FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 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* HILLIKER D JAMES				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director Officer (give title below) Other (specify below)							
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 07/28/2008														
(Street)				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							
COLUMBUS, OH 43287 (City) (State) (Zip)			Table I V Date of Control							uired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction 2A. Date Exe (Month/Day/Year) any		Deemed ecution Date, if onth/Day/Year)	3. Transaction Code			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. A Ber Fol Tra	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Senen	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
					Co		ode	V	Amount (A) or (D) Price		(In	(Instr. 3 and 4)		(I) (Instr. 4)	(Instr. 4)	(Instr. 4)		
Common	Stock		07/28/2008			A	A		2,356	A	\$ 6.551:	5 4,8	831			I	By Issu Deferre Comper Plan for Hunting Bancsh Incorpo Directo	d nsation gton ares rated
Common	Stock											13	0,347			D		
Common	Stock											7,6	640			I	By Sky Qualifie Retirem Plan	ed
Common	Stock											7,7	783			I	By Wif	e
Reminder:	Report on a	separate li	ne for each class	ble II - 1	rities beneficial Derivative Sec (e.g., puts, call	uritie	es Acq	uire	Persons containe the form d, Dispos	who d in t displ	his forn lays a c or Bene	n are urren ficial	not requ	ction of info ired to res OMB cont	pon	d unless	SEC 147	74 (9-02)
Security	Conversion		Day/Year) Exect	Deemed ution Da	4.	55 N O I I S A (() I I O () () 4	5.	er tive cies sed ed ed 3,	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Ar Ut Se (Ir 4)		7. Ti Amo Undo Secu (Inst 4)	Amount or Number of Shares	(Instr. 5)	Deriv Secu Bene Own Follo Repo	vative rities eficially ed owing orted saction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)	

Reporting Owners

	Relationships
Reporting Owner Name /	

Address	Director	10% Owner	Officer	Other
HILLIKER D JAMES HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	X			

Signatures

Elizabeth B. Moore	07/29/2008
***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.