

**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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y 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 Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer MARK D SULLIVAN

Signature of Treasurer

MARK D SULLIVAN

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

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  
08 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
08 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">109704.98</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">145680.48</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">7069.00</span>	<span style="border: 1px solid black; padding: 2px;">71486.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">152749.48</span>	<span style="border: 1px solid black; padding: 2px;">181190.98</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">883.50</span>	<span style="border: 1px solid black; padding: 2px;">29325.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">151865.98</span>	<span style="border: 1px solid black; padding: 2px;">151865.98</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ 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. 06/2004)

Page 3

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
08	/	01	/	2015

To:

M M	/	D D	/	Y Y Y Y Y Y
08	/	31	/	2015

**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).....

1149.00

18702.00

(ii) Unitemized .....

5920.00

52784.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7069.00

71486.00

(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) ..... ▶

7069.00

71486.00

## 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))..... ▶

7069.00

71486.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

7069.00

71486.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	-16.50	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-16.50	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	14200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	900.00	15125.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	883.50	29325.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	883.50	29325.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	7069.00	71486.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7069.00	71486.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	-16.50	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) ..... ►	-16.50	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 19

(check only one)

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

Full Name (Last, First, Middle Initial)

A. PETER ASIMAKOPOULOS

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

F.N.B. CORPORATION

Occupation

EVP-SMALL BUSINESS BANKING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2015

Transaction ID : B000177S000007L11A1

Amount of Each Receipt this Period

18.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. PETER ASIMAKOPOULOS

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

F.N.B. CORPORATION

Occupation

EVP-SMALL BUSINESS BANKING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2015

Transaction ID : B000178S000008L11A1

Amount of Each Receipt this Period

18.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. VINCE CALABRESE

Mailing Address 9003 PEREGRINE DRIVE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CFO FNB CORP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2015

Transaction ID : B000177S000056L11A1

Amount of Each Receipt this Period

23.00

PAYROLL DEDUCTION

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

59.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 19

<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 (Last, First, Middle Initial)

**A. VINCE CALABRESE**

Mailing Address 9003 PEREGRINE DRIVE

City	State	Zip Code
GIBSONIA	PA	15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CFO FNB CORP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2015

Transaction ID : B000178S000061L11A1

Amount of Each Receipt this Period

23.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. JAMES CHIAFULLO**

Mailing Address 625 LIBERTY AVENUE

City	State	Zip Code
PITTSBURGH	PA	15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

DIRECTOR &amp; ATTORNEY

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
08	/	05	/	2015

Transaction ID : B000179S000003L11A1

Amount of Each Receipt this Period

575.00

Full Name (Last, First, Middle Initial)

**C. KIM CRAIG**

Mailing Address 3957 EAST LAKE DRIVE

City	State	Zip Code
MORGANTOWN	WV	26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PRESIDENT &amp; CEO WEALTH MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	14	/	2015

Transaction ID : B000177S000083L11A1

Amount of Each Receipt this Period

17.00

PAYROLL DEDUCTION

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

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

615.00

# **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)

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

## **A. KIM CRAIG**

Mailing Address 3957 EAST LAKE DRIVE

City State Zip Code  
MORGANTOWN WV 26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PRESIDENT & CEO WEALTH MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000089L11A1

Amount of Each Receipt this Period

17.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

## **B. CHRISTIAN DEAN**

Mailing Address 4020 DEEPWOOD ROAD

City State Zip Code  
BALTIMORE MD 21218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

SALES MGR-SMALL BUSINESS BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000096L11A1

Amount of Each Receipt this Period

6.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

## **C. CHRISTIAN DEAN**

Mailing Address 4020 DEEPWOOD ROAD

City State Zip Code  
BALTIMORE MD 21218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

SALES MGR-SMALL BUSINESS BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000101L11A1

Amount of Each Receipt this Period

6.00

PAYROLL DEDUCTION

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

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

29.00



# **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 9 OF 19

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID GREEN**

Mailing Address 514 DAY STAR COURT

City State Zip Code  
 CRANBERRY TOWNSHIP PA 16066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 F.N.B. CORPORATION

