



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name  
**DEL FOR ARIZONA**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2025 To: M M / D D / Y Y Y Y 06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	<span style="border: 1px solid black; padding: 2px;">7243.00</span>	<span style="border: 1px solid black; padding: 2px;">7243.00</span>
(b) Total Contribution Refunds (from Line 20(d)) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<span style="border: 1px solid black; padding: 2px;">7243.00</span>	<span style="border: 1px solid black; padding: 2px;">7243.00</span>
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	<span style="border: 1px solid black; padding: 2px;">408.72</span>	<span style="border: 1px solid black; padding: 2px;">408.72</span>
(b) Total Offsets to Operating Expenditures (from Line 14) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<span style="border: 1px solid black; padding: 2px;">408.72</span>	<span style="border: 1px solid black; padding: 2px;">408.72</span>
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<span style="border: 1px solid black; padding: 2px;">9245.16</span>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">5497.78</span>	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**DEL FOR ARIZONA**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7000.00	7000.00
(ii) Unitemized.....	243.00	243.00
(iii) TOTAL of contributions from individuals ▶	7243.00	7243.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7243.00	7243.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	7243.00	7243.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	408.72	408.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	408.72	408.72

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2410.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7243.00
25. SUBTOTAL (add Line 23 and Line 24).....	9653.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	408.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9245.16

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 9	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**DEL FOR ARIZONA**

**A.** Full Name (Last, First, Middle Initial)  
Pritzker, Jennifer, , ,

Mailing Address 104 So. Michigan Ave, STE 1025

City Chicago	State IL	Zip Code 60603
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FEC ID number of contributing federal political committee. **C**

Name of Employer Tawani Enterprises	Occupation Chairwoman & Founder
--	------------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 18 / 2025

**Transaction ID : SA11AI.4165**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7121.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

**Transaction ID : SA11AI.4165.0**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Note: Above contribution earmarked through this organization

**C.** Full Name (Last, First, Middle Initial)  
Pritzker, Jennifer, , ,

Mailing Address 104 So. Michigan Ave, STE 1025

City Chicago	State IL	Zip Code 60603
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FEC ID number of contributing federal political committee. **C**

Name of Employer Tawani Enterprises	Occupation Chairwoman & Founder
--	------------------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 18 / 2025

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
3500.00

Memo Item  
Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 9  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DEL FOR ARIZONA**

**A.** Full Name (Last, First, Middle Initial)  
ACTBLUE

Mailing Address PO BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2025

Transaction ID : SA11AI.4168.0

Amount of Each Receipt this Period  
3500.00

Memo Item  
 Note: Above contribution earmarked through this organization

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7000.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DEL FOR ARIZONA**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement MM / DD / YYYY 05 / 18 / 2025
Mailing Address 366 Summer St			FEC Identification Number C C00896464
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 276.90
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : SB17.4184
Candidate Name DEL FOR ARIZONA			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: AZ District: 01	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement MM / DD / YYYY 06 / 01 / 2025
Mailing Address 366 Summer St			FEC Identification Number C C00896464
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 0.44
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : SB17.4195
Candidate Name DEL FOR ARIZONA			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: AZ District: 01	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement MM / DD / YYYY 06 / 08 / 2025
Mailing Address 366 Summer St			FEC Identification Number C C00896464
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 3.95
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : SB17.4196
Candidate Name DEL FOR ARIZONA			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: AZ District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	281.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DEL FOR ARIZONA**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. ActBlue Technical Services</b>		M M / D D / Y Y Y Y 06 / 29 / 2025
Mailing Address 366 Summer St		FEC Identification Number
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Merchant Fees		<b>C</b> C00896464
Candidate Name DEL FOR ARIZONA		Amount of Each Disbursement this Period
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2026	0.44
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<b>Transaction ID : SB17.4202</b>
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<b>C</b>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<b>C</b>
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House	Disbursement For:	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.44
<b>TOTAL</b> This Period (last page this line number only).....▶	281.73

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4162**  
**DEL FOR ARIZONA**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
DEL VECCHIO, BRIAN, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address PO BOX 1963		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City CAVE CREEK	State AZ	ZIP Code 85327
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5497.78	0.00	5497.78

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 01 / 2025	M M / D D / Y Y Y Y 11/3/2026	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	5497.78
<b>TOTALS</b> This Period (last page in this line only).....▶	5497.78

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.