

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

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

FOR LINE NUMBER: PAGE 34 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. Clarke, Charles, , ,

Mailing Address 200 Grey Fox Run

City

Bentleyville

State

OH

Zip Code

44022-3398

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KeyBank National Association

Occupation (for Individual)

Regional Sales Exec

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : E1D7A42FB3E8422C8570

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Clarke, Charles, , ,

Mailing Address 200 Grey Fox Run

City

Bentleyville

State

OH

Zip Code

44022-3398

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KeyBank National Association

Occupation (for Individual)

Regional Sales Exec

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2019

Transaction ID : 6D7B83D027324B97A599

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Clarke, Charles, , ,

Mailing Address 200 Grey Fox Run

City

Bentleyville

State

OH

Zip Code

44022-3398

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KeyBank National Association

Occupation (for Individual)

Regional Sales Exec

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2019

Transaction ID : 42ECB5D0DD674D6D8CB7

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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