Image# 202103059440197025		PAGE 1 / 5 -												
FEC FORM 1	STATEMEI ORGANIZ		0#10											
1. NAME OF	(Check if name	Example:If typing, type		e Use Only										
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5											
Deliver. Excel. B	elieve. PAC													
ADDRESS (number and street)	2211 East Highland													
(Check if address is changed)	#210													
	Phoenix │		AZ 85016											
COMMITTEE'S E-MAIL ADDR	ESS													
(Check if address is changed)	ashleymragan@cox.ne	et												
	Optional Second E-Mail Ad	dress												
☐ ◀ (Check if address is changed)														
	D5 / Y Y Y Y 2021													
3. FEC IDENTIFICATION N	NUMBER ► C C	00681643												
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)												
certify that I have examined	this Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.										
-														
Type or Print Name of Treasur	er Ragan, Ashley, , ,													
Signature of Treasurer	an, Ashley, , ,	[Electronically Filed]	Date 03	05 / Y Y Y Y 2021										
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing to N SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.										
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ion <b>F</b>	EC FORM 1 Revised 06/2012)										

03/05/2021 13 : 30

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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 information below.)	candidate
Name of Candidate	
Candidate Office Sought: House Senate President Distribution	_
(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 Republica	atic, an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	rganization is a
Corporation Corporation w/o Capital Stock	Organization
Membership Organization Trade Association Cooper	rative
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 committee. (i.e., nonconnected committee)	fund or party
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 mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	e political
Committees Participating in Joint Fundraiser	
1 FEC ID number C	
2. FEC ID number	
3 FEC ID number C	
4 FEC ID number C	

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FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## Deliver. Excel. Believe. PAC

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

LESKO, DEBBIE, , ,			
Mailing Address	PO BOX 45388		
		AZ	85064
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fund	draising Representat	ive 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.

Ragan, As	hley, , ,
Full Name	
Mailing Address	2211 E. Highland #210
	Phoenix         AZ         85016           -         -         -         -
Title or Position	CITY STATE ZIP CODE
	Telephone number     602     451     4292

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	Ragan, Ashley, , ,
Mailing Address	2211 E. Highland #210
	Phoenix
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     602     451     4292

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														1									1			
Mailing Address																										
																			L				_			
						C	:IT)	(								STA	ΤE				ZII	ΡC	OD	ιE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

Banl	k of America													
Mailing Address	4401 East Camelback													
	Phoenix	AZ 85	018											
	CITY	STATE	ZIP CODE											
Name of Bank, Depository, etc.														
Truis	300 South Washington Street													
Mailing Address														
	Alexandria	VA22	314											
	CITY	STATE	ZIP CODE											

FFC	Form	<b>1S</b>	(Revised	02/2017)
			(11001000	02/2017

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
0(9)01(11).	00111	ranaraionig	i ui uoipuiiti

1	FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor LESKO VICTORY COMMITTEE

Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
			22314
Relationship:	CITY 🔺	STATE A	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

## 8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																																		
Mailing Address	L							1																								1		
		1	1	1				1			I		1		1	1	1	1	I	I	1	1	I	I		1			1	1	1	I	1	I
			1	1				1		1	I					1						1									- [	I		
TITLE OR POSITION	▼							C	ידוכ	Y										S	TAT	Έ						ZIF	o c	OD	E			
														lep	hor	ne I	Nui	nbe	ər					- L				- L						

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.	<u> </u>																														
Mailing Address	L																														
	L																														
		CITY 🔺												STATE A								ZIP CODE									