



Missouri Ethics Commission (MEC)  
 PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

# Statement of Committee Organization

C 201444

Office Use:  
 Missouri Ethics Commission  
 SEP 01 2020

**1. Statement Information**

Date: 08/28/2020  
 Type:  New  Amended (if amending, enter MEC ID \_\_\_\_\_ & section changed \_\_\_\_\_)

**2. Committee Information**

Legal Missouri 2022  
 Name of Committee  
2008 S 8th St., Saint Louis MO 63104 (314) 422-3617  
 Committee Mailing Address, City, State, & Zip Telephone Number  
St. Louis City Board of Elections  
 County Clerk, Board of Election Commissioners, or Federal PAC/Out of State Committee  
 Committee Type:  Campaign  Candidate  Continuing (PAC)  Debt Service  Exploratory  Political Party

**3. Treasurer/Deputy Treasurer Information**

Paul Bocci  
 Treasurer's Name (First & Last)  
PO Box 1600, Lake Ozark MO 65049  
 Treasurer's Mailing Address, City, State, & Zip  
John Payne  
 Deputy Treasurer's Name (if one appointed)  
2008 S 8th St., Saint Louis MO 63104  
 Deputy Treasurer's Mailing Address, City, State, & Zip  
 Treasurer's Email Address (optional)  
(314) 422-3617 (314) 422-3617  
 Treasurer's Home Telephone Number Treasurer's Work Telephone Number  
 Deputy Treasurer's Email Address (optional)  
(573) 718-3073 (573) 718-3073  
 Dep. Treasurer's Home Telephone Number Dep. Treasurer's Work Telephone Number

**4. Additional Committee Information**

Additional Committee Officer's Name & Title (if any) \_\_\_\_\_  
 Additional Committee Officer's Mailing Address, City, State, & Zip \_\_\_\_\_  
 Connected Organization's Name (if any) \_\_\_\_\_  
 Connected Organization's Mailing Address, City, State, & Zip \_\_\_\_\_

CANDIDATES: Do you have more than one candidate committee?  Yes (refer to instructions on back)  No

**5. Official Bank Account Information (required by all committees)**

**6. Candidate Supported or Opposed (candidate committees must include self, if candidate)**

Name & Mailing Address, City, State & Zip of Candidate \_\_\_\_\_  
 Telephone Number (Candidate Committees Only) \_\_\_\_\_  
 Election Date \_\_\_\_\_ Office Sought & Political Subdivision \_\_\_\_\_ Political Party \_\_\_\_\_ Support or Oppose \_\_\_\_\_

**7. Ballot Measure Supported or Opposed (campaign committees must complete this section)**

Adult-Use Marijuana Regulation 11/08/2022, Statewide Support  
 Name of Ballot Measure Election Date & Political Subdivision Support or Oppose

**8. Signature(s) Check certification(s) & sign (required by all committees)**

I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.  
Paul P Bocci  
 Committee Treasurer Candidate (Candidate Committees Only)