

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 F.N.B. CORPORATION PAC

ADDRESS (number and street) ONE F.N.B. BLVD. Check if different than previously reported. (ACC) HERMITAGE PA 16148

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00514026 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

SULLIVAN, MARK D, ,

Type or Print Name of Treasurer

Signature of Treasurer SULLIVAN, MARK D, , [Electronically Filed] Date 01 / 05 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Table with 7 columns and 1 row for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

F.N.B. CORPORATION PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		136173.98
(b) Cash on Hand at Beginning of Reporting Period.....	188538.98	
(c) Total Receipts (from Line 19)	8489.00	107569.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	197027.98	243742.98
7. Total Disbursements (from Line 31).....	12500.00	59215.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	184527.98	184527.98
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

F.N.B. CORPORATION PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2016

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		
(i) Itemized (use Schedule A).....	3357.00	28681.00
(ii) Unitemized	5132.00	78888.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8489.00	107569.00
(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)	8489.00	107569.00
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 Transfers (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)).....▶	8489.00	107569.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8489.00	107569.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	17150.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	12500.00	42065.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	12500.00	59215.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12500.00	59215.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	8489.00	107569.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8489.00	107569.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
F.N.B. CORPORATION PAC

A. AMICO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 EILEEN ROAD
 City WYOMING State PA Zip Code 18644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000004L11A1
 Amount of Each Receipt this Period 10.00
 Memo Item
 PAYROLL DEDUCTION

B. AMICO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 EILEEN ROAD
 City WYOMING State PA Zip Code 18644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000004L11A1
 Amount of Each Receipt this Period 10.00
 Memo Item
 PAYROLL DEDUCTION

C. AMICO, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 EILEEN ROAD
 City WYOMING State PA Zip Code 18644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000004L11A1
 Amount of Each Receipt this Period 10.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. APP, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 GABRIEL DR
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR OPRTN & PROCESSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000008L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

B. APP, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 GABRIEL DR
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR OPRTN & PROCESSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000008L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

C. APP, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 GABRIEL DR
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR OPRTN & PROCESSING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000008L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 90
	<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)
F.N.B. CORPORATION PAC

A. ASIMAKOPOULOS, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8527 IVY HILL DRIVE

City POLAND	State OH	Zip Code 44514
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) EVP OF SMALL BUSINESS BANKING
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016
Transaction ID : B000264S000009L11A1

Amount of Each Receipt this Period
 18.00

Memo Item
 PAYROLL DEDUCTION

B. ASIMAKOPOULOS, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8527 IVY HILL DRIVE

City POLAND	State OH	Zip Code 44514
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) EVP OF SMALL BUSINESS BANKING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016
Transaction ID : B000268S000009L11A1

Amount of Each Receipt this Period
 18.00

Memo Item
 PAYROLL DEDUCTION

C. ASIMAKOPOULOS, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8527 IVY HILL DRIVE

City POLAND	State OH	Zip Code 44514
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) EVP OF SMALL BUSINESS BANKING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
432.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2016
Transaction ID : B000269S000009L11A1

Amount of Each Receipt this Period
 18.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	54.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BEATY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 WESTERN AVE

City PITTSBURGH	State PA	Zip Code 15215
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR CAPITAL MARKETS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000023L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. BEATY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 WESTERN AVE

City PITTSBURGH	State PA	Zip Code 15215
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR CAPITAL MARKETS
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000023L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. BEATY, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 WESTERN AVE

City PITTSBURGH	State PA	Zip Code 15215
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR CAPITAL MARKETS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000022L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BELLINO, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1218 OAK PARK COURT

City PITTSBURGH	State PA	Zip Code 15241
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR & PROGRAM MGR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000024L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. BELLINO, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1218 OAK PARK COURT

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR & PROGRAM MGR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000024L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. BELLINO, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1218 OAK PARK COURT

City PITTSBURGH	State PA	Zip Code 15241
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGN DIR & PROGRAM MGR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000023L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BERESH, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 MARIE DRIVE

City PITTSBURGH	State PA	Zip Code 15237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR WHSL BNKG SLTN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 11 / 30 / 2016
Transaction ID : B000264S000026L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. BERESH, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 MARIE DRIVE

City PITTSBURGH	State PA	Zip Code 15237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR WHSL BNKG SLTN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 12 / 15 / 2016
Transaction ID : B000268S000026L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. BERESH, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 121 MARIE DRIVE

City PITTSBURGH	State PA	Zip Code 15237
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR WHSL BNKG SLTN
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 12 / 30 / 2016
Transaction ID : B000269S000025L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BLUE, FUNDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 MEMORIAL DRIVE

City FARRELL	State PA	Zip Code 16121
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF PROCESSING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000035L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. BLUE, FUNDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 MEMORIAL DRIVE

City FARRELL	State PA	Zip Code 16121
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF PROCESSING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000035L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. BLUE, FUNDER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1819 MEMORIAL DRIVE

City FARRELL	State PA	Zip Code 16121
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF PROCESSING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000034L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BOAKE, FELIX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 573 WESTGATE DRIVE

City STATE COLLEGE	State PA	Zip Code 16803
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SALES EXECUTIVE - INSA
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2016
Transaction ID : B000264S000036L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

B. BOAKE, FELIX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 573 WESTGATE DRIVE

City STATE COLLEGE	State PA	Zip Code 16803
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SALES EXECUTIVE - INSA
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2016
Transaction ID : B000268S000036L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

C. BOAKE, FELIX, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 573 WESTGATE DRIVE

City STATE COLLEGE	State PA	Zip Code 16803
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SALES EXECUTIVE - INSA
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2016
Transaction ID : B000269S000035L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	33.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 90
	<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)
F.N.B. CORPORATION PAC

A. BOWEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LIBERTY AV APT #513

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CNSMR PRODUCT & SEGMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000041L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. BOWEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LIBERTY AV APT #513

