

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)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2018 through 04 / 30 / 2018

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 05 / 03 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

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="2018"/>		222926.74
(b) Cash on Hand at Beginning of Reporting Period.....	243066.58	
(c) Total Receipts (from Line 19)	21379.31	58819.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	264445.89	281745.89
7. Total Disbursements (from Line 31).....	2500.00	19800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	261945.89	261945.89
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

Write or Type Committee Name

F.N.B. CORPORATION PAC

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

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).....	7311.90	16724.60
(ii) Unitemized	14067.41	42094.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21379.31	58819.15
(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)	21379.31	58819.15
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)).....▶	21379.31	58819.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21379.31	58819.15

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	9300.00
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).....	2500.00	10500.00
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)) ..	2500.00	19800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	19800.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	21379.31	58819.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21379.31	58819.15
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 14
	<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. CAMPBELL, WILLIAM, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 ROMAIN ROAD
 City PULASKI State PA Zip Code 16143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 04 / 25 / 2018
Transaction ID : B000443S000001L11A1
 Amount of Each Receipt this Period 575.00
 Memo Item

B. CASALNOVA, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 CONNEMARA COURT
 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) EVP-HUMAN RESOURCES & CORP S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 04 / 2018
Transaction ID : B000427S000001L11A1
 Amount of Each Receipt this Period 425.00
 Memo Item

C. CRAIG, ZACHARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 GARDNER ST
 City JOHNSTOWN State PA Zip Code 15905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REG SLS MGR TRUST & INVST ADV C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 06 / 2018
Transaction ID : B000433S000145L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 7 OF 14
	(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. DONATELLI, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5112 BRONWYN CT.
 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) DIRECTOR OF ASSET BASED LENDII
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 09 / 2018
Transaction ID : B000429S000002L11A1
 Amount of Each Receipt this Period 300.00
 Memo Item

B. EDWARDS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 PINE BROOK PLACE
 City WILKESBORO State NC Zip Code 28697
 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 PIEDMONT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 06 / 2018
Transaction ID : B000433S000187L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
 PAYROLL DEDUCTION

C. HOLMES, J., STEFAN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4040 HEMLOCK CIRCLE
 City ORANGE VILLAGE State OH Zip Code 44122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) GOVERNMENT & CMTY BNKG MGR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 20 / 2018
Transaction ID : B000439S000331L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	850.00
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 14
	<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. HOLQUIST, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 HAVENWOOD DRIVE
 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) EXEC DIR RETL BNKG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 30 / 2018
Transaction ID : B000447S000004L11A1
 Amount of Each Receipt this Period - 98.10
 Memo Item
PAYROLL DEDUCTION CORRECTION

B. HORMELL, ROBERT, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5815 SPRINGTOWN ROAD
 City WATSONTOWN State PA Zip Code 17777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 04 / 18 / 2018
Transaction ID : B000436S000001L11A1
 Amount of Each Receipt this Period 575.00
 Memo Item

C. LEONARD, J., GRAHAM, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1108 STOCKLEYBRIDGE DR.
 City CHESAPEAKE State VA Zip Code 23322
 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 ▼ 275.00

Date of Receipt 04 / 20 / 2018
Transaction ID : B000439S000419L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	751.90
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 9 OF 14
	(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. LEONE, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 FOX MEADOW 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) MGR PORTFOLIO & COLLATERAL OF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2018
Transaction ID : B000439S000421L11A1
 Amount of Each Receipt this Period
 300.00
 Memo Item
 PAYROLL DEDUCTION

B. MACHI, VITO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7634 COBBLERS RUN
 City POLAND State OH Zip Code 44514
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2018
Transaction ID : B000433S000435L11A1
 Amount of Each Receipt this Period
 275.00
 Memo Item
 PAYROLL DEDUCTION

C. MALONE, DAVID, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address FOUR PPG PLACE, SUITE 600
 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) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2018
Transaction ID : B000426S000005L11A1
 Amount of Each Receipt this Period
 575.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 14
	<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. MATILE, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3150 W. 160TH ST.
 City CLEVELAND State OH Zip Code 44111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SR WEALTH & PLANNING SPCL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 06 / 2018
Transaction ID : B000433S000451L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
PAYROLL DEDUCTION

