOONAN

Mailing Address 21270 ENDSLEY AVE

City State Zip Code
ROCKY RIVER OH 44116-2231

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
ASSOC COUNSEL I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.25

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5403551446

Amount of Each Receipt this Period
24.59

P/R Deduction (\$6.30 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
GEORGE A VALKO

Mailing Address 10484 CANDLEWOOD DRIVE

City State Zip Code
SCOTTSDALE AZ 85255-8034

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
REGIONAL SALES MGR, CRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
469.14

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5403631446

Amount of Each Receipt this Period
58.10

P/R Deduction (\$15.35 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MARK GREGORY MEADEN

Mailing Address 1037 WHITE HORSE TRAIL

City State Zip Code
HINCKLEY OH 44233-9331

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
APPLICATIONS SYSTEM MGR II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.67

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5403751446

Amount of Each Receipt this Period
30.86

P/R Deduction (\$8.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	113.55
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 97
	<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

Full Name (Last, First, Middle Initial) A. SHELDON R HARTMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5403771446
Mailing Address 31349 PINETREE ROAD		Amount of Each Receipt this Period 48.63
City State Zip Code PEPPER PIKE OH 44124-5907	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.89 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation ASSOC GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 361.25	

Full Name (Last, First, Middle Initial) B. PAUL L MEINERDING		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5403831446
Mailing Address 4320 BRITTANY		Amount of Each Receipt this Period 54.00
City State Zip Code OTTAWA HILLS OH 43615-2306	FEC ID number of contributing federal political committee. C	P/R Deduction (\$18.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT RETAIL LEADER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 432.00	

Full Name (Last, First, Middle Initial) C. THOMAS URBAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404081446
Mailing Address 5915 GILLINGHAM DR		Amount of Each Receipt this Period 36.10
City State Zip Code SYLVANIA OH 43560-1141	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.21 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, CMML BKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.25	

SUBTOTAL of Receipts This Page (optional) ▶	138.73
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 97
	<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

Full Name (Last, First, Middle Initial) A. JOHN V AVALLONE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4559 ROCKY MOUNTAIN DRIVE		Transaction ID: PR5404131446
City MEDINA State OH Zip Code 44256-6704	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.53
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SALES MGR, GLOBAL TREASURY MGR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$3.23 Bi-Weekly)
Aggregate Year-to-Date ▼ 352.09		

Full Name (Last, First, Middle Initial) B. ROBERT R MANERI		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2570 JAYCOX ROAD		Transaction ID: PR5404501446
City AVON State OH Zip Code 44011-1922	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.24
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation RESEARCH ANALYST	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$6.30 Bi-Weekly)
Aggregate Year-to-Date ▼ 264.60		

Full Name (Last, First, Middle Initial) C. ANNETTE M HAZAPIS		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 29674 DEVONSHIRE OVAL		Transaction ID: PR5404591446
City WESTLAKE State OH Zip Code 44145-3893	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.38
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, PRODUCT MANAGEMENT G	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.73 Bi-Weekly)
Aggregate Year-to-Date ▼ 259.88		

SUBTOTAL of Receipts This Page (optional)	99.15
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 97
	<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

Full Name (Last, First, Middle Initial) A. CONSTANCE F PAGE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404661446
Mailing Address 2811 CHATEAU CIRCLE		Amount of Each Receipt this Period 37.55
City COLUMBUS State OH Zip Code 43221-2553		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation FINANCIAL ADVISOR IV, BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.55	P/R Deduction (\$8.67 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. LAWRENCE G BABIN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404671446
Mailing Address 28039 RED RAVEN RD		Amount of Each Receipt this Period 75.29
City PEPPER PIKE State OH Zip Code 44124-4551		
FEC ID number of contributing federal political committee. C		
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation CIO LARGE CAP INVESTMENTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 604.90	P/R Deduction (\$23.37 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. LYNN B VANTAGGI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5404951446
Mailing Address 117 TURNBERRY CROSSING		Amount of Each Receipt this Period 33.75
City BROADVIEW HEIGHTS State OH Zip Code 44147-3079		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR MGR, CRE NATIONAL LN ADMIN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.15	P/R Deduction (\$8.10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	146.59
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 97
	<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

Full Name (Last, First, Middle Initial) A. LINDA A GRANDSTAFF		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 17301 RIVERWAY DRIVE		Transaction ID: PR5405061446	
City State Zip Code LAKEWOOD OH 44107-5315	Amount of Each Receipt this Period _____ 78.82		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF BANK SECRECY ACT OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 571.50		
		P/R Deduction (\$22.52 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. LEE A LORENTZEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 19358 TIMBER CREEK CIR		Transaction ID: PR5405081446	
City State Zip Code STRONGSVILLE OH 44136-7269	Amount of Each Receipt this Period _____ 37.05		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGING COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 293.60		
		P/R Deduction (\$8.55 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. ROSE M BLESSING		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5902 MALLARD COURT		Transaction ID: PR5405211446	
City State Zip Code MENTOR OH 44060-1813	Amount of Each Receipt this Period _____ 36.50		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CORPORATE STRATEGIC SPACE MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 278.36		
		P/R Deduction (\$11.73 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 152.37
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 97
	<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

Full Name (Last, First, Middle Initial) A. MARYANN C LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5592 WELLESLEY AVE		Transaction ID: PR5405301446	
City NORTH OLMSTED State OH Zip Code 44070-3952	Amount of Each Receipt this Period _____ 33.58		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SENIOR MANAGER, RISK REVIEW		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 271.48		
		P/R Deduction (\$12.09 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. ANTHONY V ANSELMO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 603 PARKSIDE BLVD		Transaction ID: PR5405521446	
City RICHMOND HTS State OH Zip Code 44143-2813	Amount of Each Receipt this Period _____ 53.71		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER VI ETO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 410.59		
		P/R Deduction (\$16.67 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. ROGER D CAMPBELL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 213 RED SAIL CT		Transaction ID: PR5405751446	
City WESTERVILLE State OH Zip Code 43081-2737	Amount of Each Receipt this Period _____ 30.16		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, CMML BKG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 228.30		
		P/R Deduction (\$8.62 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 117.45
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 97
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. KURT L REIBER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3121 WOLF RUN CT		Transaction ID: PR5405781446
City State Zip Code CINCINNATI OH 45244-2500	Amount of Each Receipt this Period _____ 34.27	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REL MGR SR, CRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.32	P/R Deduction (\$8.89 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JOSEPH E MCGRAW		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2305 S. MAIN		Transaction ID: PR5406011446
City State Zip Code GOSHEN IN 46526-5225	Amount of Each Receipt this Period _____ 42.90	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICERIII-CB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 353.10	P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. WILLIAM A RILEY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3310 LENOX OVAL		Transaction ID: PR5406341446
City State Zip Code AVON OH 44011-2395	Amount of Each Receipt this Period _____ 27.19	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CAPTAIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 236.40	P/R Deduction (\$10.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 104.36
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) RENEE HOLCOMB-HARDWICK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3543 WOODRIDGE ROAD		Transaction ID: PR5406381446	
City State Zip Code CLEVELAND HTS OH 44121-1533		Amount of Each Receipt this Period _____ 36.18	
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation SR FINANCIAL ADVISOR, BANK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 255.66	
		P/R Deduction (\$10.34 Bi-Weekly)	

B. Full Name (Last, First, Middle Initial) RICHARD S HAWRYLAK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 571 WEDGEWOOD DRIVE		Transaction ID: PR5406491446	
City State Zip Code AVON LAKE OH 44012-2538		Amount of Each Receipt this Period _____ 35.99	
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation MANAGING COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 274.90	
		P/R Deduction (\$9.33 Bi-Weekly)	

C. Full Name (Last, First, Middle Initial) GEORGE H STORAR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5495 CHANCERY BLVD.		Transaction ID: PR5406591446	
City State Zip Code GREENWOOD IN 46143-7170		Amount of Each Receipt this Period _____ 37.42	
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION		Occupation DISTRICT CREDIT OFFICER II -CB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 296.47	
		P/R Deduction (\$10.08 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 109.59
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 97
	<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

Full Name (Last, First, Middle Initial) A. JONATHAN M BOYLAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2149 WEST 7TH		Transaction ID: PR5406611446
City State Zip Code CLEVELAND OH 44113-3621	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, MARKET RISK & SEC COMP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 480.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. JOSEPH P CONROY JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2530 CANYON CREEK DR		Transaction ID: PR5406651446
City State Zip Code HINCKLEY OH 44233-9699	Amount of Each Receipt this Period _____ 57.18	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT EXECUTIVE - IB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 402.65	P/R Deduction (\$16.34 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. ERIC D BABBERT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6743 BALLANTRAE PLACE		Transaction ID: PR5406681446
City State Zip Code DUBLIN OH 43016-6021	Amount of Each Receipt this Period _____ 30.46	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT RETAIL LEADER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 288.05	P/R Deduction (\$9.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 147.64
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 97
	<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

Full Name (Last, First, Middle Initial) A. THOMAS M SPILMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5610 23RD AVE NE		Transaction ID: PR5406791446
City State Zip Code TACOMA WA 98422-1555	Amount of Each Receipt this Period _____ 55.38	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$18.46 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 443.04	

Full Name (Last, First, Middle Initial) B. FORREST F STANLEY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10875 SPERRY RD		Transaction ID: PR5406961446
City State Zip Code WILLOUGHBY OH 44094-5176	Amount of Each Receipt this Period _____ 29.67	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$11.61 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPUTY GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 259.31	