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CNSMR PRODUCT & SEGMENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000041L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. BOWEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LIBERTY AV APT #513

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CNSMR PRODUCT & SEGMENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000040L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. BOWER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5619 S. RT. 44 HIGHWAY
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000042L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

B. BOWER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5619 S. RT. 44 HIGHWAY
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000042L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

C. BOWER, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5619 S. RT. 44 HIGHWAY
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000041L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
F.N.B. CORPORATION PAC

A. CALABRESE, VINCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9003 PEREGRINE DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CFO FNB CORP
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
552.00

Date of Receipt
 11 / 30 / 2016
Transaction ID : B000264S000065L11A1

Amount of Each Receipt this Period
23.00

Memo Item
PAYROLL DEDUCTION

B. CALABRESE, VINCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9003 PEREGRINE DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CFO FNB CORP
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
552.00

Date of Receipt
 12 / 15 / 2016
Transaction ID : B000268S000065L11A1

Amount of Each Receipt this Period
23.00

Memo Item
PAYROLL DEDUCTION

C. CALABRESE, VINCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9003 PEREGRINE DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CFO FNB CORP
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
552.00

Date of Receipt
 12 / 30 / 2016
Transaction ID : B000269S000063L11A1

Amount of Each Receipt this Period
23.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	69.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 90
	<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)
F.N.B. CORPORATION PAC

A. CHEPKEVICH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 WHITE CLOUD ROAD
 City LEECHBURG State PA Zip Code 15656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRESIDENT - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000081L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

B. CHEPKEVICH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 WHITE CLOUD ROAD
 City LEECHBURG State PA Zip Code 15656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRESIDENT - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000081L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

C. CHEPKEVICH, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2165 WHITE CLOUD ROAD
 City LEECHBURG State PA Zip Code 15656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRESIDENT - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000079L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 90
	<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)
F.N.B. CORPORATION PAC

A. CRAIG, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3957 EAST LAKE DRIVE

City MORGANTOWN	State WV	Zip Code 26508
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES & CEO WEALTH MGMT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
408.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000098L11A1

Amount of Each Receipt this Period
17.00

Memo Item
PAYROLL DEDUCTION

B. CRAIG, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3957 EAST LAKE DRIVE

City MORGANTOWN	State WV	Zip Code 26508
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES & CEO WEALTH MGMT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
408.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000097L11A1

Amount of Each Receipt this Period
17.00

Memo Item
PAYROLL DEDUCTION

C. CRAIG, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3957 EAST LAKE DRIVE

City MORGANTOWN	State WV	Zip Code 26508
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES & CEO WEALTH MGMT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
408.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000094L11A1

Amount of Each Receipt this Period
17.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	51.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. CRAWFORD, SHANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 LIME KILN ROAD
 City TYRONE State PA Zip Code 16686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR CENTRALIZED PORTFOLIO UNI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000099L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

B. CRAWFORD, SHANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 LIME KILN ROAD
 City TYRONE State PA Zip Code 16686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR CENTRALIZED PORTFOLIO UN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000098L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

C. CRAWFORD, SHANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 274 LIME KILN ROAD
 City TYRONE State PA Zip Code 16686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR CENTRALIZED PORTFOLIO UNI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000095L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 90
	(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)
F.N.B. CORPORATION PAC

A. CUNNINGHAM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNT DRIVE

City GROVE CITY	State PA	Zip Code 16127
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR ENTERPRISE RISK MGMT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 11 / 30 / 2016
Transaction ID : B000264S000102L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
PAYROLL DEDUCTION

B. CUNNINGHAM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNT DRIVE

City GROVE CITY	State PA	Zip Code 16127
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR ENTERPRISE RISK MGMT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 12 / 15 / 2016
Transaction ID : B000268S000101L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
PAYROLL DEDUCTION

C. CUNNINGHAM, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HUNT DRIVE

City GROVE CITY	State PA	Zip Code 16127
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR ENTERPRISE RISK MGMT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 12 / 30 / 2016
Transaction ID : B000269S000098L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 90
	<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)
F.N.B. CORPORATION PAC

A. DEAN, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4020 DEEPWOOD ROAD
 City BALTIMORE State MD Zip Code 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SLS MGR SMALL BUS BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000114L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

B. DEAN, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4020 DEEPWOOD ROAD
 City BALTIMORE State MD Zip Code 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SLS MGR SMALL BUS BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000112L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

C. DEAN, CHRISTIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4020 DEEPWOOD ROAD
 City BALTIMORE State MD Zip Code 21218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SLS MGR SMALL BUS BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000109L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	72.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 90
	<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)
F.N.B. CORPORATION PAC

A. DELIE, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 EAST DRIVE
 City SEWICKLEY State PA Zip Code 15143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRES & CEO FNB CORP & FNBPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000117L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

B. DELIE, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 EAST DRIVE
 City SEWICKLEY State PA Zip Code 15143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRES & CEO FNB CORP & FNBPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000115L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

C. DELIE, VINCENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 606 EAST DRIVE
 City SEWICKLEY State PA Zip Code 15143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) PRES & CEO FNB CORP & FNBPA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000112L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 90
	<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)
F.N.B. CORPORATION PAC

A. DEMPSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KIMBERLY LANE
 City TRUCKSVILLE State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000119L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

B. DEMPSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KIMBERLY LANE
 City TRUCKSVILLE State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000117L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

C. DEMPSEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 169 KIMBERLY LANE
 City TRUCKSVILLE State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000114L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 33.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 90
	<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)
F.N.B. CORPORATION PAC

A. ELSASS, LUKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30985 CLINTON DR.

City BAY VILLAGE	State OH	Zip Code 44140
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR INVST RL EST BNKG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000137L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

B. ELSASS, LUKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30985 CLINTON DR.

City BAY VILLAGE	State OH	Zip Code 44140
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR INVST RL EST BNKG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000135L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

