PAGE 1 / 98

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Con	nmittee		C	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		xample: If typing ver the lines.	ı, type	12FE4M5	
JIM CARLIN FOR US	SSENATE					
ADDRESS (number and street)	5728 SUNNYB	ROOK DR				
▼ Check if different						
than previously reported. (ACC)	SIOUX CITY				LIA 5	1106-4249
2. FEC IDENTIFICATION	NI IMRED W	CITY A		S	STATE A	ZIP CODE ▲
C C00898148	NOMBEN V	3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (C (a) Quarterly Reports: April 15 Quarterly	ŕ	(b) 12-Day PRI	E-Election Repor		General (120	
July 15 Quarterly	Report (Q2)		Convention (1	20)	Special (128	
X October 15 Quar	terly Report (Q3)	Election or	1			in the State of
January 31 Year-	End Report (YE)	(c) 30-Day PO	ST-Election Repo	ort for the:		
			General (30G)		Runoff (30R) Special (30S)
Termination Repo	ort (TER)	Election or	M M /	D D /	Y	in the State of
5. Covering Period	07	Y Y Y Y Y 2025	through	M M M 09	/ D D /	Y Y Y Y Y 2025
I certify that I have examined Type or Print Name of Treasu	CADLINI IAN	-	nowledge and b	elief it is tru	ue, correct and o	complete.
	CARLIN, JAMES, , ,			D	ate 10	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erro	oneous, or incomple	te information may	subject the pers	on signing th	nis Report to the	penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

JIM CARLIN FOR US SENATE

^M09 2025 07 2025 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 2655.00 22360.63 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 400.00 (from Line 20(d)) (c) Net Contributions (other than loans) 2655.00 21960.63 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 44326.22 167718.73 (from Line 17) (b) Total Offsets to Operating 64.37 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 44326.22 167654.36 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1727.61 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 151971.46 Schedule C and/or Schedule D).....

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

JIM CARLIN FOR US SENATE

Report Covering the Period: From: 07 01 2025 To: 09 30 2025

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	1600.00	18650.00	
(ii) Unitemized	1055.00	3710.63	
(iii) TOTAL of contributions from individuals	2655.00	22360.63	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00	
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	2655.00	22360.63	
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3. LOANS:			
(a) Made or Guaranteed by the Candidate	42836.71	151971.46	
(b) All Other Loans	0.00	0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))	42836.71	151971.46	
4. OFFSETS TO OPERATING			
EXPENDITURES (Refunds, Rebates, etc.)	0.00	64.37	
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.70	1.59	
6. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	45492.41	174398.05	

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	44326.22	167718.73
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	400.00
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	400.00
21.	OTHER DISBURSEMENTS	150.00	2580.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	44476.22	170698.73
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	711.42
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	45492.41
25.	SUBTOTAL (add Line 23 and Line 24)		46203.83
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	44476.22
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD	1727.61

Use separate schedule(s) for each category of the

FOR LINE NUMBER:			PAGE		o ()F	98	
(check only one)								
×	11a	11b		11c		11d		
	12	13a		13h		14		15

ITEMIZED RECEIPTS Detailed Summary Page 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) BOGGS, JASON, , , Date of Receipt Mailing Address PO BOX 575 2025 25 City State Zip Code Transaction ID: A2C31EBDBF96847E3B61 IΑ 50228-0575 PRAIRIE CITY FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation **SELF SALES** Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) COPARANIS, DALE, , , Date of Receipt Mailing Address 2001 OKLAHOMA AVE 08 2025 22 City State Zip Code Transaction ID: A8AD8D033EE8C45E58E6 DAVENPORT IΑ 52804-4618 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 250.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) GRECO, LANCE, , , Date of Receipt Mailing Address 257 23RD STREET DR SE 80 12 2025 City State Zip Code Transaction ID: A0BF7F32E9DF34D059A5 CEDAR RAPIDS IΑ 52403-1617 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 350.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 350.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional).....

Name of Employer

Receipt For: 2026

General

| Primary

RETIRED

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR L	INE NU	MBER:	PAGE	0	OF	•	90
(check	only or	ne)					
X 1	1a	11b	11c	11	d		
12	2	13a	13b	14	. [15

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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) HALBE, MICHAEL, , , Date of Receipt Mailing Address 2506 RANCHWOOD CIR SE 2025 25 City State Zip Code Transaction ID: A3019D367C5C64EBE9D9 MN 56308-9269 **ALEXANDRIA** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) TASS, CRISTY, , , Date of Receipt Mailing Address 14036 210TH ST 2025 09 24 City State Zip Code Transaction ID: A53536B1ABA6D4D4D9D3 MASON CITY IΑ 50401-9023 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee.

	Other (specify)	255.00	
	Full Name (Last, First, Middle Initial)		Date of Receipt
C.			Date of Neceipt
•	Mailing Address		M M / D D / Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For:	Election Cycle-to-Date	Memo Item
	Primary General Other (specify) ▼	7 7 7	

250 00

Occupation

Election Cycle-to-Date

RETIRED

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

1600.00

250.00

Memo Item

PAGE 7 OF 98 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 2025 City State Zip Code Transaction ID: AC66A954A87004E4C92D IΑ 51054-8804 SERGEANT BLUFF FEC ID number of contributing Amount of Each Receipt this Period C S6IA00249 federal political committee. 2356.71 Name of Employer Occupation **CANDIDATE SELF** Memo Item Receipt For: 2026 Election Cycle-to-Date **CANDIDATE LOAN** Primary General 111491.46 Other (specify) Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 2025 07 03 City State Zip Code Transaction ID: A804DD973AA4E48869A8 SERGEANT BLUFF IΑ 51054-8804 FEC ID number of contributing C S6IA00249 Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation **SELF CANDIDATE** Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary LOAN FROM CANDIDATE General 112091.46 Other (specify) ▼ Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 07 03 2025 City State Zip Code Transaction ID: AE2294C72ACF34DBEB53 SERGEANT BLUFF IΑ 51054-8804 FEC ID number of contributing C S6IA00249 Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation **CANDIDATE SELF** Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General LOAN FROM CANDIDATE 112091 46 Other (specify) 2956.71 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Receipt For: 2026 Primary

Other (specify) ▼

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC FITEMIZED RECEIPTS	Form 3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 98 (check only one) 11a 11b 11c 11d 12 X 13a 13b 14 15	
	er than using the name and a		r person for the purpose of soliciting contributions tee to solicit contributions from such committee.	
A. Full Name (Last, First, Middle CARLIN, JAMES, , , Mailing Address 602 JACE RO.	Initial)		Date of Receipt	
City SERGEANT BLUFF	State IA	Zip Code 51054-8804	07 10 2025 Transaction ID : A6C43EEABCCFE4CEF8EA	
FEC ID number of contributing federal political committee.	C S61	A00249	Amount of Each Receipt this Period	
Name of Employer SELF CANDID Receipt For: 2026 Primary General			Memo Item LOAN FROM CANDIDATE	
Other (specify) ▼ Full Name (Last, First, Middle	Initial)	114591.46	Data of Dansiet	
B. CARLIN, JAMES, , , Mailing Address 602 JACE RO	AD		Date of Receipt O7 11 2025	
City SERGEANT BLUFF	State IA	Zip Code 51054-8804	Transaction ID : A87767154C56742BDAE0	
FEC ID number of contributing federal political committee.	C S61/	A00249	Amount of Each Receipt this Period	
Name of Employer SELF	Occupation CANDIDAT	E	300.00 Memo Item	
Receipt For: 2026 Primary Genera Other (specify) ▼		ycle-to-Date ▼ 114891.46	LOAN FROM CANDIDATE	
C. Full Name (Last, First, Middle CARLIN, JAMES, , , Mailing Address 602 JACE RC	•		Date of Receipt	
City	State	Zip Code	07 14 2025 Transaction ID : A0936BE661C0A4CE09AA	
SERGEANT BLUFF FEC ID number of contributing federal political committee.		51054-8804 A00249	Amount of Each Receipt this Period	
Name of Employer	Occupation		125.00	

