REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
CONSOL INC. COAL GROUP P.A.C.

ADDRESS (number and street) ☐ Check if different than previously reported
1800 WASHINGTON ROAD

CITY, STATE and ZIP CODE
PITTSBURGH, PA. 15241

2. FEC IDENTIFICATION NUMBER
C00279331

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1/1/94 through 3/31/94		
6. (a) Cash on Hand January 1, 19 94		$ 5,895.50
(b) Cash on Hand at Beginning of Reporting Period	$ 5,895.50	
(c) Total Receipts (from Line 19)	$ 1,360.50	$ 1,360.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 7,256.00	$ 7,256.00
7. Total Disbursements (from Line 30)	$ 1,812.00	$ 1,812.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 5,444.00	$ 5,444.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
EUGENE H. DIOGUARDI

Signature of Treasurer
Eugene H. Dioguardi

Date
APR. 28, 1994

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)
FE4AN101

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: CONSOL INC. COAL GROUP P.A.C.

REPORT COVERING PERIOD FROM JAN. 1, 1994 TO: MARCH 31, 1994

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	$ 1,558.50	$ 1,558.50	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) ➤	1,558.50	1,558.50	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	1,558.50	1,558.50	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	1,558.50	1,558.50	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	1,558.50	1,558.50	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures (BANK SERVICE CHARGE - CHECKING)	12.00	12.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	12.00	12.00	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,800.00	1,800.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To: (PAYROLL DEDUCTION CORRECTIONS)			
a. Individuals/Persons Other Than Political Committees	198.00	198.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤	198.00	198.00	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	2,010.00	2,010.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	2,010.00	2,010.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1,558.50	1,558.50	32
33. Total Contribution Refunds (from line 28d)	198.00	198.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1,360.50	1,360.50	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	12.00	12.00	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	12.00	12.00	37

FE4ANI01

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 4

FOR LINE NUMBER

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)
CONSOL INC. COAL GROUP P.A.C.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. DARRELL D. AUCA 487 REBECCA STREET MORGANTOWN, WV 26505 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. SENIOR VP-OPERATIONS Aggregate Year-to-Date $ 100.00	PAYROLL DEDUCTION	$100.00
B. FRANK J. UCCIARDI GATEWAY TOWERS APT 4L 320 FT. DUQ. BLVD. PITTSBURGH, PA 18222 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. MGR. ENGINEERING SERVICES Aggregate Year-to-Date $ 150.00	1/4/94	$150.00
C. RICHARD R. RIEGER 658 TANAGER DR. BLUEFIELD, WV 24605 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. VP-OPERATIONS Aggregate Year-to-Date $ 67.50	PAYROLL DEDUCTION	$67.50
D. PERRY E. BISELL 466 AUSTIN AVE. PITTSBURGH, PA 15243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. Occupation Aggregate Year-to-Date $ 30.00	PAYROLL DEDUCTION	$10.00
E. ROBERT BISTOK 4815 BARONE DR. PITTSBURGH, PA 15227 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. MANAGER-ACCOUNTING Aggregate Year-to-Date $ 30.00	PAYROLL DEDUCTION	$10.00
F. GARY L. DADISMAN 3217 COMMANCHE RD. PITTSBURGH, PA Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. DIRECTOR-PROCESS & CONSTRUCTION Aggregate Year-to-Date $ 45.00	PAYROLL DEDUCTION	$15.00
G. WALTER S. DURYEA 2578 CORTLAND DRIVE PITTSBURGH, PA 15241 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. GENERAL SALES MANAGER Aggregate Year-to-Date $ 30.00		$10.00