Full Name (Last, First, Middle Initial) C. TRENTON A TIPTON-FLETCHER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 16315 FERNWAY RD		Transaction ID: PR5407191446
City State Zip Code SHAKER HTS OH 44120-3365	Amount of Each Receipt this Period _____ 37.21	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$11.96 Bi-Weekly)
Name of Employer VICTORY CAPITAL MANAGEMENT INC	Occupation HEAD OF SECURITIZED BONDS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 284.39	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 122.26
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 97
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. KAREN R HAEFLING		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 15510 RUSSELL ROAD		Transaction ID: PR5407441446	
City CHAGRIN FALLS	State OH	Zip Code 44022-2670	Amount of Each Receipt this Period _____ 15.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF MARKETING OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 626.94		
		P/R Deduction (\$5.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. DONNA J DOLEZAL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P.O.BOX 771400		Transaction ID: PR5407521446	
City LAKWOOD	State OH	Zip Code 44107-0057	Amount of Each Receipt this Period _____ 30.79
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR BANKER, CMML BKG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 229.34		
		P/R Deduction (\$9.55 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. MARCIA C HAGLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 300 EAST KREPPS ROAD		Transaction ID: PR5407531446	
City XENIA	State OH	Zip Code 45385-9736	Amount of Each Receipt this Period _____ 28.92
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR III, MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 249.74		
		P/R Deduction (\$4.82 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 74.71
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 97
	<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

Full Name (Last, First, Middle Initial) A. EDWARD L MCGARRY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5407571446	
Mailing Address 2649 WESTFIELD AVENUE		Amount of Each Receipt this Period 31.83	
City DAYTON State OH Zip Code 45420-2377	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER I - CB	Aggregate Year-to-Date ▼ 254.64		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.61 Bi-Weekly)		

Full Name (Last, First, Middle Initial) B. KEITH J KORMOS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5407681446	
Mailing Address 21700 MEADOWS EDGE LANE		Amount of Each Receipt this Period 30.00	
City STRONGSVILLE State OH Zip Code 44149-2862	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MULTI-MARKET SALES MGR, KPB	Aggregate Year-to-Date ▼ 311.01		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.50 Bi-Weekly)		

Full Name (Last, First, Middle Initial) C. RANDAL SCHNABLE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5407901446	
Mailing Address 7263 HODGSON ROAD		Amount of Each Receipt this Period 30.53	
City MENTOR State OH Zip Code 44060-4640	FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TEAM LEADER, GTM PRODUCT MGMT	Aggregate Year-to-Date ▼ 248.91		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.57 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶	92.36
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 97
	<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

Full Name (Last, First, Middle Initial) A. CAROLL PETER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 11601 BASS LAKE RD		Transaction ID: PR5407931446	
City State Zip Code CHARDON OH 44024-8401	Amount of Each Receipt this Period _____ 36.35		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 419.96		P/R Deduction (\$12.12 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. BRUCE D MURPHY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 18935 BALLYMORE CIRCLE		Transaction ID: PR5408021446	
City State Zip Code STRONGSVILLE OH 44149-0922	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation COMMUNITY DEVELOPMENT BKG EXEC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. LAWRENCE A MACK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3445 COLTON ROAD		Transaction ID: PR5408361446	
City State Zip Code SHAKER HEIGHTS OH 44122-3828	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, PRIVATE LOAN MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 141.35
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 97
	<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

Full Name (Last, First, Middle Initial) A. ANN K LOUIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1833 HOLDENS ARBOR RUN		Transaction ID: PR5408521446	
City WESTLAKE State OH Zip Code 44145-2039	Amount of Each Receipt this Period _____ 42.27		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, INFORMATION SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 366.72		
		P/R Deduction (\$15.53 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. THOMAS S ALLEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2900 GLENGARY ROAD		Transaction ID: PR5408641446	
City SHAKER HEIGHTS State OH Zip Code 44120-1733	Amount of Each Receipt this Period _____ 39.81		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, WEALTH MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 353.13		
		P/R Deduction (\$13.85 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. CLINTON L WEDDELL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1116 FOREST ROAD		Transaction ID: PR5408881446	
City LAKEWOOD State OH Zip Code 44107-1043	Amount of Each Receipt this Period _____ 44.25		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SECTOR CREDIT EXECUTIVE - IB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 317.09		
		P/R Deduction (\$13.11 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 126.33
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 97
	<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. Full Name (Last, First, Middle Initial) HENRY L MEYER III Mailing Address 3385 ROUNDWOOD ROAD City CHAGRIN FALLS State OH Zip Code 44022-6637 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5408891446 Amount of Each Receipt this Period 75.00
Name of Employer KEYCORP Occupation CHAIRMAN OF THE BOARD & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$25.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) JENNIFER LYNN COY Mailing Address 8970 WHITE EAGLE EAST City SYLVANIA State OH Zip Code 43560-9598 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5409161446 Amount of Each Receipt this Period 37.47
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation PORTFOLIO MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.65	P/R Deduction (\$12.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) SCOTT A FOYE Mailing Address 34459 ST. MARON BLVD. City AVON State OH Zip Code 44011-3221 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5409651446 Amount of Each Receipt this Period 40.50
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation LOB CREDIT EXECUTIVE - CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.24	P/R Deduction (\$10.90 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	152.97
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 97
	<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

Full Name (Last, First, Middle Initial) A. JAMES A HOFFMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5409761446
Mailing Address 2660 WESTCHESTER ROAD		Amount of Each Receipt this Period 69.89
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 II	Aggregate Year-to-Date ▼ 509.16	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$19.97 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. JANICE L CULVER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410051446
Mailing Address 17311 RED FOX TRAIL		Amount of Each Receipt this Period 37.80
City CHAGRIN FALLS State OH Zip Code 44023-2110	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TRUST RESOURCE CTR MGR	Aggregate Year-to-Date ▼ 316.48	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$6.30 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. JOSEPH L WISSMAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410261446
Mailing Address 1740 FARRS GARDEN PATH		Amount of Each Receipt this Period 33.24
City WESTLAKE State OH Zip Code 44145-2066	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR PROJECT MANAGER	Aggregate Year-to-Date ▼ 249.96	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$8.62 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	140.93
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) KENNETH N SNYDER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410321446
Mailing Address 6406 CHELTENHAM DR		Amount of Each Receipt this Period 26.04
City State Zip Code TEMPERANCE MI 48182-1138	FEC ID number of contributing federal political committee. C	P/R Deduction (\$8.50 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION PORTFOLIO MANAGER	Aggregate Year-to-Date 222.82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

B. Full Name (Last, First, Middle Initial) LYNN S HAMILTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410411446
Mailing Address 288 ORION NE		Amount of Each Receipt this Period 6.00
City State Zip Code NORTH CANTON OH 44720-8602	FEC ID number of contributing federal political committee. C	P/R Deduction (\$2.00 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION PORTFOLIO MANAGER	Aggregate Year-to-Date 275.77	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

C. Full Name (Last, First, Middle Initial) ERNEST C PELIAI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5410581446
Mailing Address 2152 WYANDOTLE AVE		Amount of Each Receipt this Period 10.99
City State Zip Code LAKEWOOD OH 44107-6147	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.99 Bi-Weekly)
Name of Employer Occupation VICTORY CAPITAL MANAGEMENT INC PORTFOLIO MANAGER - FI	Aggregate Year-to-Date 220.89	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	43.03
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
CAREYL SPENCER

Mailing Address 5599 - B N. GREENWAY CT

City State Zip Code
HIGHLAND HEIGHTS OH 44143

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
SR FINANCIAL ADVISOR, BANK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
317.44

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5410641446

Amount of Each Receipt this Period
42.06

P/R Deduction (\$10.90 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MICHAEL P BARNUM

Mailing Address 363 WALMAR DRIVE

City State Zip Code
BAY VILLAGE OH 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 ▼
511.26

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5410681446

Amount of Each Receipt this Period
63.00

P/R Deduction (\$16.96 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MARY A FOX

Mailing Address 3630 MEADOWBROOK BLVD

City State Zip Code
CLEVELAND HEIGHTS OH 44118-3630

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
DISTRICT OP LEADER, RETAIL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5410891446

Amount of Each Receipt this Period
30.00

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

SUBTOTAL of Receipts This Page (optional)	135.06
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. JEROME M BIELEK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8207 MANOR GATE WAY		Transaction ID: PR5410901446
City State Zip Code MENTOR OH 44060-5969	Amount of Each Receipt this Period _____ 40.50	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 322.80	P/R Deduction (\$12.46 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. DAVID K SANDERSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 680 ASHBURY		Transaction ID: PR5410951446
City State Zip Code PERRYSBURG OH 43551-2971	Amount of Each Receipt this Period _____ 28.68	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR CONSUMER PRODUCT MGR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 219.18	P/R Deduction (\$8.90 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. ROBERT G KULA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6627 BENEDICT DRIVE		Transaction ID: PR5411001446
City State Zip Code MIDDLEBURG HEIGHTS OH 44130-7924	Amount of Each Receipt this Period _____ 37.50	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIR. QUANTITATIVE RISK ANALYTICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 106.68
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 97
	<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

Full Name (Last, First, Middle Initial) A. ROSALYN A CIULLA		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 17601 HARLAND AVE		Transaction ID: PR5411501446		
City State Zip Code CLEVELAND OH 44119-1929	Amount of Each Receipt this Period _____ 20.58		P/R Deduction (\$10.29 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation TEAM LEADER IV, CDL			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 279.13			

Full Name (Last, First, Middle Initial) B. STEPHEN J MATESEVAC		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 499 SAWGRASS DR.		Transaction ID: PR5411511446		
City State Zip Code FAIRLAWN OH 44333-9224	Amount of Each Receipt this Period _____ 37.70		P/R Deduction (\$10.15 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 288.84			