Election Cycle-to-Date

119926.46

2925.00

Memo Item

LOAN FROM CANDIDATE

PAGE 9 OF 98 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 2025 14 City State Zip Code Transaction ID: A98264454B9704961AF2 IΑ 51054-8804 SERGEANT BLUFF FEC ID number of contributing Amount of Each Receipt this Period C S6IA00249 federal political committee. 4910.00 Name of Employer Occupation **CANDIDATE SELF** Memo Item Receipt For: 2026 Election Cycle-to-Date LOAN FROM CANDIDATE Primary General 119926.46 Other (specify) Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 2025 07 24 City State Zip Code Transaction ID: A89662E3E67134372BFE SERGEANT BLUFF IΑ 51054-8804 FEC ID number of contributing C S6IA00249 Amount of Each Receipt this Period federal political committee. 7000.00 Name of Employer Occupation **SELF CANDIDATE** Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary LOAN FROM CANDIDATE General 126926.46 Other (specify) ▼ Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Date of Receipt Mailing Address 602 JACE ROAD 07 28 2025 City State Zip Code Transaction ID: A7098BC5A7322472B9FF SERGEANT BLUFF IΑ 51054-8804 FEC ID number of contributing C S6IA00249 Amount of Each Receipt this Period federal political committee. 7000.00 Name of Employer Occupation **CANDIDATE SELF** Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General LOAN FROM CANDIDATE 133926 46 Other (specify) 18910.00 SUBTOTAL of Receipts This Page (optional).....

				<u>, </u>	
SC	CHEDULE A (FEC Form 3)		Lles concrete cohodule(s)	FOR LINE NUMBER: PAGE 10 OF 98	
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)	
•	EMIZED RECEIPTS		Detailed Summary Page	112 X 13a 13b 14 15	
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
	JIM CARLIN FOR US SENATE				
	Full Name (Last, First, Middle Initial) CARLIN, JAMES, , ,			Date of Receipt	
٦.	Mailing Address 602 JACE ROAD			M M / D D / Y Y Y Y	
	City	State	Zip Code	08 15 2025 Transaction ID : A9875599B3CC84E90913	
	SERGEANT BLUFF	IA	51054-8804	17a1Saction ID . A3073333B3CC04E30313	
	FEC ID number of contributing federal political committee.	C S6	IA00249	Amount of Each Receipt this Period	
	Name of Employer	Occupation	า	1000.00	
	SELF	CANDIDAT	[E	Memo Item	
	Receipt For: 2026 Primary General	Election C	ycle-to-Date ▼	LOAN FROM CANDIDATE	
	Other (specify) ▼		134926.46		
_	Full Name (Last, First, Middle Initial) CARLIN, JAMES, , ,			Date of Receipt	
Э.	Mailing Address 602 JACE ROAD	08 22 2025			
	City	State	Zip Code	Transaction ID : AD34E2BFC67934006B96	
	SERGEANT BLUFF	IA	51054-8804		
	FEC ID number of contributing federal political committee.	C S61.	A00249	Amount of Each Receipt this Period	
	Name of Employer	Occupation		5000.00	
	SELF Receipt For: 2026		ycle-to-Date →	Memo Item	
	Primary General Other (specify) ▼	LIECTION O	139926.46	LOAN FROM CANDIDATE	
	Curior (openity) V		7	4	
_	Full Name (Last, First, Middle Initial) CARLIN, JAMES, , ,			Date of Receipt	
Ĵ.	Mailing Address 602 JACE ROAD			08 28 2025	
	City	State	Zip Code	Transaction ID : A73F1DF98906E4D75B02	
	SERGEANT BLUFF	IA	51054-8804		
	FEC ID number of contributing federal political committee.	C S61	IA00249	Amount of Each Receipt this Period	
	Name of Employer SELF	Occupation CANDIDAT		125.00	
	Receipt For: 2026	Election C	ycle-to-Date _	Memo Item	
	Primary General			LOAN FROM CANDIDATE	
	Other (specify) ▼		140051.46		
	UBTOTAL of Receipts This Page (optional)			6125.00	
J	DEIDIAL OF HECEIPIS THIS FAYE (OPHOHAI)				

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 98 (check only one) 11a
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE	=		
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Mailing Address 602 JACE ROAD City	State	Zip Code	Date of Receipt 09 02 2025 Transaction ID: ACDEBB11F7B9240FFB27
SERGEANT BLUFF FEC ID number of contributing federal political committee.	C S6	51054-8804 IA00249	Amount of Each Receipt this Period
Name of Employer SELF Receipt For: 2026	Occupation CANDIDAT		Memo Item LOAN FROM CANDIDATE
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Mailing Address 602 JACE ROAD City	State	Zip Code	Date of Receipt M
SERGEANT BLUFF FEC ID number of contributing federal political committee.		51054-8804 A00249	Amount of Each Receipt this Period 1600.00
Name of Employer SELF Receipt For: 2026 Primary General Other (specify) ▼	CANDIDAT Election C		Memo Item LOAN FROM CANDIDATE
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Mailing Address 602 JACE ROAD City	State	Zip Code	Date of Receipt M
SERGEANT BLUFF FEC ID number of contributing federal political committee.	C S6	51054-8804 IA00249	Amount of Each Receipt this Period
Name of Employer SELF Receipt For: 2026 ✓ Primary General Other (specify) ▼	Occupation CANDIDAT Election C		Memo Item LOAN FROM CANDIDATE
SUBTOTAL of Receipts This Page (optional)			4800.00

	1		T		
SCHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF 98 (check only one)		
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 11d		
Any information copied from such Reports and	Statements m		12 X 13a 13b 14 15		
or for commercial purposes, other than using th					
NAME OF COMMITTEE (In Full)					
/ JIM CARLIN FOR US SENATE					
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , ,			5. (5.)		
Mailing Address 602 JACE ROAD			Date of Receipt		
City	State	Zip Code	09 10 2025		
SERGEANT BLUFF	IA	51054-8804	Transaction ID : A4281245090B74515ABD		
FEC ID number of contributing federal political committee.	C 561	A00249	Amount of Each Receipt this Period		
Name of Employer	Occupation	1	3500.00		
SELF	CANDIDAT	E	Memo Item		
Receipt For: 2026 Primary General	Election C	ycle-to-Date ▼	LOAN FROM CANDIDATE		
Other (specify) ▼	148351.46				
		, ,	4		
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , ,			Date of Receipt		
Mailing Address 602 JACE ROAD	Mailing Address 602 JACE ROAD				
City	State	Zip Code	09 12 2025		
SERGEANT BLUFF	IA	51054-8804	Transaction ID : A2E61A91E6F5F45C3BA5		
FEC ID number of contributing	C S6L	A00249	Amount of Each Receipt this Period		
federal political committee.	O 3		1500.00		
Name of Employer	Occupation		1300.00		
SELF Receipt For: 2026	CANDIDAT		Memo Item		
Primary General	Election C	ycle-to-Date ▼	LOAN FROM CANDIDATE		
Other (specify) ▼		149851.46			
Full Name (Last, First, Middle Initial)					
CARLIN, JAMES, , ,			Date of Receipt		
Mailing Address 602 JACE ROAD			09 22 2025		
City	State	Zip Code	Transaction ID : AEDE1697EB4824343B5E		
SERGEANT BLUFF	IA	51054-8804			
FEC ID number of contributing federal political committee.	C S61	A00249	Amount of Each Receipt this Period		
Name of Employer	Occupation		300.00		
SELF Receipt For: 2026		ycle-to-Date _	Memo Item		
Primary General	Licotion O	▼	LOAN FROM CANDIDATE		
Other (specify)		150151.46	1		
SUBTOTAL of Receipts This Page (optional)			5300.00		

SCHEDULE A (FEC Forr **ITEMIZED RECEIPTS**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

В.

