

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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2017 through / / 2017

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 / / 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.

**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="2017"/>		184527.98
(b) Cash on Hand at Beginning of Reporting Period.....	238924.87	
(c) Total Receipts (from Line 19)	8162.01	89158.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	247086.88	273686.88
7. Total Disbursements (from Line 31).....	4850.00	31450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	242236.88	242236.88
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)

Page 3

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).....	2201.98	22994.66
(ii) Unitemized	5960.03	66164.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8162.01	89158.90
(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)	8162.01	89158.90
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)).....▶	8162.01	89158.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8162.01	89158.90

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.....	500.00	12950.00
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).....	4350.00	18500.00
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)) ..	4850.00	31450.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4850.00	31450.00

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)	8162.01	89158.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8162.01	89158.90
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:	PAGE 6 OF 23
	(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
APP, DANIEL, , ,

Mailing Address 213 GABRIEL DR

City MARS	State PA	Zip Code 16046
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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) DIR OPRTN & PROCESSING
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000008L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
APP, DANIEL, , ,

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 ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000008L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

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

Mailing Address 8527 IVY HILL DRIVE

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) EVP OF SMALL BUSINESS BANKING
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
249.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000010L11A1

Amount of Each Receipt this Period
16.62

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	44.32
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 23
	(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"/> 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. 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
----------------	-------------	-------------------

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 ▼
249.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000010L11A1

Amount of Each Receipt this Period

60.86

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
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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) CFO FNB CORP
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000081L11A1

Amount of Each Receipt this Period

22.12

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
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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) CFO FNB CORP
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
327.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000080L11A1

Amount of Each Receipt this Period

22.12

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	60.86
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 23
	<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. 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 ▼
235.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : B000370S000119L11A1

Amount of Each Receipt this Period
15.69

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
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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) PRES & CEO WEALTH MGMT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2017

Transaction ID : B000371S000118L11A1

Amount of Each Receipt this Period
15.69

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
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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) DIR ENTERPRISE RISK MGMT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
218.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : B000370S000124L11A1

Amount of Each Receipt this Period
16.35

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	47.73
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 23
	(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 ▼ 218.90

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000123L11A1
 Amount of Each Receipt this Period 16.35
 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 ▼ 332.25

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000139L11A1
 Amount of Each Receipt this Period 22.15
 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 ▼ 332.25

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000138L11A1
 Amount of Each Receipt this Period 22.15
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	60.65
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 23
<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. ELLSWORTH, LAURA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 GRANT STREET, 45TH FLOOR

City PITTSBURGH	State PA	Zip Code 15219
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JONES DAY	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
07	/	13	/	2017

Transaction ID : B000363S000002L11A1

Amount of Each Receipt this Period
575.00

Memo Item

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
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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 OF MORTGAGE SERVICE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2017

Transaction ID : B000370S000230L11A1

Amount of Each Receipt this Period
13.85

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
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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 OF MORTGAGE SERVICE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2017

Transaction ID : B000371S000227L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	602.70
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 23
	<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 LI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.75

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000238L11A1
 Amount of Each Receipt this Period 23.00
 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 LI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.75

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000235L11A1
 Amount of Each Receipt this Period 23.00
 Memo Item
 PAYROLL DEDUCTION

C. JONES, CHARLES, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8513 PEYTON RANDOLPH DR
 City CHARLOTTE State NC Zip Code 28277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) SR VP MIDDLE MARKET BANKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 10 / 2017
Transaction ID : B000372S000001L11A1
 Amount of Each Receipt this Period 275.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	321.00
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 12 OF 23
	(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"/> 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLY, TRACI, , ,

Mailing Address 1787 W ELMWOOD RD

City CLARKSVILLE	State TN	Zip Code 37040
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR BRANCH LVL 2 REGENCY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000316L11A1

Amount of Each Receipt this Period
35.00

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KELLY, TRACI, , ,

Mailing Address 1787 W ELMWOOD RD

City CLARKSVILLE	State TN	Zip Code 37040
---------------------	-------------	-------------------

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

Name of Employer (for Individual) F.N.B. CORPORATION	Occupation (for Individual) MGR BRANCH LVL 2 REGENCY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000312L11A1

Amount of Each Receipt this Period
35.00

Memo Item
PAYROLL DEDUCTION

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

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 & PMTS
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000323L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	83.85
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 23
	<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. 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 & PMTS
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000319L11A1

Amount of Each Receipt this Period
13.85

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 ▼
276.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000341L11A1

Amount of Each Receipt this Period
18.46

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 RI
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000337L11A1

Amount of Each Receipt this Period
18.46

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	50.77
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 23
	<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. MANLEY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 342.75

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000404L11A1
 Amount of Each Receipt this Period 28.85
 Memo Item
PAYROLL DEDUCTION

B. MANLEY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 342.75

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000400L11A1
 Amount of Each Receipt this Period 28.85
 Memo Item
PAYROLL DEDUCTION

C. MOORE, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9345 SUMMIT ST NW
 City CLINTON State OH Zip Code 44216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR BRANCH LVL 1 REGENCY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000445L11A1
 Amount of Each Receipt this Period 35.00
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	92.70
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 15 OF 23
	(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"/> 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. MOORE, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9345 SUMMIT ST NW
 City CLINTON State OH Zip Code 44216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) MGR BRANCH LVL 1 REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000441L11A1
 Amount of Each Receipt this Period 35.00
 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 ▼ 332.25

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000447L11A1
 Amount of Each Receipt this Period 22.15
 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 ▼ 332.25

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000443L11A1
 Amount of Each Receipt this Period 22.15
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	79.30
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 23
	<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 ▼
223.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000478L11A1

