

**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: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="136173.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="201707.98"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5835.00"/>	<input type="text" value="84709.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="207542.98"/>	<input type="text" value="220882.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3200.00"/>	<input type="text" value="16540.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="204342.98"/>	<input type="text" value="204342.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

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).....	754.00	20589.00
(ii) Unitemized	5081.00	64120.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5835.00	84709.00
(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)	5835.00	84709.00
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))..... ▶	5835.00	84709.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5835.00	84709.00

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	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	3700.00
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	2700.00	12840.00
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)) ..	3200.00	16540.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3200.00	16540.00

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)	5835.00	84709.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5835.00	84709.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. DANIEL APP
Full Name (Last, First, Middle Initial)
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 F.N.B. CORPORATION	Occupation DIR OPRTN & PROCESSING
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000009L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

B. DANIEL APP
Full Name (Last, First, Middle Initial)
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 F.N.B. CORPORATION	Occupation DIR OPRTN & PROCESSING
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000009L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

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

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

Name of Employer F.N.B. CORPORATION	Occupation EVP OF SMALL BUSINESS BANKING
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000010L11A1

Amount of Each Receipt this Period
18.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	48.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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. PETER ASIMAKOPOULOS
 Full Name (Last, First, Middle Initial)
 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 OF SMALL BUSINESS BANKING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000010L11A1
 Amount of Each Receipt this Period 18.00
 Memo Item
 PAYROLL DEDUCTION

B. VINCE CALABRESE
 Full Name (Last, First, Middle Initial)
 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 General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt 08 / 15 / 2016
Transaction ID : B000243S000068L11A1
 Amount of Each Receipt this Period 23.00
 Memo Item
 PAYROLL DEDUCTION

C. VINCE CALABRESE
 Full Name (Last, First, Middle Initial)
 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 General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000068L11A1
 Amount of Each Receipt this Period 23.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	64.00
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 22
	<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. KIM CRAIG
Full Name (Last, First, Middle Initial)

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 F.N.B. CORPORATION Occupation PRES & CEO WEALTH MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 08 / 15 / 2016
Transaction ID : B000243S000103L11A1

Amount of Each Receipt this Period 17.00

Memo Item
PAYROLL DEDUCTION

B. KIM CRAIG
Full Name (Last, First, Middle Initial)

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 F.N.B. CORPORATION Occupation PRES & CEO WEALTH MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000103L11A1

Amount of Each Receipt this Period 17.00

Memo Item
PAYROLL DEDUCTION

C. CHRISTIAN DEAN
Full Name (Last, First, Middle Initial)

Mailing Address 4020 DEEPWOOD ROAD

City BALTIMORE State MD Zip Code 21218

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

Name of Employer F.N.B. CORPORATION Occupation SLS MGR SMALL BUS BNKG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt 08 / 15 / 2016
Transaction ID : B000243S000119L11A1

Amount of Each Receipt this Period 24.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<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. CHRISTIAN DEAN
Full Name (Last, First, Middle Initial)
Mailing Address 4020 DEEPWOOD ROAD

City BALTIMORE	State MD	Zip Code 21218
-------------------	-------------	-------------------

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

Name of Employer F.N.B. CORPORATION	Occupation SLS MGR SMALL BUS BNKG
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.00

Date of Receipt
08 / 31 / 2016
Transaction ID : B000242S000119L11A1

Amount of Each Receipt this Period
24.00

Memo Item
PAYROLL DEDUCTION

B. VINCENT DELIE
Full Name (Last, First, Middle Initial)
Mailing Address 606 EAST DRIVE

City SEWICKLEY	State PA	Zip Code 15143
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FEC ID number of contributing federal political committee. **C**

Name of Employer F.N.B. CORPORATION	Occupation PRES & CEO FNB CORP & FNBPA
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.00

Date of Receipt
08 / 15 / 2016
Transaction ID : B000243S000122L11A1

Amount of Each Receipt this Period
24.00

Memo Item
PAYROLL DEDUCTION

C. VINCENT DELIE
Full Name (Last, First, Middle Initial)
Mailing Address 606 EAST DRIVE

City SEWICKLEY	State PA	Zip Code 15143
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FEC ID number of contributing federal political committee. **C**

Name of Employer F.N.B. CORPORATION	Occupation PRES & CEO FNB CORP & FNBPA
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
384.00

Date of Receipt
08 / 31 / 2016
Transaction ID : B000242S000122L11A1

Amount of Each Receipt this Period
24.00

Memo Item
PAYROLL DEDUCTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<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. STEPHEN ENGLISH
Full Name (Last, First, Middle Initial)

Mailing Address 110 TIMBER RIDGE DRIVE

City HARMONY	State PA	Zip Code 16037
-----------------	-------------	-------------------

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

Name of Employer F.N.B. CORPORATION	Occupation MGN DIR TRUST & INVST ADV SLS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
08 / 15 / 2016
Transaction ID : **B000243S000146L11A1**