C.

mage# 202510159790864102			
SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 98 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE	Statements ma e name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions see to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Mailing Address 602 JACE ROAD City SERGEANT BLUFF	State IA	Zip Code 51054-8804	Date of Receipt 09 29 2025 Transaction ID : A7C9D1B1FF2424A19B44
FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: 2026 Primary General Other (specify) Other (specify)	Occupation CANDIDATI	A00249	Amount of Each Receipt this Period 1820.00 Memo Item LOAN FROM CANDIDATE
Full Name (Last, First, Middle Initial) B. Mailing Address City	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C		Amount of Each Receipt this Period Memo Item
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C.	Election Cy	cle-to-Date	Date of Receipt
Mailing Address			M M / D D / Y Y Y Y

Other (specify) ▼		
Full Name (Last, First, Middle Initial)	•	Date of Receipt
Mailing Address	M M / D D / Y Y Y Y	
City	State Zip Code	
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date	Memo Item
		1820.00

42836.71

98 **PAGE** 14 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement 1776 LAW CENTER 2025 06 Mailing Address PO BOX 1505 City State Zip Code **FEC Identification Number** TN HIXSON 37343-5505 Purpose of Disbursement C **LEGAL CONSULTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1083.11 Office Sought: House Senate Primary General Transaction ID: B83B35BEF5784483EB4B Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** AMAZON Date of Disbursement Mailing Address 440 TERRY AVE N 2025 09 City State Zip Code **FEC Identification Number SEATTLE** WA 98109-5210 Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 20.32 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BFC01A62BC59A4668A20 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. AMAZON Mailing Address 440 TERRY AVE N 09 04 2025 City State Zip Code **FEC Identification Number SEATTLE** 98109-5210 WA Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 12.83 Office Sought: House General Senate Primary Transaction ID: B5C372957478C470A800 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1116.26 TOTAL This Period (last page this line number only).....

98 **PAGE** 15 FOR LINE NUMBER: (check only one) X 17 18 19a 20a 20b 20c

Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. BAILEYS.COM 2025 Mailing Address 801 MAIN AVE City State Zip Code **FEC Identification Number** CT **NORWALK** 06851-1127 Purpose of Disbursement **FOOD AND BEVERAGE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 118.24 Office Sought: House Senate Primary General Transaction ID: BCE3AF4AC59A74270A94 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. BAILEYS.COM Date of Disbursement Mailing Address 801 MAIN AVE 2025 City State Zip Code **FEC Identification Number NORWALK** CT 06851-1127 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 118.24 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B82C9317536C2462D8EC Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. BAILEYS.COM Mailing Address 801 MAIN AVE 09 03 2025 City State Zip Code **FEC Identification Number NORWALK** 06851-1127 CT Purpose of Disbursement **FOOD AND BEVERAGE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 118.24 Office Sought: House Senate Primary General Transaction ID: BDD1C85E9BFA94BBF87B President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 354.72 TOTAL This Period (last page this line number only).....

98 **PAGE** 16 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. BIG RED PALOOZA 2025 80 Mailing Address 1006 CHESTNUT ST State Zip Code City **FEC Identification Number** IΑ **OSAGE** 50461-1610 Purpose of Disbursement C **FUNDRAISING EVENT FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 250.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BF87A237048684057BB8 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. CITY OF IOWA Date of Disbursement Mailing Address 410 E WASHINGTON ST 2025 10 09 City State Zip Code **FEC Identification Number IOWA CITY** 52240-1825 Purpose of Disbursement **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 400.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B5190245D02F74970835 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. DYNES DESIGN Mailing Address 1805 HARDING CT 23 07 2025 City Zip Code State **FEC Identification Number BETTENDORF** 52722-3930 IΑ Purpose of Disbursement **PRINTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1904.81 Office Sought: House General Senate Primary Transaction ID: BB1CF08906377480DBD6 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2554.81 TOTAL This Period (last page this line number only).....

NAME OF COMMITTEE (In Full)

A. DYNES DESIGN

Full Name (Last, First, Middle Initial)

Mailing Address 1805 HARDING CT

JIM CARLIN FOR US SENATE

98 PAGE 17 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 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. Date of Disbursement

	City BETTENDORF	State IA	Zip Code 52722-3930		FEC Identification Number
	Purpose of Disbursement PRINTING	С			
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
		ement For: 2 Primary Other (spec	General	7,72	1632.38 Transaction ID : B52311CE76B6845A0ACF Memo Item
	Full Name (Last, First, Middle Initial)				
3.	EVENTBRITE	Date of Disbursement			
	Mailing Address 95 3RD ST	07 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City				
	SAN FRANCISCO	State CA	Zip Code 94103-3103		FEC Identification Number
	Purpose of Disbursement FUNDRAISING EVENT FEES	001	С		
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburse		325.65		
	Senate	Primary	General		Transaction ID : BC4E038E3C5A348C7A89
	State: District:	Other (spec	CITY) $lacksquare$		Memo Item
	Full Name (Last, First, Middle Initial)				
).	EVENTBRITE	Date of Disbursement			
	Mailing Address 95 3RD ST	07 / D D / Y Y Y Y Y Y 2025			
	City	State	Zip Code		
	SAN FRANCISCO	CA	94103-3103		FEC Identification Number
	Purpose of Disbursement FUNDRAISING EVENT FEES	C			
	Candidate Name	Amount of Each Disbursement this Period			
	Office Sought: House Disburs	108.55			
	Senate	Primary Other (spec	General		Transaction ID : BF514AC9AF96D483FA32
	State: President District:	_ Other (spec	▼		Memo Item
	SUBTOTAL of Disbursements This Page (optional	l)			2066.58
	TOTAL This Period (last page this line number or	————— าly)			

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by not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.								

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. FLEET FARM 2025 28 Mailing Address 2401 S MEMORIAL DR Zip Code City State **FEC Identification Number APPLETON** 54915-1429 Purpose of Disbursement C **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 51.54 Office Sought: House Senate Primary General Transaction ID: BF432FAE0AB054FC4B20 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. FLEET FARM Date of Disbursement Mailing Address 2401 S MEMORIAL DR 12 2025 08 City Zip Code State **FEC Identification Number** WI **APPLETON** 54915-1429 Purpose of Disbursement **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: 49.11 Disbursement For: 2026 House Senate Primary General Transaction ID: BE05C45242F3D466E94D Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement C. FLEET FARM Mailing Address 2401 S MEMORIAL DR 80 26 2025 City Zip Code State **FEC Identification Number APPLETON** WI 54915-1429 Purpose of Disbursement **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 56.01 Office Sought: House Senate General Primary Transaction ID: B818184D9886C40EA8F2 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 156.66 TOTAL This Period (last page this line number only).....