Occupation  
 DIR-MORTGAGE SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000160L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. DAVID GREEN**

Mailing Address 514 DAY STAR COURT

City State Zip Code  
 CRANBERRY TOWNSHIP PA 16066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 F.N.B. CORPORATION

Occupation  
 DIR-MORTGAGE SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000169L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. GARY GUERRIERI**

Mailing Address 163 DODD DRIVE

City State Zip Code  
 WASHINGTON PA 15301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 F.N.B. CORPORATION

Occupation  
 CHIEF CRD OFF & SPEC LEND GRP EX

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000167L11A1

Amount of Each Receipt this Period

24.00

PAYROLL DEDUCTION

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

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

54.00

# **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 10 OF 19

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

**A. GARY GUERRIERI**

Mailing Address 163 DODD DRIVE

City  
WASHINGTON

State Zip Code  
PA 15301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CHIEF CRD OFF & SPEC LEND GRP EX

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000176L11A1

Amount of Each Receipt this Period

24.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. SAMUEL KIRSCH**

Mailing Address 1708 LA COSTA COURT

City  
PITTSBURGH

State Zip Code  
PA 15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

DIR-ELECTRONIC DELIVERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000209L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. SAMUEL KIRSCH**

Mailing Address 1708 LA COSTA COURT

City  
PITTSBURGH

State Zip Code  
PA 15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

DIR-ELECTRONIC DELIVERY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000221L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

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

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

54.00

# 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 11 OF 19

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

**A. FRANK KRIEDER**

Mailing Address 1576 WAKEFIELD DRIVE

City  
HERMITAGE

State Zip Code  
PA 16148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

EVP-COMMERCIAL BNKG&PRES-NW REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000223L11A1

Amount of Each Receipt this Period

17.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. FRANK KRIEDER**

Mailing Address 1576 WAKEFIELD DRIVE

City  
HERMITAGE

State Zip Code  
PA 16148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

EVP-COMMERCIAL BNKG&PRES-NW REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000236L11A1

Amount of Each Receipt this Period

17.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. MARK LOZZI**

Mailing Address 684 MELWOOD N.E.

City  
WARREN

State Zip Code  
OH 44483

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CFO - REGENCY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000254L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

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

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

49.00

**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 12 OF 19

<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 (Last, First, Middle Initial)

**A. MARK LOZZI**

Mailing Address 684 MELWOOD N.E.

 City  
 WARREN

 State  
 OH

 Zip Code  
 44483

 FEC ID number of contributing  
 federal political committee.

Name of Employer

F.N.B. CORPORATION

Occupation

CFO - REGENCY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Transaction ID : B000178S000268L11A1

Amount of Each Receipt this Period

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. JOSEPH MANLEY**

Mailing Address 363 LAUREL LANE

 City  
 WADSWORTH

 State  
 OH

 Zip Code  
 44281

 FEC ID number of contributing  
 federal political committee.

Name of Employer

F.N.B. CORPORATION

Occupation

REGIONAL CREDIT OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Transaction ID : B000177S000265L11A1

Amount of Each Receipt this Period

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. JOSEPH MANLEY**

Mailing Address 363 LAUREL LANE

 City  
 WADSWORTH

 State  
 OH

 Zip Code  
 44281

 FEC ID number of contributing  
 federal political committee.

Name of Employer

F.N.B. CORPORATION

Occupation

REGIONAL CREDIT OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

Transaction ID : B000178S000279L11A1

Amount of Each Receipt this Period

PAYROLL DEDUCTION

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

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 19

<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 (Last, First, Middle Initial)

**A. ROBERT MOOREHEAD**

Mailing Address 3323 SCATHELOCKE ROAD

City

PITTSBURGH

State

PA

Zip Code

15235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PGH MKT EXEC&amp;PRES-PGH REGION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2015

Transaction ID : B000177S000301L11A1

Amount of Each Receipt this Period

24.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. ROBERT MOOREHEAD**

Mailing Address 3323 SCATHELOCKE ROAD

City

PITTSBURGH

State

PA

Zip Code

15235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PGH MKT EXEC&amp;PRES-PGH REGION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : B000178S000321L11A1