Full Name (Last, First, Middle Initial) C. MARIANNE E MEOLA		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 20830 BLACKSMITH FORGE		Transaction ID: PR5411701446		
City State Zip Code ESTERO FL 33928-2295	Amount of Each Receipt this Period _____ 27.57		P/R Deduction (\$8.17 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____				
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPT MGR II, OPERATIONS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 202.18			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 85.85
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) KAROL A HIGAKI Mailing Address 1814 MEADOW DR City HINCKLEY State OH Zip Code 44233-9523 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411871446 Amount of Each Receipt this Period 28.27
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, INFORMATION SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.83	P/R Deduction (\$7.33 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) WILLIAM J BLAKE Mailing Address 3404 ORCHESTRA STREET City CUYAHOGA FALLS State OH Zip Code 44223-3556 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5411981446 Amount of Each Receipt this Period 52.84
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DEPUTY GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.02	P/R Deduction (\$14.23 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) DONALD P HENDERSON Mailing Address 17441 LAKESEDGE TRAIL City CHAGRIN FALLS State OH Zip Code 44023-2118 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412341446 Amount of Each Receipt this Period 27.46
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation AVIATION DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.81	P/R Deduction (\$12.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	108.57
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) PAUL M BRENNER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412521446
Mailing Address 3772 RIVER LANE		Amount of Each Receipt this Period 31.07
City State Zip Code ROCKY RIVER OH 44116-3821	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.04 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REL MGR VI, WEALTH MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.47	

B. Full Name (Last, First, Middle Initial) MARIE JEFFERSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412881446
Mailing Address 3365 KENMORE ROAD		Amount of Each Receipt this Period 26.04
City State Zip Code SHAKER HEIGHTS OH 44122-3458	FEC ID number of contributing federal political committee. C	P/R Deduction (\$6.51 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGEMENT REPORTING MGR III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.87	

C. Full Name (Last, First, Middle Initial) AMY K CARLSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412911446
Mailing Address 2884 WOODBURY RD		Amount of Each Receipt this Period 144.24
City State Zip Code SHAKER HEIGHTS OH 44120-2426	FEC ID number of contributing federal political committee. C	P/R Deduction (\$48.08 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GRP HD, DCM ORIG & STRUCTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 683.71	

SUBTOTAL of Receipts This Page (optional)	201.35
TOTAL This Period (last page this line number only)	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) RICHARD E MCERLEANJR Mailing Address 7511 LASCALA DRIVE City HUDSON State OH Zip Code 44236-1845 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412931446 Amount of Each Receipt this Period 42.90 P/R Deduction (\$13.20 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICERIII-CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 334.95		

B. Full Name (Last, First, Middle Initial) COLLETTE E WHIMS Mailing Address 637 NORBURY DRIVE City HUDSON State OH Zip Code 44236-4685 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5412941446 Amount of Each Receipt this Period 25.81 P/R Deduction (\$6.69 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation FINANCE MANAGER II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.39		

C. Full Name (Last, First, Middle Initial) LESLIE Z GLOBITS Mailing Address 3828 WOODPATH TRAIL City WESTLAKE State OH Zip Code 44145-5703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5413001446 Amount of Each Receipt this Period 32.31 P/R Deduction (\$9.23 Bi-Weekly)
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation MID CIO SM/MID CAP INVESTMENTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 254.76		

SUBTOTAL of Receipts This Page (optional)	101.02
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 97
	<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. Full Name (Last, First, Middle Initial) FREDERICK L RUESS Mailing Address 644 GOLDEN EAGLE CIRCLE City State Zip Code GOLDEN CO 80401-0909 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5413871446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation TEAM SALES LEADER PEG Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B. Full Name (Last, First, Middle Initial) MICHAEL DILLON Mailing Address 14797 GLEN EDEN DRIVE City State Zip Code NAPLES FL 34110-4607 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414361446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C. Full Name (Last, First, Middle Initial) KAREN BLUE Mailing Address 1800 HALLS CARRIAGE PATH City State Zip Code WESTLAKE OH 44145-2031 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414381446 Amount of Each Receipt this Period 49.51 P/R Deduction (\$12.38 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIR HR RELATIONSHIP MGMT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.41	

SUBTOTAL of Receipts This Page (optional)	109.51
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 97
	<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

Full Name (Last, First, Middle Initial) A. WILLIAM C MURSCHEL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414421446
Mailing Address 5240 MAPLE SPRINGS DRIVE		Amount of Each Receipt this Period 32.10
City State Zip Code CHAGRIN FALLS OH 44022-4139	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.70 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP MGR-FIELD PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.80	

Full Name (Last, First, Middle Initial) B. MARYANN HOGAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414431446
Mailing Address 22827 LAKE ROAD UNIT # 6		Amount of Each Receipt this Period 37.76
City State Zip Code ROCKY RIVER OH 44116-1065	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.79 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT PROCESS MGR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.32	

Full Name (Last, First, Middle Initial) C. WILLIAM BARNES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5414871446
Mailing Address 2020 BERKSHIRE ROAD		Amount of Each Receipt this Period 139.43
City State Zip Code GATES MILLS OH 44040-9764	FEC ID number of contributing federal political committee. C	P/R Deduction (\$43.27 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, INST CRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1019.26	

SUBTOTAL of Receipts This Page (optional) ▶	209.29
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 97
	<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

Full Name (Last, First, Middle Initial) A. KARL G GRUNAWALT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14730 RINDLEWOOD LANE		Transaction ID: PR5415111446	
City NOVELTY	State OH	Zip Code 44072-9590	Amount of Each Receipt this Period _____ 63.00
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CORP BANK CREDIT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 490.50		
		P/R Deduction (\$18.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. JOHN M RYAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8410 BAINBROOK DRIVE		Transaction ID: PR5415211446	
City CHAGRIN FALLS	State OH	Zip Code 44023-4802	Amount of Each Receipt this Period _____ 46.01
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation PORTFOLIO MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 344.25		
		P/R Deduction (\$11.93 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. LISA M SEBALLOS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13401 TRENTON TRAIL		Transaction ID: PR5415481446	
City MIDDLEBURG HEIGHTS	State OH	Zip Code 44130-6824	Amount of Each Receipt this Period _____ 29.07
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation LOB FINANCE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 257.76		
		P/R Deduction (\$8.48 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional)	_____ 138.08
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 97
	<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

Full Name (Last, First, Middle Initial) A. DONALD F STAWOWY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 20553 BRADGATE LANE		Transaction ID: PR5415531446	
City State Zip Code STRONGSVILLE OH 44149-6779	Amount of Each Receipt this Period _____ 44.55		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR II, FINANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 342.30		P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. D KIRK JACOBSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8709 HOLLIS COURT		Transaction ID: PR5415571446	
City State Zip Code BRECKSVILLE OH 44141-2030	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT EXECUTIVE, BUSINESS BAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. JOSEPH R SCHIESLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 851 DORGENE LANE		Transaction ID: PR5416141446	
City State Zip Code CINCINNATI OH 45244-5038	Amount of Each Receipt this Period _____ 28.98		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation BUSINESS BANKING RM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 212.12		P/R Deduction (\$9.57 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 103.53
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 97
	<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

Full Name (Last, First, Middle Initial) A. WAYNE K GUESSFORD		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5534 WHISPER LANE		Transaction ID: PR5416181446	
City State Zip Code CINCINNATI OH 45230-5136	Amount of Each Receipt this Period _____ 34.26		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, INSTITUTIONAL BKNG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 272.83		P/R Deduction (\$8.88 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. RONALD J DUGAS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5707 WESTMINSTER DRIVE		Transaction ID: PR5416281446	
City State Zip Code SOLON OH 44139-1979	Amount of Each Receipt this Period _____ 62.31		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CHIEF COMPLIANCE OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 498.48		P/R Deduction (\$20.77 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. WILLIAM M LETTIG		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 335 240TH PL S.E.		Transaction ID: PR5417811446	
City State Zip Code SAMMAMISH WA 98074-3683	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, COMMERCIAL BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 126.57
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 97
	<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

Full Name (Last, First, Middle Initial) A. LARRY T BURKE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419071446
Mailing Address 10014 DAY ROAD NE		Amount of Each Receipt this Period 59.98
City BAINBRIDGE ISLAND State WA Zip Code 98110-3306		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER III-CB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.58	P/R Deduction (\$18.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. THOMAS A ELMER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419181446
Mailing Address 11357 S.E. HIGHLAND LOOP		Amount of Each Receipt this Period 38.09
City CLACKAMAS State OR Zip Code 97015-7234		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER II -CB		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.31	P/R Deduction (\$11.72 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. THOMAS W HOSEA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5419291446
Mailing Address 5505 64TH AVE WEST		Amount of Each Receipt this Period 33.72
City TACOMA State WA Zip Code 98467-2915		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation REGIONAL GOVT RELATIONS MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.76	P/R Deduction (\$11.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	131.79
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 97
	<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. Full Name (Last, First, Middle Initial)
ROBERT D HILTON

Mailing Address 778 E. LINCOLN

City State Zip Code
WOODBURN OR 97071-5036

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
BB BSC MGR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.53

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5419611446

Amount of Each Receipt this Period
28.57

P/R Deduction (\$8.79 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
GARY P KOCH

Mailing Address 5981 SE ARCADIA RD.