98 **PAGE** 19 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HAMPTON INNS 2025 15 Mailing Address 7930 JONES BRANCH DR City State Zip Code **FEC Identification Number** VA **MCLEAN** 22102-3388 Purpose of Disbursement LODGING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 44.80 Office Sought: House Senate Primary General Transaction ID: B7ACE55D09468499DACD Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B.** HAZLITT INDUSTRIES Date of Disbursement Mailing Address 44970 FALCON PL 2025 09 **STE 400** City State Zip Code **FEC Identification Number STERLING** 20166-9568 Purpose of Disbursement **PRINTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B0138752ADA4140A3814 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HILTON HOTELS Mailing Address 7930 JONES BRANCH DR 80 04 2025 City State Zip Code **FEC Identification Number MCLEAN** 22102-3388 VA Purpose of Disbursement LODGING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 256.48 Office Sought: House Senate Primary General Transaction ID: BC00B01EC8074458B9C4 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1801.28 TOTAL This Period (last page this line number only).....

98 PAGE 20 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HILTON HOTELS 2025 Mailing Address 7930 JONES BRANCH DR City State Zip Code **FEC Identification Number** VA **MCLEAN** 22102-3388 Purpose of Disbursement LODGING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1.00 Office Sought: House Senate Primary General Transaction ID: BF434702266BE440A872 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** HILTON HOTELS Date of Disbursement Mailing Address 7930 JONES BRANCH DR 2025 09 City State Zip Code **FEC Identification Number MCLEAN** 22102-3388 Purpose of Disbursement **LODGING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 76.80 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B555A31D88EF946339AC Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. HUGEDOMAINS Mailing Address 1225 N POST OAK RD 80 01 2025 STE 100 City State Zip Code **FEC Identification Number HOUSTON** 77055-7213 TX Purpose of Disbursement WEBSITE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 995.00 Office Sought: House Senate Primary General Transaction ID: BC835802FFFC14970AF5 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1072.80 TOTAL This Period (last page this line number only).....

98 PAGE 21 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HY-VEE 2025 02 Mailing Address 5820 WESTOWN PKWY City State Zip Code **FEC Identification Number** IΑ WEST DES MOINES 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 10.05 Office Sought: House Senate Primary General Transaction ID: B4E2B6EDF9A5E40E28F0 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. HY-VEE Date of Disbursement Mailing Address 5820 WESTOWN PKWY 2025 15 City State Zip Code **FEC Identification Number** WEST DES MOINES IA 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B399FAD715C774F40836 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HY-VEE Mailing Address 5820 WESTOWN PKWY 07 2025 City State Zip Code **FEC Identification Number** WEST DES MOINES 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 11.05 Office Sought: House General Senate Primary Transaction ID: B0C594CF8FC7C411683D President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 36.48 TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	×	17		18		19a		19b	
Detailed Suffillary Fage		20a		20b		20c		21	
y not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.									

			Detailed Summar	y Page	20a 20b 20c 21				
	ny information copied from such Reports and State for commercial purposes, other than using the na								
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE								
	Full Name (Last, First, Middle Initial)								
Α.	HY-VEE				Date of Disbursement				
	Mailing Address 5820 WESTOWN PKWY	07 21 7 2025							
	City		CCC Identification Number						
	WEST DES MOINES	IA	50266-8223		FEC Identification Number				
	Purpose of Disbursement FOOD AND BEVERAGE	Amount of Each Disbursement this Period							
	Candidate Name								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		20.59 Transaction ID : B244F3F511D4C4A2DBF8 Memo Item				
	State: District:				Internet Rem				
В.	Full Name (Last, First, Middle Initial) HY-VEE	Date of Disbursement							
	Mailing Address 5820 WESTOWN PKWY	07 22 7 2025							
	City WEST DES MOINES	FEC Identification Number							
	Purpose of Disbursement FOOD AND BEVERAGE	C							
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period						
	Senate President	ment For: Primary Other (spe	General		12.61 Transaction ID: B894F8BB6F53B4EFF901 Memo Item				
	State: District: Full Name (Last, First, Middle Initial)								
C.	HY-VEE	Date of Disbursement							
	Mailing Address 5820 WESTOWN PKWY	07 23 / Y Y Y Y 2025							
	City WEST DES MOINES	FEC Identification Number							
	Purpose of Disbursement FOOD AND BEVERAGE	C							
	Candidate Name	Amount of Each Disbursement this Period							
	Office Sought: House Senate President State: Disburse	9.05 Transaction ID: B34138780A4BE489C828 Memo Item							
	SUBTOTAL of Disbursements This Page (optional))	42.25				
	TOTAL This Period (last page this line number on	ly)]					

98 PAGE 23 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HY-VEE Mailing Address 5820 WESTOWN PKWY 29 2025 City State Zip Code **FEC Identification Number** IΑ WEST DES MOINES 50266-8223 Purpose of Disbursement C FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 21.84 Office Sought: House Senate Primary General Transaction ID: BD63F506F8B194434A0F Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. HY-VEE Date of Disbursement Mailing Address 5820 WESTOWN PKWY 05 2025 08 City State Zip Code **FEC Identification Number** WEST DES MOINES IA 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 11.95 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B7B409E67B34244CAB51 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HY-VEE Mailing Address 5820 WESTOWN PKWY 80 15 2025 City State Zip Code **FEC Identification Number** WEST DES MOINES 50266-8223 IΑ Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 5.72 Office Sought: House General Senate Primary Transaction ID: B4048C127C6B3498482D President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 39.51 TOTAL This Period (last page this line number only).....

98 PAGE 24 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HY-VEE 2025 Mailing Address 5820 WESTOWN PKWY 18 City State Zip Code **FEC Identification Number** IΑ WEST DES MOINES 50266-8223 Purpose of Disbursement C FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 3.28 Office Sought: House Senate Primary General Transaction ID: B4A095AF52A934417982 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. HY-VEE Date of Disbursement Mailing Address 5820 WESTOWN PKWY 03 2025 09 City State Zip Code **FEC Identification Number** WEST DES MOINES IA 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 35.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B3E4085593E094417B3E Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HY-VEE Mailing Address 5820 WESTOWN PKWY 09 10 2025 City State Zip Code **FEC Identification Number** WEST DES MOINES 50266-8223 IΑ Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 32.75 Office Sought: House General Senate Primary Transaction ID: BE2ED5F159D2044DAA27 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 71.03

98 PAGE 25 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. HY-VEE 2025 Mailing Address 5820 WESTOWN PKWY City State Zip Code **FEC Identification Number** IΑ WEST DES MOINES 50266-8223 Purpose of Disbursement C FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 7.40 Office Sought: House Senate Primary General Transaction ID: B3E4CD8775AF447CCB9A Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. HY-VEE Date of Disbursement Mailing Address 5820 WESTOWN PKWY 18 2025 09 City State Zip Code **FEC Identification Number** WEST DES MOINES IA 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 2.17 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B3B934ADBD63545D0BEF Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HY-VEE Mailing Address 5820 WESTOWN PKWY 25 09 2025 City State Zip Code **FEC Identification Number** WEST DES MOINES 50266-8223 Purpose of Disbursement FOOD AND BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 11.99 Office Sought: House General Transaction ID: BB11A744B0059439DB08 Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 21.56 TOTAL This Period (last page this line number only).....

98 **PAGE** 26 FOR LINE NUMBER: (check only one) X 17 18 19a 20a 20b 20c

Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 02 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 109.00 Office Sought: House Senate Primary General Transaction ID: BA597ACF5B859437AAD5 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 03 2025 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 468.23 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BFDF4A9E156414F0B933 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 07 03 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1015.86 Office Sought: House Senate Primary General Transaction ID: B3050EBDC4AF7467AB51 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1593.09 TOTAL This Period (last page this line number only).....