Amount of Each Receipt this Period
13.00

Memo Item
PAYROLL DEDUCTION

B. STEPHEN ENGLISH
Full Name (Last, First, Middle Initial)

Mailing Address 110 TIMBER RIDGE DRIVE

City HARMONY	State PA	Zip Code 16037
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FEC ID number of contributing federal political committee. **C**

Name of Employer F.N.B. CORPORATION	Occupation MGN DIR TRUST & INVST ADV SLS
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
08 / 31 / 2016
Transaction ID : **B000242S000146L11A1**

Amount of Each Receipt this Period
13.00

Memo Item
PAYROLL DEDUCTION

C. DAVID GREEN
Full Name (Last, First, Middle Initial)

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 F.N.B. CORPORATION	Occupation DIRECTOR OF MORTGAGE SERVICES
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 15 / 2016
Transaction ID : **B000243S000202L11A1**

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	41.00
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 22
	<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. DAVID GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 514 DAY STAR COURT

City CRANBERRY TOWNSHIP State PA Zip Code 16066

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

Name of Employer F.N.B. CORPORATION Occupation DIRECTOR OF MORTGAGE SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000202L11A1

Amount of Each Receipt this Period 15.00

Memo Item
PAYROLL DEDUCTION

B. GARY GUERRIERI
Full Name (Last, First, Middle Initial)

Mailing Address 163 DODD DRIVE

City WASHINGTON State PA Zip Code 15301

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

Name of Employer F.N.B. CORPORATION Occupation CH CRD OFF & LND SUPP & SPEC LND

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 08 / 15 / 2016
Transaction ID : B000243S000211L11A1

Amount of Each Receipt this Period 24.00

Memo Item
PAYROLL DEDUCTION

C. GARY GUERRIERI
Full Name (Last, First, Middle Initial)

Mailing Address 163 DODD DRIVE

City WASHINGTON State PA Zip Code 15301

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

Name of Employer F.N.B. CORPORATION Occupation CH CRD OFF & LND SUPP & SPEC LND

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000211L11A1

Amount of Each Receipt this Period 24.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.00

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 22
	<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. SAMUEL KIRSCH
Full Name (Last, First, Middle Initial)

Mailing Address 1708 LA COSTA COURT

City State Zip Code
PITTSBURGH PA 15237

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

Name of Employer Occupation
F.N.B. CORPORATION DIR DIGITAL CHANNELS & PAYMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 15 / 2016
Transaction ID : **B000243S000275L11A1**

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

B. SAMUEL KIRSCH
Full Name (Last, First, Middle Initial)

Mailing Address 1708 LA COSTA COURT

City State Zip Code
PITTSBURGH PA 15237

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

Name of Employer Occupation
F.N.B. CORPORATION DIR DIGITAL CHANNELS & PAYMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : **B000242S000275L11A1**

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

C. FRANK KRIEDER
Full Name (Last, First, Middle Initial)

Mailing Address 1576 WAKEFIELD DRIVE

City State Zip Code
HERMITAGE PA 16148

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

Name of Employer Occupation
F.N.B. CORPORATION EVP CMTY CML BNKG & PRES NW REG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.00

Date of Receipt
08 / 15 / 2016
Transaction ID : **B000243S000289L11A1**

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
	<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. FRANK KRIEDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1576 WAKEFIELD DRIVE
 City HERMITAGE State PA Zip Code 16148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F.N.B. CORPORATION Occupation EVP CMTY CML BNKG & PRES NW REG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000289L11A1
 Amount of Each Receipt this Period 20.00
 Memo Item
 PAYROLL DEDUCTION

B. MARK LOZZI
 Full Name (Last, First, Middle Initial)
 Mailing Address 684 MELWOOD N.E.
 City WARREN State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F.N.B. CORPORATION Occupation CFO - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 08 / 15 / 2016
Transaction ID : B000243S000326L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

C. MARK LOZZI
 Full Name (Last, First, Middle Initial)
 Mailing Address 684 MELWOOD N.E.
 City WARREN State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F.N.B. CORPORATION Occupation CFO - REGENCY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 08 / 31 / 2016
Transaction ID : B000242S000326L11A1
 Amount of Each Receipt this Period 12.00
 Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	44.00
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 14 OF 22
	(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. JOSEPH MANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 363 LAUREL LANE

City WADSWORTH State OH Zip Code 44281

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

Name of Employer F.N.B. CORPORATION Occupation SENIOR CREDIT OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : B000243S000340L11A1

Amount of Each Receipt this Period
 15.00

Memo Item
 PAYROLL DEDUCTION

B. JOSEPH MANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 363 LAUREL LANE

City WADSWORTH State OH Zip Code 44281

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

Name of Employer F.N.B. CORPORATION Occupation SENIOR CREDIT OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : B000242S000340L11A1

Amount of Each Receipt this Period
 15.00

Memo Item
 PAYROLL DEDUCTION

C. ROBERT MOOREHEAD
Full Name (Last, First, Middle Initial)

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 CHIEF WHOLESALE BANKING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt
 08 / 15 / 2016
Transaction ID : B000243S000383L11A1

Amount of Each Receipt this Period
 24.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 54.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 22
<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. ROBERT MOOREHEAD
Full Name (Last, First, Middle Initial)
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 CHIEF WHOLESALE BANKING OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000383L11A1

