

Image# 202604229866668570

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Ramirez, Delia, , ,		
(b) Address (number and street) 2339 N CALIFORNIA AVE #47927		<input checked="" type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Chicago IL 60647		2. Candidate's FEC Identification Number H2IL03162
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
		6. State & District of Candidate IL 03
3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2026 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) United With Delia For Congress		
(b) Address (number and street) 2339 N California Ave #47927		
(c) City, State, and ZIP Code Chicago IL 60647		

### 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) ROOTED IN MOVEMENT		
(b) Address (number and street) 611 PENNSYLVANIA AVENUE SE		
(c) City, State, and ZIP Code Washington DC 20003		

*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 Ramirez, Delia, , ,	Date 04/22/2026
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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Optional Supplemental Page for Designation  
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**  
(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

**DELIAS COMMUNITY POWER FUND**

(b) Address (number and street)

PO BOX 65322

(c) City, State, and ZIP Code

WASHINGTON, DC

DC

20035

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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(c) City, State, and ZIP Code