

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Patriot Coal Corporation Political Action Committee

ADDRESS (number and street) 500 Lee Street East

(Check if address is changed)

Charleston CITY ▲ WV STATE ▲ 25301 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

ehartsog@patriotcoal.com

Optional Second E-Mail Address SOjeda@PatriotCoal.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 07 / 11 / 2014

3. FEC IDENTIFICATION NUMBER C C00452524

4. IS THIS STATEMENT  NEW (N) OR  AMENDED (A)

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

Type or Print Name of Treasurer Mr. E. Kent Hartsog

Signature of Treasurer Mr. E. Kent Hartsog [Electronically Filed] Date 07 / 11 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

- (d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
2. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
3. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_
4. \_\_\_\_\_ FEC ID number  C \_\_\_\_\_

Write or Type Committee Name

# Patriot Coal Corporation Political Action Committee

**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Patriot Coal Corporation

Mailing Address 12312 Olive Boulevard  
 Suite 400  
 Saint Louis MO 63141  
 CITY STATE ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Stephanie Ojeda  
 Mailing Address 1510 Barberrry Lane  
 Charleston WV 25314  
 CITY STATE ZIP CODE  
 Title or Position  
 Asst General Counsel Telephone number 304 340 1829

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Mr. E. Kent Hartsog  
 Mailing Address 23 Cedar Drive  
 Hurricane WV 25526  
 CITY STATE ZIP CODE  
 Title or Position  
 Vice President Telephone number 304 340 1829

Full Name of Designated Agent

[Empty form field]

Mailing Address

[Empty form field]

[Empty form field]

[Empty form field]

CITY

STATE

ZIP CODE

Title or Position

[Empty form field]

Telephone number

[Empty form field]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

The Private Bank

[Empty form field]

Mailing Address

1401 South Brentwood Blvd

[Empty form field]

[Empty form field]

St. Louis

[Empty form field]

MO

[Empty form field]

63144

[Empty form field]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

United Bank

[Empty form field]

Mailing Address

500 Virginia Street East

[Empty form field]

[Empty form field]

Charleston

[Empty form field]

WV

[Empty form field]

25322

[Empty form field]

CITY

STATE

ZIP CODE