B. MENCINI, FRANK, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21574 AWBREY PL
 City ASHBURN State VA Zip Code 20148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 04 / 05 / 2018
Transaction ID : B000428S000001L11A1
 Amount of Each Receipt this Period 575.00
 Memo Item

C. MOLSTER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 FREDERICK STREET PO BOX 212
 City PORT ROYAL State VA Zip Code 22535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) DIRECTOR OF FINANCIAL PLANNING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 20 / 2018
Transaction ID : B000439S000505L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
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 14
	<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. ORIE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 COLLEGE AVENUE
 City BEAVER State PA Zip Code 15009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF LEGAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 04 / 09 / 2018
Transaction ID : B000429S000004L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item

B. PETHEL, BOYD, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3129 BELVOIR BLVD.
 City SHAKER HEIGHTS State OH Zip Code 44122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) REGIONAL MARKET EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 20 / 2018
Transaction ID : B000437S000002L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item

C. PETROVSKY, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9751 OLD RT. 56 HIGHWAY WEST
 City SHELOCTA State PA Zip Code 15774
 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 ▼ 275.00

Date of Receipt 04 / 06 / 2018
Transaction ID : B000433S000549L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	825.00
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 14
	<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. RAI, VIKRANT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9035 LEDGEMONT DR

City BROADVIEW HTS	State OH	Zip Code 44147
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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 RES SECONDARY & CAPITAL M
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2018

Transaction ID : B000433S000575L11A1

Amount of Each Receipt this Period
275.00

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
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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) CHIEF CONSUMER BANKING OFFICI
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2018

Transaction ID : B000433S000594L11A1

Amount of Each Receipt this Period
30.00

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 ▼
215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2018

Transaction ID : B000439S000611L11A1

Amount of Each Receipt this Period
30.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	335.00
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 13 OF 14
(check only one)

<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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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. STRIMBU, WILLIAM, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7281 WILDWOOD DRIVE

City BROOKFIELD	State PA	Zip Code 44403
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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) DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2018

Transaction ID : B000426S000001L11A1

Amount of Each Receipt this Period
575.00

Memo Item

B. TVAROCH, CHRISTINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1479 CASTILLION DRIVE

City WARREN	State OH	Zip Code 44484
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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) GENERAL AUDITOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2018

Transaction ID : B000439S000733L11A1

Amount of Each Receipt this Period
425.00

Memo Item
PAYROLL DEDUCTION

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

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	7311.90

**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

A. COMMITTEE TO ELECT A KITTLEMAN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address C/O LISA MARR
PO BOX 282

M M M	/	D D D	/	Y Y Y Y Y
04		25		2018

City SIMPSONVILLE State MD Zip Code 21150

FEC Identification Number

Purpose of Disbursement
FUNDRAISER

011
Category/ Type

C
Transaction ID : B000440S000
Amount of Each Disbursement this Period
1000.00

Candidate Name
KITTLEMAN, ALLAN, H, ,

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify) ▼
 State: MD District:

Memo Item

B. FRIENDS OF BOB MERSKI

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 667

M M M	/	D D D	/	Y Y Y Y Y
04		30		2018

City ERIE State PA Zip Code 16512

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION-RECEPTION

011
Category/ Type

C
Transaction ID : B000441S000
Amount of Each Disbursement this Period
500.00

Candidate Name
MERSKI, BOB, , ,

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify) ▼
 State: PA District: 02

Memo Item

C. NAIOP MARYLAND PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6030 MARSHALEE DRIVE
SUITE 208

M M M	/	D D D	/	Y Y Y Y Y
04		25		2018

City ELKRIDGE State MD Zip Code 21076

FEC Identification Number

Purpose of Disbursement
RECEPTION

011
Category/ Type

C
Transaction ID : B000440S000
Amount of Each Disbursement this Period
1000.00

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify) ▼ ANNUAL/OTHER
 State: MD District:

Memo Item

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

2500.00

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

2500.00