C. ELSASS, LUKE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30985 CLINTON DR.

City BAY VILLAGE	State OH	Zip Code 44140
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR INVST RL EST BNKG
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000132L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
F.N.B. CORPORATION PAC

A. ENGLISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 TIMBER RIDGE DRIVE
 City HARMONY State PA Zip Code 16037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGN DIR TRUST & INVST ADV SLS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000140L11A1
 Amount of Each Receipt this Period 13.00
 Memo Item
PAYROLL DEDUCTION

B. ENGLISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 TIMBER RIDGE DRIVE
 City HARMONY State PA Zip Code 16037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGN DIR TRUST & INVST ADV SLS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000138L11A1
 Amount of Each Receipt this Period 13.00
 Memo Item
PAYROLL DEDUCTION

C. ENGLISH, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 TIMBER RIDGE DRIVE
 City HARMONY State PA Zip Code 16037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGN DIR TRUST & INVST ADV SLS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000135L11A1
 Amount of Each Receipt this Period 13.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	39.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 90
	<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)
F.N.B. CORPORATION PAC

A. FERRAZZA, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34725 LAKEVIEW DR

City SOLON	State OH	Zip Code 44139
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2016

Transaction ID : B000264S000152L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

B. FERRAZZA, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34725 LAKEVIEW DR

City SOLON	State OH	Zip Code 44139
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2016

Transaction ID : B000268S000150L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

C. FERRAZZA, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34725 LAKEVIEW DR

City SOLON	State OH	Zip Code 44139
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2016

Transaction ID : B000269S000147L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	33.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 90
	(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)
F.N.B. CORPORATION PAC

A. FERRENCE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10154 TIMOTHY LANE

City TWINSBURG	State OH	Zip Code 44087
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000153L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. FERRENCE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10154 TIMOTHY LANE

City TWINSBURG	State OH	Zip Code 44087
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000151L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. FERRENCE, GREGORY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10154 TIMOTHY LANE

City TWINSBURG	State OH	Zip Code 44087
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000148L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 90
	<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)
F.N.B. CORPORATION PAC

A. FISHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 MARSHALL HEIGHTS DRIVE

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CRD RISK & REPORTING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000155L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. FISHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 MARSHALL HEIGHTS DRIVE

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CRD RISK & REPORTING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000153L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. FISHER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 MARSHALL HEIGHTS DRIVE

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CRD RISK & REPORTING
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000150L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. FRANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8721 TALL TIMBERS ROAD
 City HUNTINGDON State PA Zip Code 16652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000170L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. FRANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8721 TALL TIMBERS ROAD
 City HUNTINGDON State PA Zip Code 16652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000168L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. FRANKS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8721 TALL TIMBERS ROAD
 City HUNTINGDON State PA Zip Code 16652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000165L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 90
	<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)
F.N.B. CORPORATION PAC

A. FREE, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3527 SILVER RIDGE COURT

City HERMITAGE	State PA	Zip Code 16148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) TRES VP & ASST SECY FNB CORP &
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000171L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. FREE, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3527 SILVER RIDGE COURT

City HERMITAGE	State PA	Zip Code 16148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) TRES VP & ASST SECY FNB CORP &
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000169L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. FREE, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3527 SILVER RIDGE COURT

City HERMITAGE	State PA	Zip Code 16148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) TRES VP & ASST SECY FNB CORP &
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000166L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 90
	<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)
F.N.B. CORPORATION PAC

A. FUSSELMAN, ALBERTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5767 NORQUEST BLVD

City AUSTINTOWN	State OH	Zip Code 44515
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MARKET MANAGER 3
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2016

Transaction ID : B000264S000174L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. FUSSELMAN, ALBERTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5767 NORQUEST BLVD

City AUSTINTOWN	State OH	Zip Code 44515
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MARKET MANAGER 3
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2016

Transaction ID : B000268S000172L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. FUSSELMAN, ALBERTA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5767 NORQUEST BLVD

City AUSTINTOWN	State OH	Zip Code 44515
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MARKET MANAGER 3
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
239.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2016

Transaction ID : B000269S000169L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 90
	<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)
F.N.B. CORPORATION PAC

A. GRAZIANI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 PONDEROSA DRIVE
 City IMPERIAL State PA Zip Code 15126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR PROP & CASUALTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000194L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. GRAZIANI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 PONDEROSA DRIVE
 City IMPERIAL State PA Zip Code 15126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR PROP & CASUALTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000192L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. GRAZIANI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 PONDEROSA DRIVE
 City IMPERIAL State PA Zip Code 15126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR PROP & CASUALTY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000189L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
F.N.B. CORPORATION PAC

A. GREEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 DAY STAR COURT

City CRANBERRY TOWNSHIP	State PA	Zip Code 16066
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF MORTGAGE SERVICE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016

Transaction ID : B000264S000195L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

B. GREEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 DAY STAR COURT

City CRANBERRY TOWNSHIP	State PA	Zip Code 16066
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF MORTGAGE SERVICE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016

Transaction ID : B000268S000193L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

C. GREEN, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 DAY STAR COURT

City CRANBERRY TOWNSHIP	State PA	Zip Code 16066
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF MORTGAGE SERVICE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2016

Transaction ID : B000269S000190L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 90
	<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)
F.N.B. CORPORATION PAC

A. GUERRIERI, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 DODD DRIVE
 City WASHINGTON State PA Zip Code 15301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CH CRD OFF & LND SUPP & SPEC LN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000203L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

B. GUERRIERI, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 DODD DRIVE
 City WASHINGTON State PA Zip Code 15301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CH CRD OFF & LND SUPP & SPEC LN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000201L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

C. GUERRIERI, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 DODD DRIVE
 City WASHINGTON State PA Zip Code 15301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CH CRD OFF & LND SUPP & SPEC LN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000198L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	72.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
	<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)
F.N.B. CORPORATION PAC

