



**MISSOURI ETHICS COMMISSION
STATEMENT OF COMMITTEE ORGANIZATION**

MEC ID# C061809

OFFICE USE ONLY
[Handwritten initials]

| | | | | | |
|---|--|---|--|---|--|
| STATEMENT DATE July 7, 2008 | | TYPE OF STATEMENT (CHECK ONE) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDED | | IF AMENDED, LIST ITEMS CHANGED (LINE NUMBERS) 8, 9 & 11 | |
| 3. FULL NAME OF COMMITTEE Missouri Law Enforcement for Good Government (MOLEGG) | | | | | |
| 4. COMMITTEE MAILING ADDRESS ADDRESS: 715 Jefferson Street CITY / STATE / ZIP: Jefferson City, Missouri 65101 | | | | 5. TELEPHONE NUMBER 573 - 632 - 4209 | |
| 6. TREASURER'S NAME Andrew C. Albert, Jr. | | | | | |
| 7. TREASURER'S MAILING ADDRESS ADDRESS: 1122 Dougherty Ferry CITY / STATE / ZIP: Kirkwood, Missouri 63122 | | | | 8. TELEPHONE NUMBER HOME: 314 - 966 - 6104 WORK: 314 - 892 - 1510 | |
| 9. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER Greg Wheelan | | | | | |
| 10. DEPUTY TREASURER'S ADDRESS ADDRESS: 715 Jefferson Street CITY / STATE / ZIP: Jefferson City, MO 65101 | | | | 11. TELEPHONE NUMBER HOME: 417 - 425 - 0801 WORK: 417 - 864 - 1731 | |
| 12. OTHER COMMITTEE OFFICERS (IF ANY) A. NAME B. ADDRESS C. TITLE N/A N/A N/A | | | | 13. IF CANDIDATE HAS OTHER COMMITTEES, IS THIS COMMITTEE DESIGNATED AS THE AGGREGATING COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A | |
| 14. OFFICIAL FUND DEPOSITORY: CHECKING ACCOUNT, POST-THEN-ANY SAVINGS ACCOUNT(S) A. NAME & ADDRESS OF BANK, SAVING & LOAN, OR CREDIT UNION Southwest Bank 101 South Hanley Road Clayton, Missouri 63105 | | | | | |
| | | JUL 6 9 2008 | | B. ACCOUNT NAME Missouri Law Enforcement for Good Government | |
| | | | | C. ACCOUNT NO. | |
| 15. TYPE OF COMMITTEE <input type="checkbox"/> CANDIDATE <input type="checkbox"/> POLITICAL PARTY <input checked="" type="checkbox"/> CONTINUING <input type="checkbox"/> CAMPAIGN <input type="checkbox"/> EXPLORATORY <input type="checkbox"/> DEBT SERVICE | | | | | |
| 16. CANDIDATE SUPPORTED (CANDIDATE COMMITTEES ONLY) A. NAME B. ADDRESS C. TELEPHONE NO. D. POLITICAL PARTY N/A N/A N/A N/A | | | | | |
| 17. CONNECTED ORGANIZATION (IF ANY) (CONTINUING COMMITTEES ONLY) A. NAME B. ADDRESS Missouri Fraternal Order of Police 715 Jefferson Street Jefferson City, MO 65101 | | | | | |
| 18. CANDIDATES SUPPORTED OR OPPOSED A. NAME(S) OF CANDIDATE(S) B. ELECTION DATE C. OFFICE SOUGHT D. POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE N/A N/A N/A N/A <input type="checkbox"/> <input type="checkbox"/> | | | | | |
| 19. BALLOT MEASURE(S) SUPPORTED OR OPPOSED A. NAME(S) OF MEASURE(S) B. ELECTION DATE C. SUBJECT AND POLITICAL SUBDIVISION E. SUPPORT F. OPPOSE N/A N/A N/A <input type="checkbox"/> <input type="checkbox"/> | | | | | |
| 20. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. <i>[Signature]</i> TREASURER'S SIGNATURE | | | | 21. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS STATEMENT IS COMPLETE, TRUE AND ACCURATE. N/A CANDIDATE'S SIGNATURE | |

AMENDMENT