

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

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

FOR LINE NUMBER: PAGE 52 OF 399

(check only one)

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

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NAME OF COMMITTEE (In Full)

Huntington BancShares Inc. Political Action Committee (HBI-PAC)

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

A. Cardimen, Andrew, , ,

Mailing Address 45 North Pennsylvania Street

City
IndianapolisState
INZip Code
46204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National BankOccupation (for Individual)
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 22 / 2019

Transaction ID : FEBAEFDB4B3A4BFE81D

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Carlson, Sharon, , ,

Mailing Address 525 Niles-Cortland Road Se

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National BankOccupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 08 / 2019

Transaction ID : 3A7CDB919A154DB18D3F

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Carlson, Sharon, , ,

Mailing Address 525 Niles-Cortland Road Se

City
WarrenState
OHZip Code
44484FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National BankOccupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 22 / 2019

Transaction ID : BDD2BDDCA82A40F2AD31

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

40.00

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