

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

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

FOR LINE NUMBER: PAGE 50 OF 394

(check only one)

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

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NAME OF COMMITTEE (In Full)

**KeyCorp Advocates Fund**

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

**A. Deangelis, Robert, , ,**

Mailing Address 160 Lake Harbor Ct

City  
Bratenahl

State  
OH

Zip Code  
44108-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KeyBank National Association

Occupation (for Individual)  
Head of Quality and Prod Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

MM / DD / YYYY  
10 / 04 / 2019

**Transaction ID : 3915A43E048E4276B2AA**

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**B. Deangelis, Robert, , ,**

Mailing Address 160 Lake Harbor Ct

City  
Bratenahl

State  
OH

Zip Code  
44108-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KeyBank National Association

Occupation (for Individual)  
Head of Quality and Prod Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

MM / DD / YYYY  
10 / 18 / 2019

**Transaction ID : DBF5878B26BB48919E8B**

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**C. Deangelis, Robert, , ,**

Mailing Address 160 Lake Harbor Ct

City  
Bratenahl

State  
OH

Zip Code  
44108-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KeyBank National Association

Occupation (for Individual)  
Head of Quality and Prod Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3900.00

Date of Receipt

MM / DD / YYYY  
11 / 01 / 2019

**Transaction ID : 494995C39F784A4199DB**

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

450.00