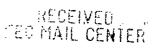
FEC FORM 2 STATEMENT OF CANDIDACY



1. (a) Name of Candidate (in full) John Eduzard "Kingto	amer D'Aura
(b) Address (number and street) PCheck if address changes	2. FEC Candidate Identification Number
(c) City, State, and ZIP Code Las Vegas NV 8910	3. Is This New Statement (N) OR (A)
4. Party Affiliation 5. Office Sought 6.	State & District of Candidate
ing America Even Greater U.S. President	e. e.d
DESIGNATION OF PRINCIPAL CA	AMPAIGN COMMITTEE
7. I hereby designate the following named political committee as my Principal Can	
NOTE: This designation should be filed with the appropriate office listed in the in	(year of election) instructions.
(a) Name of Committee (in full)	
Committee for Saner Government with (b) Address (number and street) 1027 Laure Ave. (Las Vegas, NV B) (c) City, State, and ZIP Code	h John "Kingtamer"
1027 Laurel Ave. (Las Vegas, NV &	39104)
Les Vegas, NV 89104	
DESIGNATION OF OTHER AUTH	
(Including Joint Fundraising R	nepresentatives)
8. I hereby authorize the following named committee, which is NOT my principal c	campaign committee, to receive and expend funds on behalf of r
candidacy.	
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
NONE	t de la companya del companya de la companya del companya de la co
(b) Address (number and street)	The second secon
in the constraint with the constraint of the con	
(c) City, State, and ZIP Code	
	-
I certify that I have examined this Statement and to the best of my	knowledge and belief it is true, correct and complete.
Signature of Candidate	Date Date
John E. M. D'Ama	10 fet 2019
//	1.0000
NOTE: Submission of false, erroneous, or incomplete information may subject the	person signing this Statement to penalties of 52 U.S.C. §30109
	. -
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FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

/ (Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.					
(a) Name of Committee (in full)						
	NONE					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
8.	3. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)					
	,					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my					
	candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					

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Washington, O.C. 20463 F.E.C. 1050 First Street, NE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
Hand Delivered		Date of Receipt		
	Postmarked	Date of Receipt		
USPS First Class Mail	3-11-19	3-18-19		
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USPS Priority Mail Express	S	Postmarked		
Postmark Illegible		·		
No Postmark				
Overnight Delivery Service	(Specify):	Shipping Date		
	Next	Business Day Delivery		
Date of Receipt Received from House Records & Registration Office				
Date of Receipt Received from Senate Public Records Office				
Received from Electronic F	Filing Office	Date of Receipt		
Other (Specify):	[Date of Receipt or Postmarked		
n.t.		3-18-19		
PREPARER		DATE PREPARED		
(3/2015)	-			