Amount of Each Receipt this Period
19.81

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 ▼
223.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000474L11A1

Amount of Each Receipt this Period
19.81

Memo Item
PAYROLL DEDUCTION

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

Mailing Address 2015 CAMDEN RD

City WINGATE	State NC	Zip Code 28174
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

Transaction ID : B000362S000002L11A1

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	289.62
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 23
	<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. POSTLETHWAIT, RYAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 S WILD CHERRY CIRCLE
 City BOONE State NC Zip Code 28607
 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 ▼ 275.00

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000519L11A1
 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F.N.B. CORPORATION Occupation (for Individual) CHIEF CONSUMER BANKING OFFIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.40

Date of Receipt 07 / 14 / 2017
Transaction ID : B000370S000546L11A1
 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 ▼ 365.40

Date of Receipt 07 / 28 / 2017
Transaction ID : B000371S000540L11A1
 Amount of Each Receipt this Period 25.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 23
	<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHOZDA, MARK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2017
Mailing Address 225 VENANGO TRAIL			Transaction ID : B000370S000589L11A1
City MARS	State PA	Zip Code 16046	Amount of Each Receipt this Period 23.08
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item PAYROLL DEDUCTION
Name of Employer (for Individual) F.N.B. CORPORATION		Occupation (for Individual) CHIEF TECHNOLOGY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.20		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHOZDA, MARK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 28 / 2017
Mailing Address 225 VENANGO TRAIL			Transaction ID : B000371S000583L11A1
City MARS	State PA	Zip Code 16046	Amount of Each Receipt this Period 23.08
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item PAYROLL DEDUCTION
Name of Employer (for Individual) F.N.B. CORPORATION		Occupation (for Individual) CHIEF TECHNOLOGY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.20		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SULLIVAN, MARK, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2017
Mailing Address 10320 GRUBBS ROAD			Transaction ID : B000370S000635L11A1
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 18.46
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item PAYROLL DEDUCTION
Name of Employer (for Individual) F.N.B. CORPORATION		Occupation (for Individual) DIRECTOR OF TREASURY MANAGEM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 276.90		

SUBTOTAL of Receipts This Page (optional).....▶	64.62
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 19 OF 23
	(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"/> 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. 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 ▼
276.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000629L11A1

Amount of Each Receipt this Period
18.46

Memo Item
PAYROLL DEDUCTION

B. TISDALE, MAC, , ,
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 ▼
246.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000651L11A1

Amount of Each Receipt this Period
16.35

Memo Item
PAYROLL DEDUCTION

C. TISDALE, MAC, , ,
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 ▼
246.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000645L11A1

Amount of Each Receipt this Period
16.35

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	51.16
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 23
	(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. YATES, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2009 WEST GROVE 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) GROUP MANAGER OF PRIVATE BAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2017

Transaction ID : B000370S000709L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

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

Mailing Address 2009 WEST GROVE 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) GROUP MANAGER OF PRIVATE BAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		28		2017

Transaction ID : B000371S000701L11A1

Amount of Each Receipt this Period
13.85

Memo Item
PAYROLL DEDUCTION

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

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
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	27.70
TOTAL This Period (last page this line number only).....	2201.98

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. FRIENDS OF GLENN THOMPSON

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
07 / 11 / 2017

Mailing Address 400 N MICHAEL STREET

City ST MARY'S State PA Zip Code 15857

Purpose of Disbursement RECEPTION Category/Type: 011

Candidate Name THOMPSON, GLENN, , ,

FEC Identification Number C00444620
Transaction ID : B000367S000
Amount of Each Disbursement this Period 500.00

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

State: PA District: 05 Memo Item

B.

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type:

Candidate Name

FEC Identification Number C
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

C.

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type:

Candidate Name

FEC Identification Number C
Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

**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

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SMH

Mailing Address 103 BEECH VALLEY ROAD

City JEANNETTE State PA Zip Code 15644

Purpose of Disbursement
FUNDRAISER

011
Category/
Type

Candidate Name
HAMILTON, SHERRY, MAGRETTI, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000369S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. LARRY HOGAN FOR GOVERNOR

Mailing Address PO BOX 6559

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
RECEPTION

011
Category/
Type

Candidate Name
HOGAN, LARRY, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: MD District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000365S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. COMMITTEE FOR KOPAS

Mailing Address 341 WILLOW CROSSING ROAD

City GREENSBURG State PA Zip Code 15601

Purpose of Disbursement
GOLF OUTING

011
Category/
Type

Candidate Name
KOPAS, TED, , ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000369S000
Amount of Each Disbursement this Period

Memo Item

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

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

**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. COMMITTEE TO ELECT RICH MAZZATESTS

Mailing Address 2312 SCARBOROUGH

City HARRISBURG State PA Zip Code 17132

Purpose of Disbursement
FUNDRAISING

011
Category/
Type

Candidate Name
MAZZATESTS, RICH, , ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000368S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MIKE REESE

Mailing Address 1222 VILLAGE ROAD

City MT. PLEASANT State PA Zip Code 15666

Purpose of Disbursement
RECEPTION

011
Category/
Type

Candidate Name
REESE, MICHAEL, P, ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: PA District: 59

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000366S000
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. THE FRIENDS OF VINCENT A VICITIES

Mailing Address 61 EAST MAIN STREET

City UNIONTOWN State PA Zip Code 15401

Purpose of Disbursement
FUNDRAISER

011
Category/
Type

Candidate Name
VICITIES, VINCENT, A, ,

Office Sought: House Senate President
Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : B000364S000
Amount of Each Disbursement this Period

Memo Item

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

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