City State Zip Code
SHELTON WA 98584-8330

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

Name of Employer
KEYBANK NATIONAL ASSOCIATION

Occupation
BUS BNKNG SALES LEADER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5419641446

Amount of Each Receipt this Period
60.00

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

C. Full Name (Last, First, Middle Initial)
THOMAS E HELFRICH

Mailing Address 2751 SHERBROOKE ROAD

City State Zip Code
SHAKER HEIGHTS OH 44122-1829

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

Name of Employer
KEYCORP

Occupation
EVP & CHIEF HR OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
633.24

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5420081446

Amount of Each Receipt this Period
15.00

P/R Deduction (\$5.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	103.57
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 97
	<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

Full Name (Last, First, Middle Initial) A. CHARLES D EDDY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 671223		Transaction ID: PR5420121446	
City CHUGIAK State AK Zip Code 99567-1223	Amount of Each Receipt this Period _____ 28.69		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation LOAN WORKOUT SR ACCT MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 216.78		
		P/R Deduction (\$9.56 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. ANGELA D KARGES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 14164 SWEETBRIAR LANE		Transaction ID: PR5420131446	
City NOVELTY State OH Zip Code 44072-9786	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR HR DIR, COMP & BENEFITS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. BRIAN G NERLAND		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6821 SKY CIRCLE		Transaction ID: PR5420191446	
City ANCHORAGE State AK Zip Code 99502-3979	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$10.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 88.69
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) NICHOLAS S EDWARDS Mailing Address 3846 WEST SUDBURY CT City State Zip Code BELLBROOK OH 45305-1882 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5420251446 Amount of Each Receipt this Period 28.16 P/R Deduction (\$9.05 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION FINANCIAL ADVISOR IV, BANK Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 206.24		

B. Full Name (Last, First, Middle Initial) DENNIS W WAGNER Mailing Address 32765 WINTERGREEN DR City State Zip Code SOLON OH 44139-1361 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5420821446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation KEY PRINCIPAL PARTNERS CO-RP DIRECTOR I, FINANCE Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

C. Full Name (Last, First, Middle Initial) MICHELE A SEYRANIAN Mailing Address 24545 SHAKER BLVD. City State Zip Code BEACHWOOD OH 44122-2349 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5420881446 Amount of Each Receipt this Period 56.49 P/R Deduction (\$18.83 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIATION GROUP EXECUTIVE - E/C Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 451.92		

SUBTOTAL of Receipts This Page (optional)	114.65
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 97
	<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

Full Name (Last, First, Middle Initial) A. WESLEY W LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5421301446
Mailing Address 17404 BERGIS FARM DR.		Amount of Each Receipt this Period 37.50
City LAKE OSWEGO State OR Zip Code 97034-6134		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REGIONAL PRESIDENT II - PNW Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. TERRENCE J STONE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5421741446
Mailing Address 3862 SILSBY COURT		Amount of Each Receipt this Period 33.00
City AVON State OH Zip Code 44011-3476		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER, CM&C Aggregate Year-to-Date ▼ 264.00	P/R Deduction (\$11.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. ALYCE R JUBY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5421851446
Mailing Address 222 GILES AVE		Amount of Each Receipt this Period 27.00
City BLISSFIELD State MI Zip Code 49228-1221		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation REGIONAL TRUST MANAGER I Aggregate Year-to-Date ▼ 213.91	P/R Deduction (\$6.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	97.50
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 97
	<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

Full Name (Last, First, Middle Initial) A. ROBERT F POLLIS JR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 33 MAIN ST.		Transaction ID: PR5422511446	
City BOWDOINHAM	State ME	Zip Code 04008-4420	Amount of Each Receipt this Period _____ 32.71
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation ABL PORTFOLIO MANAGER 3		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 255.65		
		P/R Deduction (\$9.69 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. MARSELLA MARTINO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 12583 LARCHMERE BLVD.		Transaction ID: PR5422961446	
City CLEVELAND	State OH	Zip Code 44120-1107	Amount of Each Receipt this Period _____ 29.59
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation ANALYST, CAP MKTS RESEARCH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 235.44		
		P/R Deduction (\$7.67 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. ANDREW R SHAVER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8650 BUFFETT PARKWAY		Transaction ID: PR5423051446	
City FISHERS	State IN	Zip Code 46038-3564	Amount of Each Receipt this Period _____ 27.75
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR IV, BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 234.30		
		P/R Deduction (\$8.68 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 90.05
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 97
	<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

Full Name (Last, First, Middle Initial) A. STEVEN J BARKER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7534 159TH PL. N.E. #D121		Transaction ID: PR5423411446
City State Zip Code REDMOND WA 98052-4312	Amount of Each Receipt this Period _____ 26.51	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$9.22 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR REL MGR, CMML BKG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 252.46	

Full Name (Last, First, Middle Initial) B. TERI R KOCH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 21527 96TH ST E		Transaction ID: PR5423431446
City State Zip Code BUCKLEY WA 98321-8499	Amount of Each Receipt this Period _____ 32.34	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$10.78 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT OP LEADER, RETAIL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 258.72	

Full Name (Last, First, Middle Initial) C. BRUCE E TRENT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 35 MALLARD DR.		Transaction ID: PR5423531446
City State Zip Code REXFORD NY 12148-1515	Amount of Each Receipt this Period _____ 45.82	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$11.88 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER V ETO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 346.25	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 104.67
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 97
	<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

Full Name (Last, First, Middle Initial) A. SCOTT A MURRAY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 428 TROY SCHENECTADY RD.		Transaction ID: PR5423701446
City State Zip Code LATHAM NY 12110-3234	Amount of Each Receipt this Period _____ 45.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MANAGER III ETO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. MARLENE B SHARAK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1197 GROVE LANE		Transaction ID: PR5424441446
City State Zip Code MEDINA OH 44256-6781	Amount of Each Receipt this Period _____ 25.44	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPT MGR III, OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 205.08	P/R Deduction (\$9.16 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. NORMAN V NICHOLS JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2544 FAWN RIDGE		Transaction ID: PR5425321446
City State Zip Code CASTLETON NY 12033-9570	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR LDR PEG MORTGAGE CO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 100.44
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. RAYMOND A NOWAK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 657 BRIDGESIDE DR.		Transaction ID: PR5425421446
City AVON LAKE	State OH	Zip Code 44012-2771
Amount of Each Receipt this Period _____ 43.12		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation ARG ADMINISTRATIVE EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 305.28	
		P/R Deduction (\$13.38 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. HELEN W FRANCE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 124 HASKELL DRIVE		Transaction ID: PR5425431446
City BRATENAHL	State OH	Zip Code 44108-1157
Amount of Each Receipt this Period _____ 30.29		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MD, INSTITUTIONAL BKNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 305.73	
		P/R Deduction (\$12.98 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. BETH FEGAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 17421 LEXINGTON LANE		Transaction ID: PR5425451446
City STRONGSVILLE	State OH	Zip Code 44136-7218
Amount of Each Receipt this Period _____ 26.25		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIV MGR IV, OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	
		P/R Deduction (\$8.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 99.66
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 97
	<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

Full Name (Last, First, Middle Initial) A. THOMAS TULODZIESKI		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 2865 CARRINGTON ST. N.W.		Transaction ID: PR5425471446		
City NORTH CANTON State OH Zip Code 44720-8176	Amount of Each Receipt this Period _____ 58.50		P/R Deduction (\$19.50 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT PRESIDENT III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 468.00			

Full Name (Last, First, Middle Initial) B. RICHARD M KAMATS		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 38 FOX CHAPEL DRIVE		Transaction ID: PR5425621446		
City ORCHARD PARK State NY Zip Code 14127-3024	Amount of Each Receipt this Period _____ 30.00		P/R Deduction (\$10.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MGR, CMMML BKG REL TEAM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00			

Full Name (Last, First, Middle Initial) C. CATHY L ROWLEY		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 434 FOXBOROUGH DR		Transaction ID: PR5425661446		
City BRUNSWICK State OH Zip Code 44212-4340	Amount of Each Receipt this Period _____ 54.81		P/R Deduction (\$18.27 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR MGR HR RELATIONSHIP MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 438.48			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 143.31
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 97
	<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

Full Name (Last, First, Middle Initial) A. MELISSA RODRIGUE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 82 SCOTT ROAD		Transaction ID: PR5431101446
City SOUTH PORTLAND	State ME	Zip Code 04106-3417
Amount of Each Receipt this Period _____ 12.50		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR III, BANK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 275.00	
		P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. KAREN ZALEWSKI-WILDZUNAS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 132 OREGON AVE		Transaction ID: PR5452111446
City SCHENECTADY	State NY	Zip Code 12304-1618
Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation BUS BNKNG SALES LEADER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	
		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. BRIAN NELLIGAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 11091		Transaction ID: PR5454961446
City ALBANY	State NY	Zip Code 12211-0091
Amount of Each Receipt this Period _____ 26.28		
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation APPLICATIONS SYS CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 203.82	
		P/R Deduction (\$8.39 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 68.78
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. CARL J LUGER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5458981446
Mailing Address 5 PICCADILLY SQUARE		Amount of Each Receipt this Period 30.00
City ROCHESTER	State NY	P/R Deduction (\$10.00 Bi-Weekly)
Zip Code 14625-1367	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SR BANKER, CMML BKG Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. ROY R D'SA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5463701446
Mailing Address 12531 COOPERS RUN		Amount of Each Receipt this Period 37.50
City STRONGSVILLE	State OH	P/R Deduction (\$12.50 Bi-Weekly)
Zip Code 44149-9242	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation DIRECTOR, CORPORATE INITIATIVE Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. DENISE MARCHESE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5468201446
Mailing Address 5319 MAPLEWOOD CIRCLE		Amount of Each Receipt this Period 30.00
City SHEFFIELD VILLAGE	State OH	P/R Deduction (\$10.00 Bi-Weekly)
Zip Code 44054-2404	FEC ID number of contributing federal political committee. C	
Name of Employer KEYBANK NATIONAL ASSOCIATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation DIRECTOR II, FINANCE Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	97.50
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 97
	<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