Amount of Each Receipt this Period

24.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. BARRY ROBINSON**

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

F.N.B. CORPORATION

Occupation

EVP-CONSUMER BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2015

Transaction ID : B000177S000362L11A1

Amount of Each Receipt this Period

25.00

PAYROLL DEDUCTION

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

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

73.00

# **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 14 OF 19

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

**A. BARRY ROBINSON**

Mailing Address 8285 WEMBLEY COURT

City State Zip Code  
CHAGRIN FALLS OH 44023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

EVP-CONSUMER BANKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000383L11A1

Amount of Each Receipt this Period

25.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. RICHARD STEINER**

Mailing Address 453 CARNEGIE DRIVE

City State Zip Code  
PITTSBURGH PA 15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CHIEF MARKETING OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000407L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. RICHARD STEINER**

Mailing Address 453 CARNEGIE DRIVE

City State Zip Code  
PITTSBURGH PA 15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

CHIEF MARKETING OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000430L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

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

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

55.00

# **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 15 OF 19

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

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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

## **A. MARK SULLIVAN**

Mailing Address 10320 GRUBBS ROAD

City  
WEXFORD

State Zip Code  
PA 15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

DIRECTOR OF TREASURY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000419L11A1

Amount of Each Receipt this Period

20.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

## **B. MARK SULLIVAN**

Mailing Address 10320 GRUBBS ROAD

City  
WEXFORD

State Zip Code  
PA 15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

DIRECTOR OF TREASURY MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 31 / 2015

Transaction ID : B000178S000443L11A1

Amount of Each Receipt this Period

20.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

## **C. JAMES TISDALE**

Mailing Address 217 ANVIL WAY

City  
BALTIMORE

State Zip Code  
MD 21212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

REG MKT EXEC&PRES-MARYLAND REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

08 / 14 / 2015

Transaction ID : B000177S000431L11A1

Amount of Each Receipt this Period

18.00

PAYROLL DEDUCTION

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

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

58.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 19

<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 (Last, First, Middle Initial)

**A. JAMES TISDALE**

Mailing Address 217 ANVIL WAY

City  
BALTIMOREState  
MDZip Code  
21212FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

REG MKT EXEC&amp;PRES-MARYLAND REG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : B000178S000456L11A1

Amount of Each Receipt this Period

18.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. MICHAEL WAGNER**

Mailing Address 203 E. WILD CHERRY DRIVE

City  
MARSState  
PAZip Code  
16046FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PRIVATE BANKER 2

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2015

Transaction ID : B000177S000439L11A1

Amount of Each Receipt this Period

5.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C. MICHAEL WAGNER**

Mailing Address 203 E. WILD CHERRY DRIVE

City  
MARSState  
PAZip Code  
16046FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

PRIVATE BANKER 2

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : B000178S000465L11A1

Amount of Each Receipt this Period

5.00

PAYROLL DEDUCTION

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

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

28.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 19  
(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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NAME OF COMMITTEE (In Full)

**F.N.B. CORPORATION PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID YATES**

Mailing Address 715 BRISTLECONE DRIVE

City	State	Zip Code
GIBSONIA	PA	15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

GROUP MGR-PRIVATE BANKING

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
08		14		2015

Transaction ID : B000177S000460L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. DAVID YATES**

Mailing Address 715 BRISTLECONE DRIVE

City	State	Zip Code
GIBSONIA	PA	15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

F.N.B. CORPORATION

Occupation

GROUP MGR-PRIVATE BANKING

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
08		31		2015

Transaction ID : B000178S000487L11A1

Amount of Each Receipt this Period

15.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

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

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

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

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

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

30.00

1149.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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**

Full Name (Last, First, Middle Initial)

**A. FIRST NATIONAL BANK OF PENNSYLVANIA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Mailing Address 3320 EAST STATE STREET

City	State	Zip Code
HERMITAGE	PA	16148

Purpose of Disbursement  
BANK SERVICE CHARGE REFUND

001

Candidate Name

Category/  
Type**Transaction ID : B000181S000001L21B**

Amount of Each Disbursement this Period

-16.50
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

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

-16.50
-16.50

