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

(Print or Type Responses)

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

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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 Type Responses) 1. Name and Address of Reporti HOAGLIN THOMAS E	2. Issuer Na HUNTING [HBAN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner X_ Officer (give title below)Other (specify below) Chairman & CEO			
(Last) (First) HUNTINGTON CENTER STREET	3. Date of Ea 08/01/2007		sactio	on (Month	/Day/Y	Year)	Chain			
(Street) COLUMBUS, OH 43287	4. If Amendn	nent, Date	Origi	nal Filed(Month/E	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			
(City) (State)	(Zip)		Table I	- No	n-Derivat	ive Se	curities Ac	quired, Disposed of, or Bene	ficially Own	ed
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code		(Instr. 3, 4 and 5) F			Beneficially Owned Following Reported Transaction(s)		Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	08/01/2007		Ι		30,000	A	\$ 19.1235	63,668 (1)	Ι	By Executive Deferred Compensatior Plan
Common Stock								194,982	D	
Common Stock								8,825	Ι	By Issuer's Investment and Tax Savings Plan (401(k) Plan)
Common Stock								15,590	Ι	By Issuer's Supplemental Stock Purchase and Tax Savings Plan

 Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.
 Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.
 SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (a.g., puts calls warrants ontions convertible securities)

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n Nu	mber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	rivative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	urities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Ac	quired			4)			Following	Direct (D)	
					(A)	or						Reported	or Indirect	
					Dis	posed						Transaction(s)	(I)	
					of (D)						(Instr. 4)	(Instr. 4)	
					(Ins	str. 3,								
					4, a	nd 5)								
										Amount				
							D.	.		or				
								Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	(A) (D)				Shares				

Reporting Owners

Ī		Relationships						
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
	HOAGLIN THOMAS E HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	Х		Chairman & CEO				

Signatures

Elizabeth B. Moore	08/01/2007
**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).
- (1) Balance also includes exempt acquisitions of shares through dividend reinvestment as of June 30, 2007.

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.