Full Name (Last, First, Middle Initial) A. JAN G PYNAPPEL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6360 TRAILRIDGE CT		Transaction ID: PR5479661446
City State Zip Code LOVELAND OH 45140-8156	Amount of Each Receipt this Period _____ 45.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR MGR, BUSINESS MGT-KHI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. MICHAEL J MONROE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6973 GATES RD		Transaction ID: PR5479821446
City State Zip Code GATES MILLS OH 44040-9666	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1150.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. JOHN R SINNENBERG		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 23276 LAURELDALE ROAD		Transaction ID: PR5480591446
City State Zip Code SHAKER HEIGHTS OH 44122-2103	Amount of Each Receipt this Period _____ 210.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEY PRINCIPAL PARTNERS CORP	Occupation CHAIRMAN, KEY PRINCIPAL PRTRNR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	P/R Deduction (\$70.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 355.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 97
	<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

Full Name (Last, First, Middle Initial) A. SCOTT P SHOPE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 7423 LEE REA ROAD		Transaction ID: PR5483741446
City CHARLOTTE State NC Zip Code 28226-7598	Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR-KEY HOME IMPROVEMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. REGINALD C FULLER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 22 CHESTERFIELD DRIVE		Transaction ID: PR5483921446
City VOORHEESVILLE State NY Zip Code 12186-9200	Amount of Each Receipt this Period 51.93	
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MARKET PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.44	P/R Deduction (\$17.31 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. GARY A HERRINGTON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 343 W BRAMBLE CIR		Transaction ID: PR5489351446
City COPLEY State OH Zip Code 44321-2780	Amount of Each Receipt this Period 46.86	
FEC ID number of contributing federal political committee. C		
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation LEAD BUSINESS SYSTEMS ANALYST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.88	P/R Deduction (\$15.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	143.79
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 97
	<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

Full Name (Last, First, Middle Initial) A. YVONNE W CONRAD		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3280 BEECHWOOD AVE		Transaction ID: PR5495151446	
City State Zip Code CLEVELAND HTS OH 44118-1843	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MARKET SPACE COORD/PROJECT MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. KEVIN J KWIATKOWSKI		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3131 BEACHWOOD		Transaction ID: PR5514541446	
City State Zip Code OREGON OH 43616-2305	Amount of Each Receipt this Period _____ 25.62		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation FINANCIAL ADVISOR IV, BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 204.96		P/R Deduction (\$8.54 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. RODNEY L WIGGINS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 668 BARRETT RD		Transaction ID: PR5520351446	
City State Zip Code BEREA OH 44017-1025	Amount of Each Receipt this Period _____ 25.08		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DEPT MGR III, OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 200.64		P/R Deduction (\$8.36 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 80.70
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) CYNTHIA G KOURY Mailing Address PO BOX 212 City State Zip Code GATES MILLS OH 44040-0212 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR5523141446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation VICTORY CAPITAL MANAGEMENT SR PORTFOLIO MANAGER INC Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

B. Full Name (Last, First, Middle Initial) JOSEPH A FRANK Mailing Address 4389 ARDMORE ROAD City State Zip Code SOUTH EUCLID OH 44121-3620 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR5532261446 Amount of Each Receipt this Period 34.62 P/R Deduction (\$11.54 Bi-Weekly)
Name of Employer Occupation KEYBANK NATIONAL ASSOCIAT- SR MGR I, FINANCE ION Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 276.96		

C. Full Name (Last, First, Middle Initial) PAUL G PASICZNYK Mailing Address 7754 SUNSTONE DRIVE City State Zip Code BRECKSVILLE OH 44141-2170 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR5556651446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Occupation VICTORY CAPITAL MANAGEMENT REGIONAL SALES MGR INC Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	94.62
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 97
	<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) ROBERT K WILEY Mailing Address P.O.BOX 14937 City CLEVELAND State OH Zip Code 44114-0937 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5583031446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation LOB CREDIT EXECUTIVE - CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

B. Full Name (Last, First, Middle Initial) PATRICE P O'CONNELL Mailing Address 16620 YELLOWSTONE CIRCLE City EAGLE RIVER State AK Zip Code 99577-9407 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584431446 Amount of Each Receipt this Period 45.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DISTRICT CREDIT OFFICER I - CB Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		

C. Full Name (Last, First, Middle Initial) MARY G MURRAY Mailing Address 243 HIGH STREET City CHAGRIN FALLS State OH Zip Code 44022-2558 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584761446 Amount of Each Receipt this Period 36.18 P/R Deduction (\$12.06 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR CREDIT OFFICER - REC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.44		

SUBTOTAL of Receipts This Page (optional)	111.18
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 97
	<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

Full Name (Last, First, Middle Initial) A. MICHAEL B HOBBS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5584981446	
Mailing Address 3166 SOUTH HILLS COURT		Amount of Each Receipt this Period 57.75	
City State Zip Code DENVER CO 80210-6830	FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.25 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

Full Name (Last, First, Middle Initial) B. PHILIP G SCHULTZ		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5587891446	
Mailing Address 120 BALSAM LANE		Amount of Each Receipt this Period 30.00	
City State Zip Code BOULDER CO 80304-0462	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation DIRECTOR I, LEASING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. MICHAEL R HANSEN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5595891446	
Mailing Address 995 SOUTH MINER STREET		Amount of Each Receipt this Period 30.00	
City State Zip Code COLVILLE WA 99114-9324	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation KEY CENTER MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	117.75
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 97
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial) KEVIN B MEEKS Mailing Address 5326 NAKOMA DRIVE City DALLAS State TX Zip Code 75209-5620 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5597571446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer: KEYBANK NATIONAL ASSOCIATION Occupation: REGIONAL SALES MGR, CRE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

B. Full Name (Last, First, Middle Initial) STEPHANIE GALLUP Mailing Address 2083 ARTHUR AVENUE City WESTLAKE State OH Zip Code 44145-3404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5600111446 Amount of Each Receipt this Period 29.85 P/R Deduction (\$9.95 Bi-Weekly)
Name of Employer: KEYBANK NATIONAL ASSOCIATION Occupation: PROJECT MGR LEAD, OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.80		

C. Full Name (Last, First, Middle Initial) TERRY D KOUBELE Mailing Address 33105 10TH PL SW City FEDERAL WAY State WA Zip Code 98023-5204 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5615061446 Amount of Each Receipt this Period 37.50 P/R Deduction (\$12.50 Bi-Weekly)
Name of Employer: KEYBANK NATIONAL ASSOCIATION Occupation: DIV MGR IV, OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	97.35
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 97
	<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

Full Name (Last, First, Middle Initial) A. DAVID M SANDERS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2774 GIFFORDS CHURCH ROAD		Transaction ID: PR5633181446	
City State Zip Code DUANESBURG NY 12056-3901	Amount of Each Receipt this Period _____ 34.62		
FEC ID number of contributing federal political committee. C			
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation FIELD SALES REP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 276.96		P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. THOMAS X GEISEL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 25 NEWELL COURT		Transaction ID: PR5634121446	
City State Zip Code MENANDS NY 12204-1226	Amount of Each Receipt this Period _____ 37.50		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL PRESIDENT II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. THOMAS R HAWN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1814 EAST 40TH STREET SUITE 6E		Transaction ID: PR5645091446	
City State Zip Code CLEVELAND OH 44103-3527	Amount of Each Receipt this Period _____ 72.99		
FEC ID number of contributing federal political committee. C			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MARKET SPACE SEGMENT MGR II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 583.92		P/R Deduction (\$24.33 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 145.11
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 97
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

Full Name (Last, First, Middle Initial) A. MARCIA C GREEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 228 BELLVUE ROAD		Transaction ID: PR5653901446
City State Zip Code GOLDEN CO 80401-9482	Amount of Each Receipt this Period _____ 36.57	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REL MGR SR, CRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 264.38	P/R Deduction (\$10.45 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. EDWARD J BURKE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 429 W. 57TH TERRACE		Transaction ID: PR5662191446
City State Zip Code KANSAS CITY MO 64113-1271	Amount of Each Receipt this Period _____ 117.11	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation 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 ▼ _____ 781.73	P/R Deduction (\$36.35 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. RICHARD A HARRIS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 640 ARLINGTON AVENUE		Transaction ID: PR5662391446
City State Zip Code WESTFIELD NJ 07090-2104	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation CREDIT EXECUTIVE - REC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 183.68
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 97
	<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. Full Name (Last, First, Middle Initial)
JONATHAN O CRANE

Mailing Address 7658 WOODSPRING LANE

City State Zip Code
HUDSON OH 44236-1857

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

Name of Employer Occupation
KEYBANC CAPITAL MARKETS INC. MD, INSTITUTIONAL BKNG

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 415.44

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5669201446

Amount of Each Receipt this Period
51.93

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

B. Full Name (Last, First, Middle Initial)
WILLIAM R KOEHLER

Mailing Address 540 HAWTHORNE STREET

City State Zip Code
BIRMINGHAM MI 48009-3715

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5681661446

Amount of Each Receipt this Period
75.00

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

C. Full Name (Last, First, Middle Initial)
ROBERT H MUSSER

Mailing Address 17815 SHAKER BLVD

City State Zip Code
SHAKER HEIGHTS OH 44120-1747

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

Name of Employer Occupation
KEYBANC CAPITAL MARKETS INC. SLS REP SR, INST FL-CM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5683831446

Amount of Each Receipt this Period
21.00

P/R Deduction (\$21.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	147.93
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 97
	<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. Full Name (Last, First, Middle Initial) LYNN F MOHL Mailing Address 4528 SECRETARIAT COURT City AVON State OH Zip Code 44011-3648 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5684651446 Amount of Each Receipt this Period 43.20
Name of Employer KEYBANC CAPITAL MARKETS INC. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation GRP MGR INVESTMENT OPERATIONS Aggregate Year-to-Date ▼ 345.60	P/R Deduction (\$14.40 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) WILLIAM A WAHL Mailing Address 29344 REGENCY CIRCLE City WESTLAKE State OH Zip Code 44145-6703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5685681446 Amount of Each Receipt this Period 20.00
Name of Employer KEYBANC CAPITAL MARKETS INC. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SLS REP SR, INST FL-CM Aggregate Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Monthly)