A. HAINES, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 707 DELAWARE TRAIL

City MERCER	State PA	Zip Code 16137
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CORP & FIDUCIARY GVNC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000205L11A1

Amount of Each Receipt this Period
9.00

Memo Item
PAYROLL DEDUCTION

B. HAINES, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 707 DELAWARE TRAIL

City MERCER	State PA	Zip Code 16137
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CORP & FIDUCIARY GVNC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000203L11A1

Amount of Each Receipt this Period
9.00

Memo Item
PAYROLL DEDUCTION

C. HAINES, SAMUEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 707 DELAWARE TRAIL

City MERCER	State PA	Zip Code 16137
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CORP & FIDUCIARY GVNC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000200L11A1

Amount of Each Receipt this Period
9.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	27.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 90
	<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)
F.N.B. CORPORATION PAC

A. HANNAH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 S. KERRWOOD DR.
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR OF CORPORATE COMPLI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000208L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

B. HANNAH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 S. KERRWOOD DR.
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR OF CORPORATE COMPLI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000206L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

C. HANNAH, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 S. KERRWOOD DR.
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR OF CORPORATE COMPLI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000203L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 90
	<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)
F.N.B. CORPORATION PAC

A. HIEBER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 S. 17TH ST.

City PITTSBURGH	State PA	Zip Code 15203
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CMPL OPRTN & SPRT SVCS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000222L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. HIEBER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 S. 17TH ST.

City PITTSBURGH	State PA	Zip Code 15203
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CMPL OPRTN & SPRT SVCS
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000220L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. HIEBER, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 S. 17TH ST.

City PITTSBURGH	State PA	Zip Code 15203
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR CMPL OPRTN & SPRT SVCS
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000217L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 90
	<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)
F.N.B. CORPORATION PAC

A. HUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 OLD HICKORY ROAD

City ZELIENOPLE	State PA	Zip Code 16063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF HUMAN RESOURCES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000234L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. HUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 OLD HICKORY ROAD

City ZELIENOPLE	State PA	Zip Code 16063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF HUMAN RESOURCES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000231L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. HUNT, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 OLD HICKORY ROAD

City ZELIENOPLE	State PA	Zip Code 16063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF HUMAN RESOURCES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000228L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 90
	(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)
F.N.B. CORPORATION PAC

A. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 SALEM DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR PLANNING & PROFITABILITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000242L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 SALEM DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR PLANNING & PROFITABILITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000239L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. JOHNSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2300 SALEM DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR PLANNING & PROFITABILITY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000236L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 90
	<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)
F.N.B. CORPORATION PAC

A. JOHNSON, GRAHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 S. EAST AVE.
 City BALTIMORE State MD Zip Code 21224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKER 2
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000243L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. JOHNSON, GRAHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 S. EAST AVE.
 City BALTIMORE State MD Zip Code 21224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKER 2
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000240L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. JOHNSON, GRAHAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 S. EAST AVE.
 City BALTIMORE State MD Zip Code 21224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) COMMERCIAL BANKER 2
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000237L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 90
	<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)
F.N.B. CORPORATION PAC

A. JOKOLA, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 PAINTER STREET

City TRAFFORD	State PA	Zip Code 15085
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF INDIRECT LENDING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000246L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. JOKOLA, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 PAINTER STREET

City TRAFFORD	State PA	Zip Code 15085
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF INDIRECT LENDING
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000243L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. JOKOLA, NICHOLAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 PAINTER STREET

City TRAFFORD	State PA	Zip Code 15085
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF INDIRECT LENDING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000240L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 90
	<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)
F.N.B. CORPORATION PAC

A. JOSEPH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 LILLIAN CIRCLE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000250L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. JOSEPH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 LILLIAN CIRCLE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000247L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. JOSEPH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 LILLIAN CIRCLE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000244L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
F.N.B. CORPORATION PAC

A. KIRSCH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1708 LA COSTA COURT
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR DIGITAL CHANNELS & PAYMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000265L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

B. KIRSCH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1708 LA COSTA COURT
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR DIGITAL CHANNELS & PAYMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000262L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

C. KIRSCH, SAMUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1708 LA COSTA COURT
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIR DIGITAL CHANNELS & PAYMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000259L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 90
	<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)
F.N.B. CORPORATION PAC

A. KLINE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2110 PEARCE CIRCLE

City SALEM	State OH	Zip Code 44460
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000269L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. KLINE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2110 PEARCE CIRCLE

City SALEM	State OH	Zip Code 44460
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000266L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. KLINE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2110 PEARCE CIRCLE

City SALEM	State OH	Zip Code 44460
---------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKING TEAM LEAD
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000263L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 OF 90
	(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)
F.N.B. CORPORATION PAC

A. KOSCO, MAURUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4517 RIDGE CREST DR.
 City COPLEY State OH Zip Code 44321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) BUSINESS BANKING TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000272L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. KOSCO, MAURUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4517 RIDGE CREST DR.
 City COPLEY State OH Zip Code 44321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) BUSINESS BANKING TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000269L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. KOSCO, MAURUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4517 RIDGE CREST DR.
 City COPLEY State OH Zip Code 44321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) BUSINESS BANKING TEAM LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000266L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 36.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 90
	<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)
F.N.B. CORPORATION PAC

A. KRIEDER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1576 WAKEFIELD DRIVE
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) EVP CMTY CML BNKG & PRES NW R
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 453.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000279L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

B. KRIEDER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1576 WAKEFIELD DRIVE
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) EVP CMTY CML BNKG & PRES NW R
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 453.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000276L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

C. KRIEDER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1576 WAKEFIELD DRIVE
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) EVP CMTY CML BNKG & PRES NW R
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 453.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000273L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 90
	<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)
F.N.B. CORPORATION PAC

A. KUKLA, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1322 CHESTNUT ST

City FRANKLIN	State PA	Zip Code 16323
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000285L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. KUKLA, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1322 CHESTNUT ST

City FRANKLIN	State PA	Zip Code 16323
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000282L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. KUKLA, STANLEY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1322 CHESTNUT ST

City FRANKLIN	State PA	Zip Code 16323
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000279L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 90
	<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)
F.N.B. CORPORATION PAC

A. LAMB, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1550 KENNELWORTH CT.

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000288L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. LAMB, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1550 KENNELWORTH CT.

