Image# 201512119004175182 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Angelo Thomas DeMarco	Charlett addr.							
	(b) Address (number and street) 651 Clarkway Drive	☐ Check if address changed			Candidate's FEC Identification Number P60018462				
	(c) City, State, and ZIP Code						ew	Amended	
	Las Vegas		NV	89106		Statement X (1	N) OR	(A)	
4.	Party Affiliation	5. Office Sought			6. State & Distr	rict of Candidate			
	REPUBLICAN PARTY	Presidential							
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Friends of Tom Del	Marco							
	(b) Address (number and street) 651 Clarkway Drive								
	(c) City, State, and ZIP Code								
	Las Vegas				NV	89106			
(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)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								
	I certify that I have exa	mined this Statemer	nt and to the	e best of i	my knowledge a	nd belief it is true, correc	t and complete.		
Si	gnature of Candidate					Date			
Ai	ngelo Thomas DeMarco			[Elect	ronically Filed]	12/11/2015			
NC	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
							_		

FEC FORM 2 (REV. 02/2009)