C. Full Name (Last, First, Middle Initial) MICHAEL O'CONNOR Mailing Address 45 WILDING CHASE City CHAGRIN FALLS State OH Zip Code 44022-2500 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5690141446 Amount of Each Receipt this Period 25.00
Name of Employer KEYBANC CAPITAL MARKETS INC. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation SLS REP SR, INST FL-CM Aggregate Year-to-Date ▼ 275.00	P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	88.20
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 97
	<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. Full Name (Last, First, Middle Initial) DAVID A RENTA Mailing Address 1712 WRIGHT AVE City State Zip Code ROCKY RIVER OH 44116-1912 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5693191446 Amount of Each Receipt this Period 60.00 P/R Deduction (\$20.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SECTOR MGR, FX SALES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		

B. Full Name (Last, First, Middle Initial) CLARK W ROGERS Mailing Address 3408 W. 71ST STREET City State Zip Code SHAWNEE MISSION KS 66208-3115 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5695941446 Amount of Each Receipt this Period 30.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation SR MGR SPEC SERV & ASSET MGT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

C. Full Name (Last, First, Middle Initial) THOMAS M SEAY Mailing Address 2842 SEDGEWICK RD. City State Zip Code SHAKER HEIGHTS OH 44120-1838 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5698481446 Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer VICTORY CAPITAL MANAGEMENT INC Occupation HEAD OF FI INVESTMENTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00		

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 97
	<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

Full Name (Last, First, Middle Initial) A. D GREGORY WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2617 - 280TH PLACE NE		Transaction ID: PR5702511446
City State Zip Code REDMOND WA 98053-3118	Amount of Each Receipt this Period _____ 33.87	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$11.29 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation SR SALES REP, SBA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.96	

Full Name (Last, First, Middle Initial) B. MARGOT J COPELAND		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 13900 SHAKER BOULEVARD SUITE 1216		Transaction ID: PR5724831446
City State Zip Code CLEVELAND OH 44120-1575	Amount of Each Receipt this Period _____ 60.57	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.19 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, CORP CONTR & DIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 484.56	

Full Name (Last, First, Middle Initial) C. JAMES S MESTNIK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8178 W. CHESTNUT AVE.		Transaction ID: PR5739551446
City State Zip Code LITTLETON CO 80128-5528	Amount of Each Receipt this Period _____ 27.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$9.00 Bi-Weekly)
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation REL MGR SR, LEASE SYNDICATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 216.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 121.44
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 97
	<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. Full Name (Last, First, Middle Initial)
DANIEL G FINNEGAN

Mailing Address 10546 GREENCREST DRIVE

City State Zip Code
TAMPA FL 33626-5201

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION TEAM SLS LDR, CRE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5753221446

Amount of Each Receipt this Period
60.00

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

B. Full Name (Last, First, Middle Initial)
ERSKINE E CADE

Mailing Address 635 WEST LAKESIDE AVENUE
UNIT 601

City State Zip Code
CLEVELAND OH 44113-1093

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DIRECTOR- GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 655.44

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5758191446

Amount of Each Receipt this Period
81.93

P/R Deduction (\$27.31 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
PAUL N HARRIS

Mailing Address 2889 NORTH PARK BLVD

City State Zip Code
CLEVELAND HEIGHTS OH 44118-4030

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

Name of Employer Occupation
KEYCORP GENERAL COUNSEL & SECRETARY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 931.18

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5763291446

Amount of Each Receipt this Period
30.00

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

SUBTOTAL of Receipts This Page (optional)	171.93
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 97
	<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. Full Name (Last, First, Middle Initial)
JULIE JOSEFORSKY

Mailing Address 2375 SPRINGSIDE OVAL

City BRECKSVILLE State OH Zip Code 44141-3358

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation DIRECTOR, HOME EQUITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5800271446

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
JEFFREY C HASSLER

Mailing Address 34635 PLANTATION PLACE

City NORTH RIDGEVILLE State OH Zip Code 44039-4497

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation MANAGER III ETO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.88

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5800971446

Amount of Each Receipt this Period
33.36

P/R Deduction (\$11.12 Bi-Weekly)

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

Mailing Address 1949 BORDEAUX WAY

City WESTLAKE State OH Zip Code 44145-3066

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

Name of Employer KEYBANK NATIONAL ASSOCIATION Occupation CORPORATE TAX DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5801281446

Amount of Each Receipt this Period
60.00

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

SUBTOTAL of Receipts This Page (optional)	143.36
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 97
	<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. Full Name (Last, First, Middle Initial)
DON GOSCICKI

Mailing Address 537 WESTFIELD ROAD

City State Zip Code
SCOTCH PLAINS NJ 07076-1815

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

Name of Employer Occupation
KEY EQUIPMENT FINANCE INC. SALES REP SR, LEASING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5812821446

Amount of Each Receipt this Period
30.00

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

B. Full Name (Last, First, Middle Initial)
CHARLES STEPHEN HYLE

Mailing Address 2994 COURTLAND BLVD.

City State Zip Code
SHAKER HEIGHTS OH 44122-2804

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION EVP, CHIEF RISK OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1042.20

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5821081446

Amount of Each Receipt this Period
30.00

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

C. Full Name (Last, First, Middle Initial)
STEVE YATES

Mailing Address 7110 KINSMAN ROAD

City State Zip Code
NOVELTY OH 44072-9512

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION GROUP HEAD INFORMATION TECH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2229.77

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5831771446

Amount of Each Receipt this Period
243.27

P/R Deduction (\$84.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	303.27
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 97
	<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

Full Name (Last, First, Middle Initial) A. ALAN BUFFINGTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5857521446
Mailing Address 2969 EATON ROAD		Amount of Each Receipt this Period 120.00
City State Zip Code SHAKER HEIGHTS OH 44122-2515	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, APPLICATIONS DEVLPMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	

Full Name (Last, First, Middle Initial) B. ED CALVIN STALLWORTH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5858241446
Mailing Address 1107 NW 122ND AVE		Amount of Each Receipt this Period 27.69
City State Zip Code PORTLAND OR 97229-5635	FEC ID number of contributing federal political committee. C	P/R Deduction (\$9.23 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation KEY CENTER MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.52	

Full Name (Last, First, Middle Initial) C. JEFFERY JEROME WEAVER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5864261446
Mailing Address 19101 SOUTH PARK BLVD		Amount of Each Receipt this Period 115.38
City State Zip Code SHAKER HEIGHTS OH 44122-1854	FEC ID number of contributing federal political committee. C	P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation GROUP HEAD, CREDIT PORTFOLIO M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.04	

SUBTOTAL of Receipts This Page (optional) ▶	263.07
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 97
	<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

Full Name (Last, First, Middle Initial) A. DEAN ILJASIC		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1278 W. 9TH STREET # 1216		Transaction ID: PR5870521446	
City State Zip Code CLEVELAND OH 44113-5504	Amount of Each Receipt this Period _____ 118.26		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DIRECTOR, MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 946.08		P/R Deduction (\$39.42 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. SUSAN MARY TALDONE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 17 W 080 BRYN MAWR		Transaction ID: PR5870891446	
City State Zip Code BENSENVILLE IL 60106	Amount of Each Receipt this Period _____ 29.07		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEY EQUIPMENT FINANCE INC.	Occupation INSIDE SALES MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 232.56		P/R Deduction (\$9.69 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. JAN WESLEY HANSEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 22550 CALVERTON RD		Transaction ID: PR5875781446	
City State Zip Code SHAKER HEIGHTS OH 44122-2030	Amount of Each Receipt this Period _____ 43.26		
FEC ID number of contributing federal political committee. C _____			
Name of Employer KEYBANC CAPITAL MARKETS INC.	Occupation TRADER SR, INST FL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 346.08		P/R Deduction (\$14.42 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 190.59
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 97
	<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

Full Name (Last, First, Middle Initial) A. KENNETH W. BROUSSARD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4401 NORTH THIRTY - FIFTH STREET		Transaction ID: PR5880131446
City State Zip Code ARLINGTON VA 22207	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation TEAM SLS LDR, CRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. AMY WILES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5670 BIG CANON DRIVE		Transaction ID: PR5883001446
City State Zip Code GREENWOOD VILLAGE CO 80111-3512	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation REGIONAL CREDIT EXEC - CB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. MICHAEL HENRY DULAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 373 ANGIER COURT NE		Transaction ID: PR5887481446
City State Zip Code ATLANTA GA 30312-1068	Amount of Each Receipt this Period _____ 158.64	
FEC ID number of contributing federal political committee. C _____		
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 ▼ _____ 1269.12	P/R Deduction (\$52.88 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 218.64
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 97
	<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

Full Name (Last, First, Middle Initial) A. JASON BRENT THOMAS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5888801446
Mailing Address 3450 STONEVISTA LANE		Amount of Each Receipt this Period 45.00
City State Zip Code COLUMBUS OH 43221-4941	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT CREDIT OFFICERIII-CB	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. CHARLES THORPE MANUEL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5890191446
Mailing Address 64 WEST STREET		Amount of Each Receipt this Period 72.12
City State Zip Code BEVERLY MA 01915-2228	FEC ID number of contributing federal political committee. C	P/R Deduction (\$24.04 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation MD, INSTITUTIONAL BKNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.96	

Full Name (Last, First, Middle Initial) C. RICHARD EDWARD WIRTHLIN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR5891451446
Mailing Address 10456 SE 24TH STREET		Amount of Each Receipt this Period 30.00
City State Zip Code BELLEVUE WA 98004-7248	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer KEYBANK NATIONAL ASSOCIATION	Occupation DISTRICT PRESIDENT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	147.12
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 97
	<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. Full Name (Last, First, Middle Initial)
DENNIS DARELL EDWARDS

Mailing Address 20045 KILLIANS GROVE

City State Zip Code
STRONGSVILLE OH 44149-0935

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION SR MGR, GLOBAL TREASURY MGMT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 304.56

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5891891446

Amount of Each Receipt this Period
38.07

P/R Deduction (\$12.69 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
EDWARD B. REILLY

Mailing Address 1031 PAXON DR.