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000285L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. LAMB, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1550 KENNELWORTH CT.

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000282L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 90
	<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)
F.N.B. CORPORATION PAC

A. LEONHARDT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 BLAZE DRIVE
 City GLENSHAW State PA Zip Code 15116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000300L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. LEONHARDT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 BLAZE DRIVE
 City GLENSHAW State PA Zip Code 15116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000297L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. LEONHARDT, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 BLAZE DRIVE
 City GLENSHAW State PA Zip Code 15116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000294L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 90
	<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)
F.N.B. CORPORATION PAC

A. LINGENFELTER, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 OCTOBER DRIVE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 2
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000306L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. LINGENFELTER, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 OCTOBER DRIVE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 2
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000303L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. LINGENFELTER, NICHOLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 OCTOBER DRIVE
 City STATE COLLEGE State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 2
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000300L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. LOZZI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 MELWOOD N.E.
 City WARREN State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CFO - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000315L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. LOZZI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 MELWOOD N.E.
 City WARREN State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CFO - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000312L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. LOZZI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 MELWOOD N.E.
 City WARREN State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CFO - REGENCY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000309L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 36.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 90
	<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)
F.N.B. CORPORATION PAC

A. LUCARELLI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10448 MARYLAND STREET

City REMINDERVILLE	State OH	Zip Code 44202
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR MTG ORIG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000316L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. LUCARELLI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10448 MARYLAND STREET

City REMINDERVILLE	State OH	Zip Code 44202
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR MTG ORIG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000313L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. LUCARELLI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10448 MARYLAND STREET

City REMINDERVILLE	State OH	Zip Code 44202
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR MTG ORIG
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000310L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MAHON, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S. WATER STREET

City LEWISBURG	State PA	Zip Code 17837
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRIVATE BANKER 3
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000322L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. MAHON, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S. WATER STREET

City LEWISBURG	State PA	Zip Code 17837
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRIVATE BANKER 3
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000319L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. MAHON, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 S. WATER STREET

City LEWISBURG	State PA	Zip Code 17837
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRIVATE BANKER 3
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000316L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 90
	<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)
F.N.B. CORPORATION PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANLEY, JOSEPH, , ,

Mailing Address **363 LAUREL LANE**

City WADSWORTH	State OH	Zip Code 44281
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR CREDIT OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000329L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANLEY, JOSEPH, , ,

Mailing Address **363 LAUREL LANE**

City WADSWORTH	State OH	Zip Code 44281
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR CREDIT OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000326L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MANLEY, JOSEPH, , ,

Mailing Address **363 LAUREL LANE**

City WADSWORTH	State OH	Zip Code 44281
--------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR CREDIT OFFICER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000323L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MARFISI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1017 HIGH MEADOWS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR CML BNKG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000330L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. MARFISI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1017 HIGH MEADOWS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR CML BNKG
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000327L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. MARFISI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1017 HIGH MEADOWS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG MGR CML BNKG
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000324L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 90
	<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)
F.N.B. CORPORATION PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCALLICK, WILLIAM, , ,

Mailing Address 63 PATRIOT CIRCLE

City MOUNTAIN TOP	State PA	Zip Code 18707
----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG EQPT FINANCE SPCL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000337L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCALLICK, WILLIAM, , ,

Mailing Address 63 PATRIOT CIRCLE

City MOUNTAIN TOP	State PA	Zip Code 18707
----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG EQPT FINANCE SPCL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000334L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCCALLICK, WILLIAM, , ,

Mailing Address 63 PATRIOT CIRCLE

City MOUNTAIN TOP	State PA	Zip Code 18707
----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG EQPT FINANCE SPCL
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000331L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MILES, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 N. 12TH AVENUE

City ALTOONA	State PA	Zip Code 16601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR BRKG GRP PGH
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000352L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. MILES, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 N. 12TH AVENUE

City ALTOONA	State PA	Zip Code 16601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR BRKG GRP PGH
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000349L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. MILES, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 N. 12TH AVENUE

City ALTOONA	State PA	Zip Code 16601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG SLS MGR BRKG GRP PGH
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000346L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MILLER, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5283 S MAIN STREET
 City WESTOVER State PA Zip Code 16692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000355L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. MILLER, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5283 S MAIN STREET
 City WESTOVER State PA Zip Code 16692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000352L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. MILLER, MADONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5283 S MAIN STREET
 City WESTOVER State PA Zip Code 16692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MARKET MANAGER 3
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000349L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 36.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
F.N.B. CORPORATION PAC

A. MOOREHEAD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3323 SCATHELOCKE ROAD
 City PITTSBURGH State PA Zip Code 15235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF WHOLESALE BANKING OFFIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000368L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

B. MOOREHEAD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3323 SCATHELOCKE ROAD
 City PITTSBURGH State PA Zip Code 15235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF WHOLESALE BANKING OFFIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000365L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

C. MOOREHEAD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3323 SCATHELOCKE ROAD
 City PITTSBURGH State PA Zip Code 15235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF WHOLESALE BANKING OFFIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000362L11A1
 Amount of Each Receipt this Period 24.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	72.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MORROW, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 ASBURY LANE

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000373L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. MORROW, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 ASBURY LANE

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000370L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. MORROW, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 122 ASBURY LANE

City STATE COLLEGE	State PA	Zip Code 16801
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000367L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MUCHNOK, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 LANGDON DR

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES FIRST NATL INS AGENCY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016

