

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

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

FOR LINE NUMBER: PAGE 11 OF 19

(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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2020

Transaction ID : EF0F17ED8E5C492C9174

Amount of Each Receipt this Period

50.00

☐

Memo Item

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

B. DeLeone, Lara, , ,

Mailing Address 2125 Cheshire Rd

City

Columbus

State

OH

Zip Code

43221-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KeyBank National Association

Occupation (for Individual)

MD, Public Sector

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2020

Transaction ID : 8AA4CD72E4564C699F8E

Amount of Each Receipt this Period

38.46

☐

Memo Item

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

C. DeLeone, Lara, , ,

Mailing Address 2125 Cheshire Rd

City

Columbus

State

OH

Zip Code

43221-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KeyBank National Association

Occupation (for Individual)

MD, Public Sector

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2020

Transaction ID : 7D978F8270B043CDB40E

Amount of Each Receipt this Period

38.46

☐

Memo Item

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

126.92

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