City State Zip Code
BELLBROOK OH 45305-8952

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DISTRICT PRESIDENT II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 623.04

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5894701446

Amount of Each Receipt this Period
77.88

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

C. Full Name (Last, First, Middle Initial)
JACK SPARKS

Mailing Address 13556 PONDEROSA DRIVE

City State Zip Code
CONIFER CO 80433-5304

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION SR MGR, DIST PUBLIC AFFAIRS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 235.44

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5901531446

Amount of Each Receipt this Period
29.43

P/R Deduction (\$9.81 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	145.38
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 97
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
CHARLES W RILEY

Mailing Address 5813 BUCKPASSER COVE

City State Zip Code
AUSTIN TX 78746-1450

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

Name of Employer Occupation
AUSTIN CAPITAL MANAGEMENT SR MANAGING DIRECTOR CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR5903691446

Amount of Each Receipt this Period
75.00

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

B. Full Name (Last, First, Middle Initial)
DEAN ANDREW KONTUL

Mailing Address 37390 BROADSTONE DR

City State Zip Code
SOLOH OH 44139-5692

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

Name of Employer Occupation
KEYBANK NATIONAL ASSOCIATION DIRECTOR III, OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
230.76

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR9056881446

Amount of Each Receipt this Period
115.38

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

SUBTOTAL of Receipts This Page (optional)	190.38
TOTAL This Period (last page this line number only)	10504.65

**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 85 / 97

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

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund

A. Full Name (Last, First, Middle Initial)
KeyCorp Advocates Fund-New York

Mailing Address 127 Public Square

City Cleveland State OH Zip Code 44114-1306

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 4953366

Date of Disbursement

^M 1	^M /	^D 23	^D /	^Y 2	^Y 0	^Y 7	^Y
----------------	----------------	-----------------	----------------	----------------	----------------	----------------	--------------

Amount of Each Disbursement this Period

2000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 86 / 97

<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. FSR-PAC		Transaction ID: 4552190 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 7
Mailing Address 1001 Pennsylvania Ave., NW, Suite		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stivers for Congress		Transaction ID: 4958276 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 372 W. 2nd Avenue		Amount of Each Disbursement this Period 2500.00
City Columbus State OH Zip Code 43201	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Steve Stivers		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Latta For Congress Committee		Transaction ID: 4958279 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address 300 North Main Street		Amount of Each Disbursement this Period 1000.00
City Bowling Green State OH Zip Code 43402	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Robert Latta		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 5	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	8500.00

**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)

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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

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

Full Name (Last, First, Middle Initial) A. Friends of Zak Reed		Transaction ID: 4540619 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 7
Mailing Address 3232 E. 119th Street		Amount of Each Disbursement this Period 250.00
City Cleveland State OH Zip Code 44120	Zak Reed, LOCAL OH	
Purpose of Disbursement Zak Reed, LOCAL OH Candidate Name Zak Reed Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District:		

Full Name (Last, First, Middle Initial) B. Citizens for Barbara Boyd		Transaction ID: 4542097 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address Cheryl Horowitz, Treasurer 3623 Cummings		Amount of Each Disbursement this Period 300.00
City Cleveland Heights State OH Zip Code 44118	Barbara Boyd, STATE HOUSE 9th OH	
Purpose of Disbursement Barbara Boyd, STATE HOUSE 9th OH Candidate Name Barbara Boyd Category/Type 011		
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: 9		

Full Name (Last, First, Middle Initial) C. Friends of Michael J. Skindell		Transaction ID: 4542100 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address Donna J. Taylor-Kolis, Treasurer 16800 Delaware Avenue		Amount of Each Disbursement this Period 500.00
City Lakewood State OH Zip Code 44107	Michael Skindell, STATE HOUSE 13th OH	
Purpose of Disbursement Michael Skindell, STATE HOUSE 13th OH Candidate Name Michael Skindell Category/Type 011		
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		

SUBTOTAL of Disbursements This Page (optional) ▶	1050.00
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

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(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

Full Name (Last, First, Middle Initial) A. Friends of Matt Szollosi		Transaction ID: 4542098 Date of Disbursement 11 / 05 / 2007
Mailing Address Thomas Jaffee, Treasurer 3166 North Republic Road		Amount of Each Disbursement this Period 300.00
City Toledo	State OH	
Zip Code 43615		Matt Szollosi, STATE HOUSE 49th OH
Purpose of Disbursement Matt Szollosi, STATE HOUSE 49th OH		
Candidate Name OH Rep. Matt Szollosi		011 Category/ Type
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: 49		

Full Name (Last, First, Middle Initial) B. Citizens for Stephen Dyer		Transaction ID: 4542099 Date of Disbursement 11 / 05 / 2007
Mailing Address Melissa Dyer, Treasurer P. O. Box 83		Amount of Each Disbursement this Period 300.00
City Green	State OH	
Zip Code 44232		Stephen Dyer, STATE HOUSE 43rd OH
Purpose of Disbursement Stephen Dyer, STATE HOUSE 43rd OH		
Candidate Name OH Rep. Stephen Dyer		011 Category/ Type
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: 43		

Full Name (Last, First, Middle Initial) C. The Committee to Elect Steve Reinhard		Transaction ID: 4669168 Date of Disbursement 11 / 08 / 2007
Mailing Address Edward Pfeifer, Treasurer 3904 St. Rt. 19		Amount of Each Disbursement this Period 250.00
City Bucyrus	State OH	
Zip Code 44820		Steven Reinhard, STATE HO- USE 82nd OH
Purpose of Disbursement Steven Reinhard, STATE HOUSE 82nd OH		
Candidate Name Steven Reinhard		011 Category/ Type
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: 82		

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
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

Full Name (Last, First, Middle Initial) A. Friends of Peter Lawson Jones		Transaction ID: 4943494 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 7
Mailing Address Amos Z. Mahsua, Treasurer 21750 Shaker Boulevard		Amount of Each Disbursement this Period 500.00
City Shaker Heights	State OH	
Zip Code 44122-2638		Peter Jones, LOCAL OH
Purpose of Disbursement Peter Jones, LOCAL OH		
Candidate Name Peter Jones		011 Category/ Type
Office Sought: <input 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:		

Full Name (Last, First, Middle Initial) B. Ohio Republican Party		Transaction ID: 4950007 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 7
Mailing Address 211 S. Fifth Street		Amount of Each Disbursement this Period 3000.00
City Columbus	State OH	
Zip Code 43215		Gerald Fuerst, LOCAL OH
Purpose of Disbursement Gerald Fuerst, LOCAL OH		
Candidate Name Gerald Fuerst		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Fuerst Election Committee		Transaction ID: 4952272 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address Rose M. Grossenbaugh, Treasurer 37 Southwick Drive		Amount of Each Disbursement this Period 500.00
City Bedford	State OH	
Zip Code 44146		Gerald Fuerst, LOCAL OH
Purpose of Disbursement Gerald Fuerst, LOCAL OH		
Candidate Name Gerald Fuerst		011 Category/ Type
Office Sought: <input 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:		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
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

Full Name (Last, First, Middle Initial) A. Re-elect Klammer for Probate Judge Committee		Transaction ID: 4952545 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 0 7
Mailing Address Richard Kessler, Treasurer 6990 Lindsay Dr. Suite #7		Amount of Each Disbursement this Period 300.00
City Mentor State OH Zip Code 44060	Ted Klammer, LOCAL OH	
Purpose of Disbursement Ted Klammer, LOCAL OH		011 Category/ Type
Candidate Name Ted Klammer	Office Sought: <input 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:		

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Rosemary McAuliffe		Transaction ID: 4953370 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 7
Mailing Address Bob Taylor, Treasurer 17617 88th Street NE		Amount of Each Disbursement this Period 300.00
City Bothell State WA Zip Code 98011	Rosemary McAuliffe, STATE SENATE 1st WA	
Purpose of Disbursement Rosemary McAuliffe, STATE SENATE 1st WA		011 Category/ Type
Candidate Name Rosemary McAuliffe	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: WA District: 1	2008 WA Primary	

Full Name (Last, First, Middle Initial) C. People for Brian Hatfield		Transaction ID: 4953386 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 7
Mailing Address Brian Hatfield, Treasurer 226 Fir Street		Amount of Each Disbursement this Period 500.00
City Raymond State WA Zip Code 98577-2804	Brian Hatfield, STATE HOU-SE 19th WA	
Purpose of Disbursement Brian Hatfield, STATE HOUSE 19th WA		011 Category/ Type
Candidate Name Brian Hatfield	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: WA District: 19	2008 WA Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	1100.00
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

Full Name (Last, First, Middle Initial) A. Citizens for Frank Chopp		Transaction ID: 4953371 Date of Disbursement 11 / 23 / 2007
Mailing Address Jason Bennett, Treasurer 1414 Dexter Avenue North, #210		Amount of Each Disbursement this Period 700.00
City Seattle State WA Zip Code 98109-3501	011 Category/ Type	
Purpose of Disbursement Frank Chopp, STATE HOUSE 43rd WA		
Candidate Name Frank Chopp		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 43	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Frank Chopp, STATE HOUSE 43rd WA

Full Name (Last, First, Middle Initial) B. Citizens for Skip Priest		Transaction ID: 4953379 Date of Disbursement 11 / 23 / 2007
Mailing Address Ed Opstad, Treasurer P.O. Box 23237		Amount of Each Disbursement this Period 250.00
City Federal Way State WA Zip Code 98093	011 Category/ Type	
Purpose of Disbursement Skip Priest, STATE HOUSE 30th WA		
Candidate Name Skip Priest		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 30	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Skip Priest, STATE HOUSE 30th WA