Transaction ID : B000264S000376L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. MUCHNOK, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 LANGDON DR

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES FIRST NATL INS AGENCY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016

Transaction ID : B000268S000373L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. MUCHNOK, MARTIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 LANGDON DR

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) PRES FIRST NATL INS AGENCY
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2016

Transaction ID : B000269S000370L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 90
	<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)
F.N.B. CORPORATION PAC

A. MULLIN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 HIGH STREET

City BROWNSVILLE	State PA	Zip Code 15417
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000378L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. MULLIN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 HIGH STREET

City BROWNSVILLE	State PA	Zip Code 15417
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000375L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. MULLIN, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 HIGH STREET

City BROWNSVILLE	State PA	Zip Code 15417
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000372L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 90		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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)
F.N.B. CORPORATION PAC

A. MURPHY, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 OLD ROUTE 19

City NEW CASTLE	State PA	Zip Code 16101
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR CNSMR BNKG SLTN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016

Transaction ID : B000264S000379L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. MURPHY, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 OLD ROUTE 19

City NEW CASTLE	State PA	Zip Code 16101
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR CNSMR BNKG SLTN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016

Transaction ID : B000268S000376L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. MURPHY, WENDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 OLD ROUTE 19

City NEW CASTLE	State PA	Zip Code 16101
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR CNSMR BNKG SLTN
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2016

Transaction ID : B000269S000373L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 90
	<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)
F.N.B. CORPORATION PAC

A. NEUMANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1741 SPERRYS FORGE TRAIL

City WESTLAKE	State OH	Zip Code 44145
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000387L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. NEUMANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1741 SPERRYS FORGE TRAIL

City WESTLAKE	State OH	Zip Code 44145
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000384L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. NEUMANN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1741 SPERRYS FORGE TRAIL

City WESTLAKE	State OH	Zip Code 44145
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) COMMERCIAL BANKER 3
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000381L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 90
	<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)
F.N.B. CORPORATION PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DELL, LISA, , ,

Mailing Address 10260 RINAMAN ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF RETIREMENT SERVIC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000391L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DELL, LISA, , ,

Mailing Address 10260 RINAMAN ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF RETIREMENT SERVIC
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000388L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'DELL, LISA, , ,

Mailing Address 10260 RINAMAN ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF RETIREMENT SERVIC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000385L11A1

Amount of Each Receipt this Period
10.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 90
	(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

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)
F.N.B. CORPORATION PAC

A. OWENS, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 SADDLE RIDGE ROAD
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) INVESTMENT REAL ESTATE BANKE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000399L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
 PAYROLL DEDUCTION

B. OWENS, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 SADDLE RIDGE ROAD
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) INVESTMENT REAL ESTATE BANKE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000396L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
 PAYROLL DEDUCTION

C. OWENS, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 414 SADDLE RIDGE ROAD
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) INVESTMENT REAL ESTATE BANKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000393L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 33.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 OF 90
	(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

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)
F.N.B. CORPORATION PAC

A. POWDERLY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 RADCLIFF DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR INVST RL EST BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000420L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

B. POWDERLY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 RADCLIFF DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR INVST RL EST BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000417L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

C. POWDERLY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 RADCLIFF DRIVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR INVST RL EST BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000414L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶ 33.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 OF 90
	(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

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)
F.N.B. CORPORATION PAC

A. PRICE, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7073 BEAVER SPRING ROAD
 City HARRISBURG State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL CREDIT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 11 / 30 / 2016
Transaction ID : B000264S000424L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. PRICE, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7073 BEAVER SPRING ROAD
 City HARRISBURG State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL CREDIT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 12 / 15 / 2016
Transaction ID : B000268S000421L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. PRICE, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7073 BEAVER SPRING ROAD
 City HARRISBURG State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL CREDIT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 12 / 30 / 2016
Transaction ID : B000269S000418L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 90
	<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)
F.N.B. CORPORATION PAC

A. PRUSAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 PHOENIX ROAD W
 City PHOENIX State MD Zip Code 21131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000425L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. PRUSAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 PHOENIX ROAD W
 City PHOENIX State MD Zip Code 21131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000422L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. PRUSAK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 PHOENIX ROAD W
 City PHOENIX State MD Zip Code 21131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL BANKING EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000419L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 90
	<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)
F.N.B. CORPORATION PAC

A. PULEO, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 SAWMILL RD.

City GREENSBURG	State PA	Zip Code 15601
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS MGR SMALL BUS BNKG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000427L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

B. PULEO, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 SAWMILL RD.

City GREENSBURG	State PA	Zip Code 15601
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS MGR SMALL BUS BNKG
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000424L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

C. PULEO, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1709 SAWMILL RD.

City GREENSBURG	State PA	Zip Code 15601
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS MGR SMALL BUS BNKG
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000421L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 90
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. RIZZO, MICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3131 PERRYVILLE AVENUE

City PITTSBURGH	State PA	Zip Code 15214
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF MORTGAGE OPERATI
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000439L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. RIZZO, MICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3131 PERRYVILLE AVENUE

City PITTSBURGH	State PA	Zip Code 15214
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF MORTGAGE OPERAT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000436L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. RIZZO, MICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3131 PERRYVILLE AVENUE

City PITTSBURGH	State PA	Zip Code 15214
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MANAGER OF MORTGAGE OPERATI
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000433L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 90
	<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)
F.N.B. CORPORATION PAC

A. ROBINSON, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8285 WEMBLEY COURT
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF CONSUMER BANKING OFFICE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **11 / 30 / 2016**
Transaction ID : B000264S000443L11A1
 Amount of Each Receipt this Period 25.00
 Memo Item
 PAYROLL DEDUCTION

B. ROBINSON, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8285 WEMBLEY COURT
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF CONSUMER BANKING OFFICE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 15 / 2016**
Transaction ID : B000268S000440L11A1
 Amount of Each Receipt this Period 25.00
 Memo Item
 PAYROLL DEDUCTION

