## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL
OMB Number:	3235-0287
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nours per response	e 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * BIGGS RAYMOND J				HU	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director Officer (give title below)  Other (specify below)					
P.O. BO		(First)	(	(Middle)		3. Date of Earliest Transaction (Month/Day/\) 10/28/2003					ear)						
(Street) MT. CLEMENS 48046				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				Line)	
(City	<i>i</i> )	(State)	(Zip) Table I - Non-Derivative Securities Acquire					ired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Exc		Execution any	A. Deemed xecution Date, if ny Month/Day/Year)		Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (	hip Indirect Benefici	Beneficial Ownership	
							Code	V	Amount	(A) or (D)	Price		(msu. 3 and 4)		(I)	` '	
Commor	ı Stock		10/28/2	0003			A		443	A	\$ 21.40	2.782		Deferre Compe Plan fo Huntin Bancsh Incorpo	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors		
Commor	ommon Stock									5,2	77		I By W		fe		
Commor	n Stock											1,7:	1,753,838		I	By MS Family Partner	Ltd
Reminder:	Report on a s	separate lii	ne for each		I - Deriv	ative Secu	urities A	cquire	Persons v	who r I in th displa	nis forn ays a co or Benef	n are urren ficiall	not requ tly valid	OMB cont	ormation spond unles rol number.	s	74 (9-02)
Security	2. Conversion Or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  3. Transaction Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Instr. 8)  Derivative Acquire (A) or Dispose of (D) (Instr. 3, 4, and 5)		vative rities ired or osed b) : 3, d 5)	and Expiration Date (Month/Day/Year)			Amor Unde Secur (Instr 4)	Amount or Number of Shares	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirec Beneficia Ownershi (Instr. 4)					

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Audress						

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#### **Signatures**

Elizabeth B. Moore, Power of Attorney	10/29/2003		
**Signature of Reporting Person	Date		

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.