Full Name (Last, First, Middle Initial) C. Steve Kirby Campaign		Transaction ID: 4953372 Date of Disbursement 11 / 23 / 2007
Mailing Address Steve Kirby, Treasurer 9415 Tacoma Avenue, South		Amount of Each Disbursement this Period 700.00
City Tacoma State WA Zip Code 98444	011 Category/ Type	
Purpose of Disbursement Steve Kirby, STATE HOUSE 29th WA		
Candidate Name Steve Kirby		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Steve Kirby, STATE HOUSE 29th WA

SUBTOTAL of Disbursements This Page (optional) ▶	1650.00
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)

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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

Full Name (Last, First, Middle Initial) A. Committee to Elect Eric Pettigrew		Transaction ID: 4953377 Date of Disbursement 11 / 23 / 2007
Mailing Address Jason Bennett, Treasurer 2036 32nd Avenue, South		Amount of Each Disbursement this Period 250.00
City Seattle State WA Zip Code 98144	Eric Pettigrew, STATE HOUSE 37th WA	
Purpose of Disbursement Eric Pettigrew, STATE HOUSE 37th WA		011 Category/ Type
Candidate Name Eric Pettigrew		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 37
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		

Full Name (Last, First, Middle Initial) B. Friends to Re-Elect Mike Hewitt		Transaction ID: 4953387 Date of Disbursement 11 / 23 / 2007
Mailing Address Doug Bayne, Treasurer 177 Electric Avenue		Amount of Each Disbursement this Period 700.00
City Walla Walla State WA Zip Code 99362	Mike Hewitt, STATE SENATE 16th WA	
Purpose of Disbursement Mike Hewitt, STATE SENATE 16th WA		011 Category/ Type
Candidate Name Mike Hewitt		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 16
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		

Full Name (Last, First, Middle Initial) C. Christopher Strow for State Representative		Transaction ID: 4953375 Date of Disbursement 11 / 23 / 2007
Mailing Address Nathan Gorton, Treasurer P. O. Box 63		Amount of Each Disbursement this Period 300.00
City Clinton State WA Zip Code 98236	Christopher Strow, STATE HOUSE 10th WA	
Purpose of Disbursement Christopher Strow, STATE HOUSE 10th WA		011 Category/ Type
Candidate Name Christopher Strow		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 10
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

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(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

Full Name (Last, First, Middle Initial) A. Friends of Jay Rodne		Transaction ID: 4953374 Date of Disbursement 11 / 23 / 2007
Mailing Address Heidi Haggar, Treasurer P. O. Box 2848		Amount of Each Disbursement this Period 300.00
City Issaquah State WA Zip Code 98027	011 Category/ Type	
Purpose of Disbursement Jay Rodne, STATE HOUSE 5th WA		
Candidate Name Jay Rodne		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Jay Rodne, STATE HOUSE 5th WA

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Ed Orcutt		Transaction ID: 4953384 Date of Disbursement 11 / 23 / 2007
Mailing Address Marcie Orcutt, Treasurer P. O. Box 1280		Amount of Each Disbursement this Period 250.00
City Kalama State WA Zip Code 98625	011 Category/ Type	
Purpose of Disbursement Ed Orcutt, STATE HOUSE 18th WA		
Candidate Name Ed Orcutt		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 18	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Ed Orcutt, STATE HOUSE 18- th WA

Full Name (Last, First, Middle Initial) C. Friends of Troy Kelley		Transaction ID: 4953373 Date of Disbursement 11 / 23 / 2007
Mailing Address Jason Bennett, Treasurer 2521 Fremont Street		Amount of Each Disbursement this Period 250.00
City Tacoma State WA Zip Code 98406-1614	011 Category/ Type	
Purpose of Disbursement Troy Kelley, STATE HOUSE 28th WA		
Candidate Name WA Rep. Troy Kelley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 28	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary	Troy Kelley, STATE HOUSE 28th WA

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
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

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(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

Full Name (Last, First, Middle Initial) A. Friends of Deb Eddy		Transaction ID: 4953376 Date of Disbursement 11 / 23 / 2007	
Mailing Address Suzanne Kagen, Treasurer 6619 132nd, NE, PMB 149		Amount of Each Disbursement this Period 350.00	
City Kirkland	State WA		Zip Code 98033-8627
Purpose of Disbursement Deborah Eddy, STATE HOUSE 48th WA			011 Category/ Type
Candidate Name WA Rep. Deborah Eddy			Deborah Eddy, STATE HOUSE 48th WA
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		
State: WA District: 48			

Full Name (Last, First, Middle Initial) B. Mark Miloscia for State Representative		Transaction ID: 4953382 Date of Disbursement 11 / 23 / 2007	
Mailing Address Meschell Miloscia, Treasurer 30720 19th Avenue, South		Amount of Each Disbursement this Period 250.00	
City Federal Way	State WA		Zip Code 98003
Purpose of Disbursement Mark Miloscia, STATE HOUSE 30th WA			011 Category/ Type
Candidate Name Representative Mark Miloscia			Mark Miloscia, STATE HOUSE 30th WA
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		
State: WA District: 30			

Full Name (Last, First, Middle Initial) C. Citizens to Re-Elect Mark Ericks		Transaction ID: 4953383 Date of Disbursement 11 / 23 / 2007	
Mailing Address Jason Bennett, Treasurer P. O. Box 1406		Amount of Each Disbursement this Period 250.00	
City Bothell	State WA		Zip Code 98041
Purpose of Disbursement Mark Ericks, STATE HOUSE 1st WA			011 Category/ Type
Candidate Name WA Rep. Mark Ericks			Mark Ericks, STATE HOUSE 1st WA
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		
State: WA District: 1			

SUBTOTAL of Disbursements This Page (optional) ▶	850.00
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

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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

Full Name (Last, First, Middle Initial) A. Committee to Re-Elect Mike Armstrong		Transaction ID: 4953385 Date of Disbursement 11 / 23 / 2007	
Mailing Address Mary Armstrong, Treasurer P. O. Box 2974		Amount of Each Disbursement this Period 250.00	
City Wenatchee	State WA		Zip Code 98807
Purpose of Disbursement Mike Armstrong, STATE HOUSE 12th WA			011 Category/ Type
Candidate Name Representative Mike Armstrong			Mike Armstrong, STATE HOUSE 12th WA
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		
State: WA District: 12			

Full Name (Last, First, Middle Initial) B. Committee to Re-Elect Linda Evans Parlette		Transaction ID: 4953388 Date of Disbursement 11 / 23 / 2007	
Mailing Address Mel Henkle, Treasurer P. O. Box 2151		Amount of Each Disbursement this Period 500.00	
City Wenatchee	State WA		Zip Code 98807-2151
Purpose of Disbursement Linda Parlette, STATE SENATE 12th WA			011 Category/ Type
Candidate Name Senator Linda Parlette			Linda Parlette, STATE SENATE 12th WA
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼ 2008 WA Primary		
State: WA District: 12			

Full Name (Last, First, Middle Initial) C. O'Connor for Supreme Court		Transaction ID: 4958290 Date of Disbursement 11 / 29 / 2007	
Mailing Address J. B. Hadden, Treasurer 211 South Fifth Street		Amount of Each Disbursement this Period 500.00	
City Columbus	State OH		Zip Code 43215
Purpose of Disbursement Maureen O'Connor, SUPREME COURT JUSTICE			011 Category/ Type
Candidate Name Maureen O'Connor			Maureen O'Connor, SUPREME COURT JUSTICE OH
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼ 2008		
State: OH District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1250.00
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

Full Name (Last, First, Middle Initial) A. Committee to Keep Judge Patricia Ann Blackmon		Transaction ID: 4958272 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address Annetta Fisher, Treasurer 1281 E. 167th Street		Amount of Each Disbursement this Period 500.00
City Cleveland	State OH	
Zip Code 44110		Patricia Blackmon, LOCAL OH
Purpose of Disbursement Patricia Blackmon, LOCAL OH		
Candidate Name Patricia Blackmon		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District:	2008	

Full Name (Last, First, Middle Initial) B. Committee to Elect Fred Strahorn		Transaction ID: 4958274 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address Tom Roberts, Treasurer 531 Belmont North, Apt. 1001		Amount of Each Disbursement this Period 400.00
City Dayton	State OH	
Zip Code 45405		Fred Strahorn, STATE HOUSE 40th OH
Purpose of Disbursement Fred Strahorn, STATE HOUSE 40th OH		
Candidate Name Fred Strahorn		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 40	2008	

Full Name (Last, First, Middle Initial) C. Friends of Heard		Transaction ID: 4958273 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address Lillian Gray, Treasurer 87 South Hampton Road		Amount of Each Disbursement this Period 1000.00
City Columbus	State OH	
Zip Code 43213		Tracy Heard, STATE HOUSE 26th OH
Purpose of Disbursement Tracy Heard, STATE HOUSE 26th OH		
Candidate Name OH Rep. Tracy Heard		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 26	2008	

SUBTOTAL of Disbursements This Page (optional) ▶	1900.00
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

Full Name (Last, First, Middle Initial) A. Friends of Kris Jordan		Transaction ID: 4958281 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 7
Mailing Address Randy Turner, Treasurer 161 Stonebend Drive		Amount of Each Disbursement this Period 250.00
City Powell	State OH	
Purpose of Disbursement Kris Jordan, STATE HOUSE 2nd OH		Kris Jordan, STATE HOUSE 2nd OH
Candidate Name Kris Jordan		
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: 2		

SUBTOTAL of Disbursements This Page (optional)	250.00
TOTAL This Period (last page this line number only)	14950.00