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full): CONSOL INC. COAL GROUP P.A.C.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. DAVID D. EYER, RD #4, LIGONIER, PA 15858	CONSOL INC. / VP - ENGINEERING	PAYROLL DEDUCTION	$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 50.00		
B. THOMAS F. HOFFMAN, 1906 HIGHGATE ROAD, PITTSBURGH, PA 15241	CONSOL INC. / VP - PUBLIC RELATIONS	PAYROLL DEDUCTION	$ 50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 150.00		
C. MARSHALL W. HUNT, 336 McGREGOR DRIVE, CANONSBURG, PA 15317	CONSOL INC. / VP - EXPLORATION	PAYROLL DEDUCTION	$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 25.00		
D. JAMES D. KINGSLEY, 101 CAMINO CT., CLARITON, PA 15025	CONSOL INC. / DIRECTOR - PURCHASING	PAYROLL DEDUCTION	$15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 45.00		
E. THOMAS J. NEILSON, 451 CLAIR DRIVE, PITTSBURGH, PA 15241	CONSOL INC. / MEDICAL DIRECTOR	PAYROLL DEDUCTION	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 30.00		
F. DAVID J. PODOBINSKI, 22 GINA DRIVE, WASHINGTON, PA 15301	CONSOL INC. / GENERAL MGR. - MAINTENANCE ENGINEERING	PAYROLL DEDUCTION	$15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 45.00		
G. WILLIAM G. RIELAND, 540 MILL VALLEY ROAD, PALATINE, IL 60087	CONSOL INC. / GENERAL SALES MANAGER	PAYROLL DEDUCTION	$10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 30.00		

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full): CONSOL INC. COAL GROUP P.A.C.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. JOHN A. SHOTTON, JR., 500 WHITE OAK LN., PINCKNEYVILLE, IL. 82274	CONSOL INC. / VP OPERATIONS	PAYROLL DEDUCTION	$100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 100.00		
B. GARY E. SLAGEL, 2542 COUNTRY SIDE LANE, WEXFORD, PA. 15090	CONSOL INC. / DIRECTOR-REGIONAL AFFAIRS	PAYROLL DEDUCTION	$12.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 36.00		
C. EARL D. SMITH, 150 WINDING RIDGE ROAD, PROSPERITY, PA 15229	CONSOL INC. / DIRECTOR-ENVIRONMENTAL COMPLIANCE ACTIVITIES	PAYROLL DEDUCTION	$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 50.00		
D. RONOLD L. WOOTEN, 214 HEMLOCK DRIVE, McMURRAY, PA 15317	CONSOL INC. / VP-SAFETY	PAYROLL DEDUCTION	$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 150.00		
E. JOHN M. YONOSKO, 108 LITTLE JOHN DRIVE, McMURRAY, PA 15317	CONSOL INC. / ASSISTANT CONTROLLER	PAYROLL DEDUCTION	$15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 45.00		
F. E. R. FRIDE II, RT 3 BOX 176, PETERS RUN ROAD, WHEELING, WV 26003	CONSOL INC. / GENERAL SUPERINTENDENT	PAYROLL DEDUCTION CORRECTION	$(20.00)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ (20.00)		
G. T. J. BIEGA, 2915 ALVERIA, CARBONDALE, IL. 62901	CONSOL INC. / SAFETY INSPECTOR	PAYROLL DEDUCTION CORRECTION	$(100.00)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ (100.00)		

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

CONSOL INC. COAL GROUP P.A.C.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. T.L. SUDER RT. 4 BOX 375-D MORGANTOWN, WVA Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. SUPERINTENDENT-ARKWRIGHT #1 Aggregate Year-to-Date $ (30.00)	PAYROLL DEDUCTION CORRECTION	$ (30.00)
B. J.J. TOTH RD 3, BOX 133 WHEELING, WV 26003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. ASSISTANT SUPERINTENDENT - FOREMAN MINE Aggregate Year-to-Date $ (30.00)	PAYROLL DEDUCTION CORRECTION	$ (30.00)
C. G.E. FRANCIS 3909 DANWOOD AVENUE MOUNDSVILLE, WV 26041 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. MASTER MECHANIC Aggregate Year-to-Date $ (18.00)	PAYROLL DEDUCTION CORRECTION	$ (18.00)
D. JOHN E. ROARK 2348 CRAMDEN DRIVE PITTSBURGH, PA. 15241 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. GEN. MANAGER-LAND Aggregate Year-to-Date $ 100.00	PAYROLL DEDUCTION	$ 100.00
E. KEITH P. SPINA 1170 BOWERHILL RD, APT. 505 PITTSBURGH, PA. 15243 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CONSOL INC. VP PURCHASING Aggregate Year-to-Date $ 250.00	PAYROLL DEDUCTION	$ 250.00
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only) 1,360.50

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

CONSOL INC. COAL GROUP P.A.C.