C. ROBINSON, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8285 WEMBLEY COURT
 City CHAGRIN FALLS State OH Zip Code 44023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF CONSUMER BANKING OFFICE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 30 / 2016**
Transaction ID : B000269S000437L11A1
 Amount of Each Receipt this Period 25.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 90
	<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)
F.N.B. CORPORATION PAC

A. ROBINSON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 REGESTER AVE

City BALTIMORE	State MD	Zip Code 21212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKING TEAM LEADER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2016

Transaction ID : B000264S000444L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. ROBINSON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 REGESTER AVE

City BALTIMORE	State MD	Zip Code 21212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKING TEAM LEADER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2016

Transaction ID : B000268S000441L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. ROBINSON, HUGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 710 REGESTER AVE

City BALTIMORE	State MD	Zip Code 21212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) BUSINESS BANKING TEAM LEADER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2016

Transaction ID : B000269S000438L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. RUBRITZ, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 VENANGO TRAIL
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CORP CONTROLLER & SVP FNB C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000453L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

B. RUBRITZ, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 VENANGO TRAIL
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CORP CONTROLLER & SVP FNB C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000450L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

C. RUBRITZ, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 VENANGO TRAIL
 City MARS State PA Zip Code 16046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CORP CONTROLLER & SVP FNB C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000447L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 90
	<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)
F.N.B. CORPORATION PAC

A. SAGHY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1832 TILTON DRIVE

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS & PORTFOLIO MGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000455L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. SAGHY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1832 TILTON DRIVE

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS & PORTFOLIO MGR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000452L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. SAGHY, MICHAEL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1832 TILTON DRIVE

City PITTSBURGH	State PA	Zip Code 15241
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR SLS & PORTFOLIO MGR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000449L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	36.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. SCHLEGEL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2307 LINDALE COURT
 City NORTH HUNTINGDON State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SENIOR PORTFOLIO ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000462L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

B. SCHLEGEL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2307 LINDALE COURT
 City NORTH HUNTINGDON State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SENIOR PORTFOLIO ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000459L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

C. SCHLEGEL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2307 LINDALE COURT
 City NORTH HUNTINGDON State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SENIOR PORTFOLIO ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000456L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 90
	<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)
F.N.B. CORPORATION PAC

A. SHOZDA, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 VENANGO TRAIL

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF TECHNOLOGY OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		30		2016

Transaction ID : B000264S000473L11A1

Amount of Each Receipt this Period
25.00

Memo Item
PAYROLL DEDUCTION

B. SHOZDA, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 VENANGO TRAIL

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF TECHNOLOGY OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2016

Transaction ID : B000268S000470L11A1

Amount of Each Receipt this Period
25.00

Memo Item
PAYROLL DEDUCTION

C. SHOZDA, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 VENANGO TRAIL

City MARS	State PA	Zip Code 16046
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF TECHNOLOGY OFFICER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2016

Transaction ID : B000269S000467L11A1

Amount of Each Receipt this Period
25.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 90
	<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)
F.N.B. CORPORATION PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STEINER, RICHARD, , ,

Mailing Address **453 CARNEGIE DRIVE**

City PITTSBURGH	State PA	Zip Code 15243
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF MARKETING OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000498L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STEINER, RICHARD, , ,

Mailing Address **453 CARNEGIE DRIVE**

City PITTSBURGH	State PA	Zip Code 15243
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF MARKETING OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000495L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
STEINER, RICHARD, , ,

Mailing Address **453 CARNEGIE DRIVE**

City PITTSBURGH	State PA	Zip Code 15243
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) CHIEF MARKETING OFFICER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000492L11A1

Amount of Each Receipt this Period

15.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 90
	<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)
F.N.B. CORPORATION PAC

A. STEWART, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 517 SALEM HEIGHTS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR PRJ MGMT OFFICE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000500L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. STEWART, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 517 SALEM HEIGHTS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR PRJ MGMT OFFICE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000497L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. STEWART, DANA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 517 SALEM HEIGHTS DRIVE

City GIBSONIA	State PA	Zip Code 15044
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIR PRJ MGMT OFFICE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000494L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 90
	<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)
F.N.B. CORPORATION PAC

A. STOLAR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8559 E LAKE RD

City ERIE	State PA	Zip Code 16511
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG CRD OFCR & DIR SPL ASSETS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : B000264S000502L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

B. STOLAR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8559 E LAKE RD

City ERIE	State PA	Zip Code 16511
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG CRD OFCR & DIR SPL ASSETS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : B000268S000499L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

C. STOLAR, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8559 E LAKE RD

City ERIE	State PA	Zip Code 16511
--------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REG CRD OFCR & DIR SPL ASSETS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : B000269S000496L11A1

Amount of Each Receipt this Period
11.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 90
	<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)
F.N.B. CORPORATION PAC

A. SULLIVAN, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5432 GRACE DRIVE

City MENTOR	State OH	Zip Code 44060
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR RELTN MGR BUS CRD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000508L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

B. SULLIVAN, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5432 GRACE DRIVE

City MENTOR	State OH	Zip Code 44060
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR RELTN MGR BUS CRD
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000505L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

C. SULLIVAN, BARRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5432 GRACE DRIVE

City MENTOR	State OH	Zip Code 44060
----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SR RELTN MGR BUS CRD
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000502L11A1

Amount of Each Receipt this Period
12.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 90
	<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)
F.N.B. CORPORATION PAC

A. SULLIVAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10320 GRUBBS ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF TREASURY MANAGE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2016

Transaction ID : B000264S000509L11A1

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

B. SULLIVAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10320 GRUBBS ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF TREASURY MANAGE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

Transaction ID : B000268S000506L11A1

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

C. SULLIVAN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10320 GRUBBS ROAD

City WEXFORD	State PA	Zip Code 15090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) DIRECTOR OF TREASURY MANAGE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