98 PAGE 27 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 03 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 129.29 Office Sought: House Senate Primary General Transaction ID: BCA8470F37ED847C4BB8 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 129.29 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B0ED96E661FFF4674B3A Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 07 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House General Senate Primary Transaction ID: B5A2671A9ED624F759F8 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 726.81 TOTAL This Period (last page this line number only).....

98 PAGE 28 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B3695A54C566241F2A37 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 18 2025 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B7312812D26BF4CACB16 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 07 18 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 193.94 Office Sought: House Senate Primary General Transaction ID: B64706C8EE5A04715BDE President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2225.66 TOTAL This Period (last page this line number only).....

98 PAGE 29 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 18 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 478.93 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B61E2775E19AF46C186C Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 468.23 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B9540CAE5F4E14B4FA8A Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 07 25 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 129.29 Office Sought: House Senate Primary General Transaction ID: BFCF9E3864CD445F795F President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1076.45 TOTAL This Period (last page this line number only).....

98 PAGE 30 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 25 2025 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BBA599D367B8841C4B30 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 08 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BB8CED4A1BAF54987AFA Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 80 01 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 129.29 Office Sought: House Senate Primary General Transaction ID: BBA953E19B14E488E80F President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2161.01 TOTAL This Period (last page this line number only).....

98 PAGE 31 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 01 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House Senate Primary General Transaction ID: B774A9C14BCB7449AB2A Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 08 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 109.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BBC4CA35C310D48F3AE0 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 80 08 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House Senate Primary General Transaction ID: B657E2238B6244ED897B President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1045.46 TOTAL This Period (last page this line number only).....

98 PAGE 32 FOR LINE NUMBER: (check only one) X 17 18 19a 20a 20b 20c 21

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98 PAGE 33 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

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PAGE 34 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c

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for each category of the 19b Detailed Summary Page 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House Senate Primary General Transaction ID: BD2C36DD8F13A45939C6 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 08 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B5E4920FD1B264CCAAE1 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 80 29 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1015.86 Office Sought: House Senate Primary General Transaction ID: B6DE63049BFAF4BEE99F President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2499.95 TOTAL This Period (last page this line number only).....

98 PAGE 35 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

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98 **PAGE** 36 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 09 05 2025 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 834.77 Office Sought: House Senate Primary General Transaction ID: BDECA3997C52D496F86E Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 05 2025 09 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 129.29 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BDFCAAAFE557A4203B87 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 09 05 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 358.54 Office Sought: House Senate Primary General Transaction ID: B6B09CAD82A52437180B President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1322.60 TOTAL This Period (last page this line number only).....

98 PAGE 37 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 12 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement C **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B68C063665F7949959F8 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 12 2025 09 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 129.29 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B8AB101982F1B4AEFBE2 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 09 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House Senate Primary General Transaction ID: B51933C96582C4CC68BB President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1613.38 TOTAL This Period (last page this line number only).....

98 PAGE 38 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 2025 19 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement C **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BA6131D0DD13D4D5795D Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 19 2025 09 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 129.29 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B949DC3F5C6A64139A3C Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 09 19 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 468.23 Office Sought: House Senate Primary General Transaction ID: BC61A212065BE450DB34 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1613.38 TOTAL This Period (last page this line number only).....

98 PAGE 39 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. INTUIT 09 2025 26 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement **PAYROLL WAGES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1015.86 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B6842D3E2C12C4B7AA83 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 26 2025 09 City State Zip Code **FEC Identification Number** MOUNTAIN VIEW CA 94043-1140 Purpose of Disbursement **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 462.87 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B2607D5360B1C42D5ACF Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. INTUIT Mailing Address 2700 COAST AVE 09 26 2025 City Zip Code State **FEC Identification Number** MOUNTAIN VIEW 94043-1140 CA Purpose of Disbursement **PAYROLL FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 96.97 Office Sought: House Senate Primary General Transaction ID: BD6E42BDF4AFC4D07B56 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 1575.70 TOTAL This Period (last page this line number only).....

98 PAGE 40 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

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for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 20a 20b 20c 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. KWIK STAR 28 2025 Mailing Address 1626 OAK ST Zip Code City State **FEC Identification Number** WI LA CROSSE 54603-2308 Purpose of Disbursement C **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 64.46 Office Sought: House Senate Primary General Transaction ID: BECA4652F0CC14EDD97C Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B.** MIDWEST WEB GURU Date of Disbursement Mailing Address 3611 FAST LN 2025 City State Zip Code **FEC Identification Number CEDAR FALLS** IA 50613-2125 Purpose of Disbursement WEBSITE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 3040.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BE7DE8CEED544466FB26 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. MULDER, NANCY, , , Mailing Address 5728 SUNNYBROOK DR 25 80 2025 City State Zip Code **FEC Identification Number** SIOUX CITY 51106-4249 IΑ Purpose of Disbursement **PRINTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1600.00 Office Sought: House General Senate Primary Transaction ID: BC7AF85254B034DD7835 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 4704.46 TOTAL This Period (last page this line number only).....

98 PAGE 42 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 80 2025 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement C **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 15.89 Office Sought: House Senate Primary General Transaction ID: B4896A1E591244566AC3 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B. NATIONBUILDER** Date of Disbursement Mailing Address 1209 N ORANGE ST 2025 City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B9B0F188FDBC94193A41 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. NATIONBUILDER Mailing Address 1209 N ORANGE ST 07 2025 City State Zip Code **FEC Identification Number** WILMINGTON 19801-1120 DE Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 365.00 Office Sought: House Senate Primary General Transaction ID: BA25501E8DEB34618BD3 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 382.17 TOTAL This Period (last page this line number only).....

98 PAGE 43 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 2025 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 10.05 Office Sought: House Senate Primary General Transaction ID: BB293F34006004A7E890 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B. NATIONBUILDER** Date of Disbursement Mailing Address 1209 N ORANGE ST 2025 City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 10.05 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BF8B79B2C519C46D0B8D Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. NATIONBUILDER Mailing Address 1209 N ORANGE ST 07 20 2025 City State Zip Code **FEC Identification Number** WILMINGTON 19801-1120 DE Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 30.48 Office Sought: House Senate Primary General Transaction ID: B87F571E8A2034D5191E President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 50.58 TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 25 2025 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 13.95 Office Sought: House Senate Primary General Transaction ID: B82866F8AD8EC4861921 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B. NATIONBUILDER** Date of Disbursement Mailing Address 1209 N ORANGE ST 08 2025 08 City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BF3A977C830324901BEB Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. NATIONBUILDER Mailing Address 1209 N ORANGE ST 80 2025 City State Zip Code **FEC Identification Number** WILMINGTON 19801-1120 DE Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 365.00 Office Sought: House Senate Primary General Transaction ID: BBAC63DCCC78F4979B73 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 380.23 TOTAL This Period (last page this line number only).....

98 PAGE 45 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 2025 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement C **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1.28 Office Sought: House Senate Primary General Transaction ID: B1C1CFF19DD20409A833 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B. NATIONBUILDER** Date of Disbursement Mailing Address 1209 N ORANGE ST 2025 08 City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 4.20 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B3459DF69CEC043608E7 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. NATIONBUILDER Mailing Address 1209 N ORANGE ST 80 2025 City State Zip Code **FEC Identification Number** WILMINGTON 19801-1120 DE Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 10.05 Office Sought: House Senate Primary General Transaction ID: BC432BF54F03A4D378E9 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 15.53 TOTAL This Period (last page this line number only).....

