

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

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

FOR LINE NUMBER: PAGE 6 OF 112

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KeyCorp Advocates Fund-Federal

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Adams, Samuel, , ,

Mailing Address 2180 Farleigh Rd

City
ColumbusState
OHZip Code
43221-2708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KeyBank National AssociationOccupation (for Individual)
VP, Public Sector

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 18 / 2019

Transaction ID : 572E1E5FCF32481991CA

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Adams, Samuel, , ,

Mailing Address 2180 Farleigh Rd

City
ColumbusState
OHZip Code
43221-2708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KeyBank National AssociationOccupation (for Individual)
VP, Public Sector

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 01 / 2019

Transaction ID : 061E6E2253384F7BAE7C

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Adams, Samuel, , ,

Mailing Address 2180 Farleigh Rd

City
ColumbusState
OHZip Code
43221-2708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KeyBank National AssociationOccupation (for Individual)
VP, Public Sector

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 15 / 2019

Transaction ID : DBB4A59F4F2848309EA1

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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