Transaction ID : B000269S000503L11A1

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 90
	<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)
F.N.B. CORPORATION PAC

A. TEBALDI, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 W. 28TH ST.
 City ERIE State PA Zip Code 16506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000518L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

B. TEBALDI, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 W. 28TH ST.
 City ERIE State PA Zip Code 16506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000515L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

C. TEBALDI, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4226 W. 28TH ST.
 City ERIE State PA Zip Code 16506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MGR CML BNKG
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000512L11A1
 Amount of Each Receipt this Period 11.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. TISDALE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MOSSWAY
 City BALTIMORE State MD Zip Code 21212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MKT EXEC & PRES MARYLAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000524L11A1
 Amount of Each Receipt this Period 18.00
 Memo Item
PAYROLL DEDUCTION

B. TISDALE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MOSSWAY
 City BALTIMORE State MD Zip Code 21212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MKT EXEC & PRES MARYLAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000521L11A1
 Amount of Each Receipt this Period 18.00
 Memo Item
PAYROLL DEDUCTION

C. TISDALE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 MOSSWAY
 City BALTIMORE State MD Zip Code 21212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG MKT EXEC & PRES MARYLAND
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000518L11A1
 Amount of Each Receipt this Period 18.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	54.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
F.N.B. CORPORATION PAC

A. TURCSANYI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 CRIMSON DRIVE

City PITTSBURGH	State PA	Zip Code 15237
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REGIONAL CREDIT OFFICER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016
Transaction ID : B000264S000528L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

B. TURCSANYI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 CRIMSON DRIVE

City PITTSBURGH	State PA	Zip Code 15237
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REGIONAL CREDIT OFFICER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016
Transaction ID : B000268S000525L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

C. TURCSANYI, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 CRIMSON DRIVE

City PITTSBURGH	State PA	Zip Code 15237
--------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) REGIONAL CREDIT OFFICER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2016
Transaction ID : B000269S000522L11A1

Amount of Each Receipt this Period
 11.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	33.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 90
	<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)
F.N.B. CORPORATION PAC

A. TURNER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HAZELWOOD DRIVE
 City CRANBERRY TWP State PA Zip Code 16066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR RES MTG SERVICING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000529L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

B. TURNER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HAZELWOOD DRIVE
 City CRANBERRY TWP State PA Zip Code 16066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR RES MTG SERVICING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000526L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

C. TURNER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HAZELWOOD DRIVE
 City CRANBERRY TWP State PA Zip Code 16066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR RES MTG SERVICING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000523L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 90
<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)
F.N.B. CORPORATION PAC

A. URICK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 MT ETNA ROAD

City SMITHTON	State PA	Zip Code 15479
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR RETAIL CREDIT OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 11 / 30 / 2016
Transaction ID : B000264S000531L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
 PAYROLL DEDUCTION

B. URICK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 MT ETNA ROAD

City SMITHTON	State PA	Zip Code 15479
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR RETAIL CREDIT OFFICER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 12 / 15 / 2016
Transaction ID : B000268S000528L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
 PAYROLL DEDUCTION

C. URICK, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 MT ETNA ROAD

City SMITHTON	State PA	Zip Code 15479
------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) SENIOR RETAIL CREDIT OFFICER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 12 / 30 / 2016
Transaction ID : B000269S000525L11A1

Amount of Each Receipt this Period
 12.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	36.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 90
	<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)
F.N.B. CORPORATION PAC

A. WILLIAMSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 FIELDSTONE PLACE
 City ZELIENOPLE State PA Zip Code 16063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CML BANK LEASING SPCL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000556L11A1
 Amount of Each Receipt this Period 9.00
 Memo Item
PAYROLL DEDUCTION

B. WILLIAMSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 FIELDSTONE PLACE
 City ZELIENOPLE State PA Zip Code 16063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CML BANK LEASING SPCL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000553L11A1
 Amount of Each Receipt this Period 9.00
 Memo Item
PAYROLL DEDUCTION

C. WILLIAMSON, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 FIELDSTONE PLACE
 City ZELIENOPLE State PA Zip Code 16063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CML BANK LEASING SPCL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000550L11A1
 Amount of Each Receipt this Period 9.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	27.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
F.N.B. CORPORATION PAC

A. YATES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 WEST GROVE DRIVE
 City GIBSONIA State PA Zip Code 15044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) GROUP MANAGER OF PRIVATE BAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2016
Transaction ID : B000264S000565L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
 PAYROLL DEDUCTION

B. YATES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 WEST GROVE DRIVE
 City GIBSONIA State PA Zip Code 15044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) GROUP MANAGER OF PRIVATE BAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 15 / 2016
Transaction ID : B000268S000562L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
 PAYROLL DEDUCTION

C. YATES, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2009 WEST GROVE DRIVE
 City GIBSONIA State PA Zip Code 15044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) GROUP MANAGER OF PRIVATE BAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 12 / 30 / 2016
Transaction ID : B000269S000559L11A1
 Amount of Each Receipt this Period 15.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	3357.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)
F.N.B. CORPORATION PAC

Full Name (Last, First, Middle Initial)

A. VOLUNTEERS FOR ARGALL

Mailing Address PO BOX 241

City TAMAQUA State PA Zip Code 18252

Purpose of Disbursement
CHECK LOST IN TRANSIT

Category/
Type

Candidate Name
ARGALL, DAVID, G, ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: PA District: 29

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 13 / 2016

FEC Identification Number

Transaction ID : B000271S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PENNSYLVANIA BANKERS ASSOCIATION PAC

Mailing Address 3897 NORTH FRONT STREET

City HARRISBURG State PA Zip Code 17110

Purpose of Disbursement
2016 ANNUAL/OTHER

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ANNUAL/OTHER
State: PA District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 09 / 2016

FEC Identification Number

Transaction ID : B000270S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="12500.00"/>