98 PAGE 46 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 09 2025 03 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement C **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 4.20 Office Sought: House Senate Primary General Transaction ID: B3CF4417CB14B409C928 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **B. NATIONBUILDER** Date of Disbursement Mailing Address 1209 N ORANGE ST 2025 09 City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BB912E1EB07114BC891E Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. NATIONBUILDER Mailing Address 1209 N ORANGE ST 09 05 2025 City State Zip Code **FEC Identification Number** WILMINGTON 19801-1120 DE Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 5.48 Office Sought: House Senate Primary General Transaction ID: B8FE4B36E62E84AAA880 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 10.96 TOTAL This Period (last page this line number only).....

98 PAGE 47 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement A. NATIONBUILDER 2025 09 Mailing Address 1209 N ORANGE ST City State Zip Code **FEC Identification Number** DE WILMINGTON 19801-1120 Purpose of Disbursement C **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 1.28 Office Sought: House Senate Primary General Transaction ID: BCE4AE0549B124C34A1D Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B. PEOPLEFINDER** Date of Disbursement Mailing Address 1915 21ST ST 02 2025 City State Zip Code **FEC Identification Number SACRAMENTO** CA 95811-6813 Purpose of Disbursement OFFICE SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 119.95 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BF2CF99590A1A493E88D Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. RED'S PRINTING Mailing Address 410 5TH AVE SW 07 02 2025 City State Zip Code **FEC Identification Number** LE MARS 51031-1921 IΑ Purpose of Disbursement **PRINTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 770.99 Office Sought: House Senate Primary General Transaction ID: B167DD0B8F2634B429F0 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 892.22 TOTAL This Period (last page this line number only).....

98 PAGE 48 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 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) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) Date of Disbursement THE IOWA STANDARD 25 2025 Mailing Address PO BOX 112 City State Zip Code **FEC Identification Number** IΑ SIOUX CENTER 51250-0112 Purpose of Disbursement C PRINT ADS 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 400.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B5A3E9104763843C7893 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. USPS Date of Disbursement Mailing Address 475 LENFANT PLZ SW 02 2025 City State Zip Code **FEC Identification Number** DC WASHINGTON 20260-0001 Purpose of Disbursement **SHIPPING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 111.70 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B73B912E137E24D65944 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. USPS Mailing Address 475 LENFANT PLZ SW 07 2025 City State Zip Code **FEC Identification Number** WASHINGTON DC 20260-0001 Purpose of Disbursement **SHIPPING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 52.65 Office Sought: House Senate Primary General Transaction ID: B985A1C5996C74229B28 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 564.35 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

A. USPS

lm	nage# 202510159790864138					
	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	-	1	Use separate sche for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 49 OF 98 (check only one) X 17
						person for the purpose of soliciting contributions tee to solicit contributions from such committee.
\rangle	JIM CARLIN FOR US SEN	ATE				
Α.	Full Name (Last, First, Middle Initial) USPS Mailing Address 475 LENFANT PLZ SW	ı				Date of Disbursement O7 14 2025
	City WASHINGTON Purpose of Disbursement SHIPPING	;	State DC	Zip Code 20260-0001	001	FEC Identification Number
	Office Sought: House Senate President	Disburser	ment For: Primary Other (spe	General	Category, Type	Amount of Each Disbursement this Period 130.95 Transaction ID: BE447F2B891754650A65 Memo Item
— В.	State: District: Full Name (Last, First, Middle Initial) WALMART					Date of Disbursement
	Mailing Address 702 SW 8TH ST					07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	;	State	Zip Code		FEC Identification Number

	City WASHINGTON	State DC	Zip Code 20260-0001		FEC Identification Number		
	Purpose of Disbursement SHIPPING	C					
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period				
	Office Sought: House Disburs	Sought: House Disbursement For: 2026 Senate Primary General Other (specify) ▼					
	Full Name (Last, First, Middle Initial)						
B.	WALMART Mailing Address 702 SW 8TH ST		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City BENTONVILLE	State AR	Zip Code 72716-6209		FEC Identification Number		
	Purpose of Disbursement OFFICE SUPPLIES	001	C				
	Candidate Name	Amount of Each Disbursement this Period					
	Office Sought: House Disburs Senate President		38.50 Transaction ID: B892FB20BABAB4952944 Memo Item				
_	State: District: Full Name (Last, First, Middle Initial)						
C.	ZEFFY						
	Mailing Address 651 N BROAD ST STE 206	M M / D D / Y Y Y Y Y 2025					
	City MIDDLETOWN	State DE	Zip Code 19709-6402		FEC Identification Number		
	Purpose of Disbursement OFFICE SUBSCRIPTION	001			C		
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period				
	9	Senate Primary General					
_	State: District:		V		Memo Item		
	SUBTOTAL of Disbursements This Page (optional	······································	353.40				
	TOTAL This Period (last page this line number or	42611.32					

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

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13b Transaction ID: C6EF9CB30FA6843E8990 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item ✓ Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE 04 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 400.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

13b Transaction ID: C55D854CB484C45789CA NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 09 0.00 09 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 52 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: CF42215AFC43F43E0BAC NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 05 2025 NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 53 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: C042CCDFC208B48B299D NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 05 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

			13b					
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Tra	ansaction ID : CC66A954A87004E4C92D					
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	Memo	☐ Memo Item					
CARLIN, JAMES, , ,			Primary General					
Mailing Address 602 JACE ROAD			Other (specify) ▼					
City	State	ZIP Code	Personal Funds of the Candidate					
SERGEANT BLUFF	IA	51054-8804	Personal Funds of the Candidate					
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This Period					
2356.71	7	0.00	2356.71					
TERMS Date Incurred	D	ate Due Interes	Rate Secured:					
M 07 01 7 Y Y 2025	M M / D D	/ Y NONE Y	0.00 % (apr) Yes X No					
List All Endorsers or Guarantors (if any) t	o Loan Source							
Full Name (Last, First, Middle Initial)		Name of Employer						
Mailing Address		Occupation	Occupation					
City State	ZIP Code	Amount Guaranteed						
City	ZIP Code	Outstanding:	9 9					
2. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer					
Mailing Address		Occupation	Occupation					
	710.0.1	Amount Guaranteed						
City	ZIP Code	Outstanding:	7					
3. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer					
Mailing Address		Occupation						
Oit.	7ID 0- 1-	Amount Guaranteed						
City	ZIP Code	Outstanding:	9					
4. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer					
Mailing Address		Occupation	Occupation					
City State	ZID Codo	Amount Guaranteed						
City	ZIP Code	Outstanding:	9 9 9					
SUBTOTALS This Period This Page (optional) 2356.71 OTALS This Period (last page in this line only)								
Carry outstanding balance only to LINE 3. Sci	nedule D. for this	s line. If no Schedule D. carn	y forward to appropriate line of Summary					

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

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13b Transaction ID: CCDEBB11F7B9240FFB27 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1200.00 0.00 1200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 02 0.00 NONE 09 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1200.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C89662E3E67134372BFE NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 7000.00 0.00 7000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 07 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 7000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: CD34E2BFC67934006B96 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item ✓ Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 08 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: CB5F303FB01014A93B21 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 22000.00 0.00 22000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 03 0.00 03 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 22000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C6C43EEABCCFE4CEF8EA NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE 07 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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			13b				
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Tran	saction ID : CEB34E412F2D2494BBBC				
LOAN SOURCE Full Name (Last, First, Mic CARLIN, JAMES, , , Mailing Address 602 JACE ROAD	ddle Initial)	☐ Memo Ite	Election: 2026 ✓ Primary General Other (specify) ▼				
City	State	ZIP Code					
SERGEANT BLUFF	IA	51054-8804	Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pay	ment To Date E	Balance Outstanding at Close of This Period				
TERMS Date Incurred	D	ate Due Interest F					
M 03 / D / Y Y Y Y Y 2025	M M / D D	/ Y Y Y Y NONE	0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if any) t	to Loan Source						
Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation	Occupation				
City	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,				
2. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address		Occupation	Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7				
3. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer	Name of Employer				
Mailing Address		Occupation					
City State	ZIP Code	Amount Guaranteed Outstanding:	, , ,				
4. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address		Occupation	Occupation				
City	ZIP Code	Amount Guaranteed Outstanding:	9 9 9				
UBTOTALS This Period This Page (optional)							