Amount of Each Receipt this Period

24.00

 Memo Item
PAYROLL DEDUCTION

B. BARRY ROBINSON
Full Name (Last, First, Middle Initial)
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 CHIEF CONSUMER BANKING OFFICER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000458L11A1

Amount of Each Receipt this Period

25.00

 Memo Item
PAYROLL DEDUCTION

C. BARRY ROBINSON
Full Name (Last, First, Middle Initial)
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 CHIEF CONSUMER BANKING OFFICER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000458L11A1

Amount of Each Receipt this Period

25.00

 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	74.00
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 16 OF 22
	(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

Full Name (Last, First, Middle Initial)
A. MARK SHOZDA

Mailing Address 225 VENANGO TRAIL

City	State	Zip Code
MARS	PA	16046

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

Name of Employer	Occupation
F.N.B. CORPORATION	CHIEF TECHNOLOGY OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000489L11A1

Amount of Each Receipt this Period
25.00

Memo Item
PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. MARK SHOZDA

Mailing Address 225 VENANGO TRAIL

City	State	Zip Code
MARS	PA	16046

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

Name of Employer	Occupation
F.N.B. CORPORATION	CHIEF TECHNOLOGY OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000489L11A1

Amount of Each Receipt this Period
25.00

Memo Item
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	Occupation
F.N.B. CORPORATION	CHIEF MARKETING OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000515L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 22
<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. RICHARD STEINER
Full Name (Last, First, Middle Initial)

Mailing Address 453 CARNEGIE DRIVE

City PITTSBURGH	State PA	Zip Code 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

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000515L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

B. MARK SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 10320 GRUBBS ROAD

City WEXFORD	State PA	Zip Code 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

M M	/	D D	/	Y Y Y Y
08	/	15	/	2016

Transaction ID : B000243S000527L11A1

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

C. MARK SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 10320 GRUBBS ROAD

City WEXFORD	State PA	Zip Code 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

M M	/	D D	/	Y Y Y Y
08	/	31	/	2016

Transaction ID : B000242S000527L11A1

Amount of Each Receipt this Period
20.00

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	55.00
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 22
	<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. JAMES TISDALE
Full Name (Last, First, Middle Initial)

Mailing Address 6301 MOSSWAY

City BALTIMORE State MD Zip Code 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 ▼ 288.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016
Transaction ID : B000243S000542L11A1

Amount of Each Receipt this Period
 18.00

Memo Item
 PAYROLL DEDUCTION

B. JAMES TISDALE
Full Name (Last, First, Middle Initial)

Mailing Address 6301 MOSSWAY

City BALTIMORE State MD Zip Code 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 ▼ 288.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : B000242S000542L11A1

Amount of Each Receipt this Period
 18.00

Memo Item
 PAYROLL DEDUCTION

C. DAVID YATES
Full Name (Last, First, Middle Initial)

Mailing Address 715 BRISTLECONE 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 GROUP MANAGER OF PRIVATE BANKING

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
 08 / 15 / 2016
Transaction ID : B000243S000582L11A1

Amount of Each Receipt this Period
 15.00

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 22
(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

A. Full Name (Last, First, Middle Initial)
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 Occupation
F.N.B. CORPORATION GROUP MANAGER OF PRIVATE BANKING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
08 / 31 / 2016

Transaction ID : B000242S000582L11A1

Amount of Each Receipt this Period
15.00

Memo Item
PAYROLL DEDUCTION

B. Full Name (Last, First, Middle Initial)

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	754.00

**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 checked="" 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. FRIENDS OF GLENN THOMPSON

Mailing Address 133 WATER TOWER LANE

City SPRING MILLS State PA Zip Code 16875

Purpose of Disbursement
DINNER

011

Category/
Type

Candidate Name

GLENN THOMPSON

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : B000236S000001L23

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

500.00

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"/> 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 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 RE-ELECT BRYAN BARBIN

Mailing Address 206 MAIN STREET

City JOHNSTOWN State PA Zip Code 15901

Purpose of Disbursement
FUNDRAISER

011

Category/
Type

Candidate Name

BRYAN BARBIN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 71

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : **B000240S000001L29**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOAGLAND FOR OHIO

Mailing Address 797 COOL SPRINGS ROAD

City MINGO JUNCTION State OH Zip Code 43938

Purpose of Disbursement
FUNDRAISER

011

Category/
Type

Candidate Name

FRANK HOAGLAND

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 30

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : **B000239S000001L29**

Amount of Each Disbursement this Period

1000.00

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

TED KOPAS

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : **B000237S000001L29**

Amount of Each Disbursement this Period

900.00

Memo Item

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

2400.00

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"/> 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 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. FRIENDS OF DOUG WEIMER

Mailing Address 22 DUNHAM DRIVE

City GREENSBURG State PA Zip Code 15601

Purpose of Disbursement
RECEPTION

011

Category/
Type

Candidate Name

R DOUGLAS WEIMER

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : B000241S000001L29

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

300.00

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

2700.00