

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

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

FOR LINE NUMBER: PAGE 77 OF 398

(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. Dever, Jacqueline, , ,

Mailing Address 525 Vine Street

City
Cincinnati

State
OH

Zip Code
45202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National Bank

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : 5CDE29E8B9014B0E9D15

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Deyarman, Steven, , ,

Mailing Address 519 Madison Avenue

City
Toledo

State
OH

Zip Code
43604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National Bank

Occupation (for Individual)
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 06 / 2019

Transaction ID : 8998B789E4B54ACBBB93

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Deyarman, Steven, , ,

Mailing Address 519 Madison Avenue

City
Toledo

State
OH

Zip Code
43604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Huntington National Bank

Occupation (for Individual)
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : CF637F5E47CD4CE1B59E

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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