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13b Transaction ID: C0936BE661C0A4CE09AA NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 125.00 0.00 125.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE 07 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 125.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C518E4F9BE26E4F5FAB1 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3695.00 0.00 3695.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3695.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C7098BC5A7322472B9FF NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 7000.00 0.00 7000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 28 0.00 NONE 07 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 7000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C4281245090B74515ABD NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3500.00 0.00 3500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 09 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C73F1DF98906E4D75B02 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item ✓ Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 125.00 0.00 125.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 28 0.00 08 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 125.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C56A68314102E424E81F NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE 04 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: CDE78CA23D5904A6599D NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 300.00 0.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 23 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 300.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: CBA4005D11C6E4052872 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5521.75 0.00 5521.75 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 05 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5521.75 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE					Trai	nsaction ID : CC2FB74FA3EB14FABBCF		
		امام امناندا/				Flating		
LOAN SOURCE Full Name (Last, CARLIN, JAMES, , ,	FIFSL, IVIIC	adie initial)		Memo I	Item Election: 2026 Primary General			
Mailing Address 602 JACE ROAD						Other (specify) ▼		
City		State	ZIP Cod	de				
SERGEANT BLUFF		IA	8804		Personal Funds of the Candidate			
Original Amount of Loan		Cumulative Pay	Date		Balance Outstanding at Close of This Period			
100	.00			0.00	0	100.00		
TERMS Date Incurred		D	ate Due		Interest (If none,			
M 06 / D D / Y Y 2025	Υ	M M / D D		NONE Y		0.00 % (apr) Yes X No		
List All Endorsers or Guarantors	(if any) t	o Loan Source						
1. Full Name (Last, First, Middle II	nitial)			Name of Em	nployer			
Mailing Address				Occupation				
				Amount				
City	ZIP Code		Guaranteed Outstanding	. L	7			
2. Full Name (Last, First, Middle In	itial)	<u>'</u>		Name of Employer				
Mailing Address				Occupation				
				Amount Guaranteed				
City State ZIP Code				Outstanding:				
3. Full Name (Last, First, Middle In	itial)			Name of Employer				
Mailing Address				Occupation				
	1			Amount				
City	State	ZIP Code		Guaranteed Outstanding		9 9		
4. Full Name (Last, First, Middle In	itial)			Name of Employer				
Mailing Address		Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding	. С.	7		
SUBTOTALS This Period This Page (o	optional).				····· >	100.00		
OTALS This Period (last page in this	line only	/)			····· >	, , , , , , ,		
Carry outstanding balance only to LII	VE 2 Cal	andula D. faw this	a lina lf u	a Cabadula	D	forward to appropriate line of Common.		

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13b Transaction ID: CE79602DFBE844EBA985 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 04 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C2BFAA98E6C5A456A84C NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 04 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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					1.00			
NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE				Trans	saction ID : C2E61A91E6F5F45C3BA5			
CARLIN, JAMES, , ,	LOAN SOURCE Full Name (Last, First, Middle Initial) CARLIN, JAMES							
Mailing Address 602 JACE ROAD	General Other (specify) ▼							
City		State	de					
SERGEANT BLUFF		IA	-8804	Personal Funds of the Candidate				
Original Amount of Loan		Cumulative Pay	Date E	Balance Outstanding at Close of This Period				
1500.	00		0.00 1500.00					
TERMS Date Incurred		D	Interest F (If none, e					
M M / D D / Y Y Y 2025	Υ	M M / D D	/ Y	NONE 0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if any) to	Loan Source						
1. Full Name (Last, First, Middle In				Name of Employer				
Mailing Address				Occupation				
				Amount				
City	ZIP Code		Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Init	tial)		Name of Employer					
Mailing Address			Occupation					
			Amount					
City	City State ZIP Code			Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Init	tial)	•	Name of Employer					
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Init	tial)	'		Name of Employer				
Mailing Address			Occupation					
			Amount					
City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , ,			
SUBTOTALS This Period This Page (optional) 1500.00								
TOTALS This Period (last page in this	line only)		······	, , ,			
Carry outstanding balance only to LIN	IE 3. Sch	edule D. for this	line. If	no Schedule D. carry f	orward to appropriate line of Summary.			

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AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Transa	ction ID : C9550677949FB400EB61
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	☐ Memo Item	Election: 2026
CARLIN, JAMES, , ,			Primary General
Mailing Address 602 JACE ROAD			Other (specify)
City	State	ZIP Code	
SERGEANT BLUFF	IA	51054-8804	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Bal	ance Outstanding at Close of This Period
2600.00		0.00	2600.00
TERMS Date Incurred	D	ate Due Interest Rat (If none, ente	
M 05	M M / D D	/ NONE Y	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address		Occupation	
Oth.	7ID 01-	Amount Guaranteed	
City	ZIP Code	Outstanding:	9 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)	•	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)			2600.00
FOTALS This Period (last page in this line only	y)	▶	
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry for	ward to appropriate line of Summary.

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

PAGE 74 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: C3A15995CCE19408D98D NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1100.00 0.00 1100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 23 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

				,	13b	
NAME OF COMMITTEE (In Full)			Tra	ansaction	ID: C7C9D1B1FF2424A19B44	
JIM CARLIN FOR US SENATE						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	Item Ele	ection: 2026	
CARLIN, JAMES, , ,	CARLIN JAMES				Primary	
Mailing Address					General Other (appoint)	
602 JACE ROAD				-	Other (specify) ▼	
City	State	ZIP Code	10.4		Personal Funds of the Candidate	
SERGEANT BLUFF	IA	51054-88	304		Z	
Original Amount of Loan	Cumulative Pay	yment To Da	ate	Balance	Outstanding at Close of This Period	
1820.00	7		0.00		1820.00	
TERMS Date Incurred	D	Date Due	Interes (If none	t Rate , enter 0)	Secured:	
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D		DNÉ Y	0.00	% (apr) Yes X No	
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)		N	lame of Employer			
Mailing Address		(Occupation			
		A	mount			
City State	ZIP Code		Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)			lame of Employer			
Mailing Address	Mailing Address			Occupation		
			mount			
City	ZIP Code		Guaranteed Outstanding:	7	7	
3. Full Name (Last, First, Middle Initial)			lame of Employer			
Mailing Address		C	Occupation			
		A	mount			
City	ZIP Code		Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle Initial)	-	N	lame of Employer			
Mailing Address		C	Occupation			
		A	mount			
City State	ZIP Code		Guaranteed Outstanding:	7	9	
SUBTOTALS This Period This Page (optional).					1820.00	
TOTALS This Period (last page in this line only				H	,	
Carry outstanding balance only to LINE 3. Sci	adula D. for this	s line If no	Schedule D. com	v forward	to appropriate line of Summon.	