A. Full Name, Mailing Address and ZIP Code PENNSYLVANIANS FOR RALPH KAISER 3848 EDGE ROAD PITTSBURGH, PA 15227	Purpose of Disbursement RALPH KAISER PA STATE REP. 41ST DIST. Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 1/21/94	Amount of Each Disbursement This Period $100.00
B. Full Name, Mailing Address and ZIP Code MUSTO SENATE COMMITTEE 262 MARKET STREET PITTSTON, PA 18640	Purpose of Disbursement RAY MUSTO PA STATE SENATOR, 14 DIST. Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 1/21/94	Amount of Each Disbursement This Period $250.00
C. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT ANTHONY L. COLAIZZO LEGISLATOR 1 WEST PIKE STREET P.O. BOX 357 MARTINS FERRY, OHIO 43935	Purpose of Disbursement TONY COLAIZZO PA STATE REP. 48TH DIST. Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 1/21/94	Amount of Each Disbursement This Period $200.00
D. Full Name, Mailing Address and ZIP Code MASCARA FOR CONGRESS P.O. BOX 1109 WASHINGTON, PA 15301	Purpose of Disbursement FRANK R. MASCARA U.S. REP. 20TH DIST. Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 3/21/94	Amount of Each Disbursement This Period $500.00
E. Full Name, Mailing Address and ZIP Code PA CHAMBER PAC ONE COMMERCE SQUARE 417 WALNUT STREET HARRISBURG, PA 17101	Purpose of Disbursement FUND RAISING EVENT Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 3/25/94	Amount of Each Disbursement This Period $250.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$1,300.00
TOTAL This Period (last page this line number only)	$1,800.00

9 4 0 3 8 9 7 2 5 4 3

FE4AN101

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

CONSOL INC, COAL GROUP P.A.C.

A. Full Name, Mailing Address and ZIP Code FRIENDS OF JIM HART COMMITTEE P.O. BOX 357 MARTINS FERRY, OHIO 43935	Purpose of Disbursement JIM HART U.S. REP. OHIO 18TH Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 3/21/94	Amount of Each Disbursement This Period $ 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$ 500.00
TOTAL This Period (last page this line number only)	$ 1,800.00

FE4AN10

24J38977344

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER ____
(Use separate schedules for each numbered line)

Name of Committee (in Full)
CONSOL INC. COAL GROUP P.A.C.

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: $		

SUBTOTALS This Period This Page (optional) .....

TOTALS This Period (last page in this line only) ..... NONE

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

24038972645

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER _____
(Use separate schedules for each numbered line)

Name of Committee (In Full) CONSOL INC. COAL GROUP P.A.C.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				NONE

9 4 0 3 8 9 7 2 3 4 6

SCHEDULE B

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full)

CONSOL INC, COAL GROUP P.A.C.

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ _____

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ _____

(c) TOTAL Independent Expenditures ..... $ NONE

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19 _____

My Commission expires:

_____ _____

NOTARY PUBLIC

_____ _____

Signature Date

9 4 0 3 8 9 7 2 5 4 7

FE4AN101

SCHEDULE F

ITEMIZED COORDINATED EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE (2 U.S.C. §441a(d))

Page 1 of 1 for
LINE NUMBER ____

(To be used only by Political Committees in the General Election)

Name of Political Committee (in Full)
CONSOL INC. COAL GROUP P.A.C.

Has your Committee been designated to make coordinated expenditures by a political party committee? ☐ YES ☒ NO
If YES, name the designating committee:

Full Name, Mailing Address and ZIP Code of Subordinate Committee

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			

SUBTOTAL of Expenditures This Page (optional) .....

TOTAL This Period (last page this line number only) ..... NONE

FE4AN101

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED
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☑	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

MY.
PREPARER

5-2-94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 8 9 7 2 5 4 9