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

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FOR LINE NUMBER: (check only one)

				Detailed	Summary Pag	ge 10
AME OF COMMITTEE (In Full)					Transac	tion ID : CFFCDA7A93E344975A4E
JIM CARLIN FOR US SENATE						
LOAN SOURCE Full Name (Last, F	irst, Mid	ldle Initial)			Memo Item	Election: 2026
CARLIN, JAMES, , ,						Primary General
Mailing Address 602 JACE ROAD						Other (specify) ▼
City		State	ZIP Cod	e		
SERGEANT BLUFF		IA	51054-8	8804		Personal Funds of the Candid
Original Amount of Loan		Cumulative Pay	yment To [Date	Bala	ance Outstanding at Close of This Pe
3500.0	00	3	,	0.00		3500.00
TERMS Date Incurred		D	ate Due		Interest Rate (If none, enter	
M 05	Y	M M / D D	/ Y N	NONE Y	0.	00 % (apr) Yes
List All Endorsers or Guarantors (i	f any) to	Loan Source				
1. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code Guaranteed Outstanding:				7
2. Full Name (Last, First, Middle Initial)				Name of Em	ployer	
Mailing Address				Occupation		
				Amount	-	
City	State	ZIP Code		Guaranteed Outstanding:		7 7 7
3. Full Name (Last, First, Middle Init	ial)	•		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		y y x
4. Full Name (Last, First, Middle Init	ial)	- 1		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7 7
CURTOTALS This Deviced This Deep (or	ational\					
SUBTOTALS This Period This Page (op	Juonal)					3500.00
TOTALS This Period (last page in this	line only	r)			▶	, , , , , , , , ,
Carry outstanding balance only to LIN	E 3, Sch	edule D, for this	s line. If n	o Schedule	D, carry forv	vard to appropriate line of Summa

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

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FOR LINE NUMBER: (check only one)

						-
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE					Trai	nsaction ID : CABC8744E0A404C219D7
	Tivot NAis	امام امناندا/				Floriton
CARLIN, JAMES, , ,	LOAN SOURCE Full Name (Last, First, Middle Initial) CARLIN. JAMES				Memo I	Item Election: 2026 Primary General
Mailing Address 602 JACE ROAD						Other (specify) Other
City		State	ZIP Cod	de		
SERGEANT BLUFF		IA	51054-	8804		Personal Funds of the Candid
Original Amount of Loan		Cumulative Pay	yment To	Date		Balance Outstanding at Close of This Pe
3500	.00	2	,	0.00	0	3500.00
TERMS Date Incurred		D	ate Due		Interest (If none,	
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				NONE		% (apr) Yes
List All Endorsers or Guarantors ((if any) t	o Loan Source				
1. Full Name (Last, First, Middle Ir	nitial)			Name of En	nployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding	. —	7 7 7
2. Full Name (Last, First, Middle Initial)				Name of En	nployer	
Mailing Address				Occupation		
211				Amount Guaranteed		
City	State	ZIP Code		Outstanding	. —	, , , , , , , , ,
3. Full Name (Last, First, Middle Initial)				Name of En	nployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding	. —	
4. Full Name (Last, First, Middle Ini	tial)			Name of En	nployer	
Mailing Address		Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding		. , ,
SUBTOTALS This Period This Page (o	ptional).				····· ▶	3500.00
TOTALS This Period (last page in this	line only	/)			····· >	, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance only to LIN	IE 2 Cal	andula D. faw this	. line 16 :	a Calaadula	D	forward to commonwists line of Common

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

PAGE 78 OF 98
FOR LINE NUMBER: (check only one)

13b Transaction ID: C33E5528890CF46C88CD NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item ✓ Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1600.00 0.00 1600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 05 0.00 NONE 09 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1600.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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	13b

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Transaction ID: C87767154C56742BDAE0 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 300.00 0.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 300.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

			13b		
AME OF COMMITTEE (In Full)			Fransaction ID : C57F64E07DA7247CC83F		
JIM CARLIN FOR US SENATE					
LOAN SOURCE Full Name (Last, First, M	iddle Initial)	☐ Mem	to Item Election: 2026		
CARLIN, JAMES, , ,			Primary General		
Mailing Address			Other (specify) ▼		
602 JACE ROAD					
City	State	ZIP Code	Personal Funds of the Candidate		
SERGEANT BLUFF	IA	51054-8804	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Page	ment To Date	Balance Outstanding at Close of This Period		
1700.00	,	0.00	1700.00		
TERMS Date Incurred	С		est Rate Secured: ne, enter 0)		
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y Y Y NONE	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employe	r		
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employe	r		
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:	7 7 7		
3. Full Name (Last, First, Middle Initial)		Name of Employe	1		
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employe	Name of Employer		
Mailing Address		Occupation	Occupation		
		Amount			
City State	ZIP Code	Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (optional)			1700.00		
TOTALS This Period (last page in this line on	ly)	·····			
Carry outstanding balance only to LINE 3. So	shedule D. for this	s line If no Schedule D. ca	rry forward to appropriate line of Summary		

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

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13b Transaction ID: CB743802B6B7F4298BD5 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C59BD83A0934141D0A78 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 6600.00 0.00 6600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 13 0.00 06 2025 NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6600.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

			3D
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Transaction ID : C6131DD3B772F40698A1	
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	Memo Item Election: 2026	
CARLIN, JAMES, , ,	,	Primary General	
Mailing Address 602 JACE ROAD		Other (specify) ▼	
City	State	ZIP Code	
SERGEANT BLUFF	IA	51054-8804 Personal Funds of the Candid	jate
Original Amount of Loan	Cumulative Pay	syment To Date Balance Outstanding at Close of This Pe	eriod
12000.00		0.00 12000.00	
TERMS Date Incurred	D	Date Due Interest Rate Secured: (If none, enter 0)	
M 04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	NONE 0.00 % (apr)	No
List All Endorsers or Guarantors (if any) t	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	
City	ZIF Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	710.0.1	Amount Guaranteed	
City	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
T ₂	T	Amount	
City	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)		12000.00	
FOTALS This Period (last page in this line only	y)		
Course extending belongs only to LINE 2. Cal	hadula D. fau this	is line. If no Schodule D. carry forward to appropriate line of Summa	

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FOR LINE NUMBER: (check only one)

13b Transaction ID: CBF5C86508763434CA8B NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 13 0.00 2024 NONE 12 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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			13b		
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Trans	action ID : C88A15D03423A43F4AFE		
LOAN SOURCE Full Name (Last, First, Mic CARLIN, JAMES, , , Mailing Address	ddle Initial)	☐ Memo Ite	m Election: 2026 ✓ Primary General Other (specify) ▼		
602 JACE ROAD	lo				
City SERGEANT BLUFF	State IA	ZIP Code 51054-8804	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date B	alance Outstanding at Close of This Period		
3000.00		0.00	3000.00		
TERMS Date Incurred	D	ate Due Interest R (If none, en			
03 / D28 / Y Y Y Y Y Y Y	M M / D D	/ Y Y Y Y	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:	. , . ,		
2. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City State	ZIP Code	Outstanding:	9		
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	Name of Employer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,		
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Use separate schedule(s) for each category of the Detailed Summary Page

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13b Transaction ID: C3E5034AFAEE545E6861 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1500.00 0.00 1500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 28 0.00 05 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

			13b		
AME OF COMMITTEE (In Full)			Transaction ID : CEDE1697EB4824343B5E		
JIM CARLIN FOR US SENATE					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)	☐ Mer	no Item Election: 2026 X Primary		
CARLIN, JAMES, , ,			General		
Mailing Address 602 JACE ROAD			Other (specify) ▼		
City	State	ZIP Code	V 5 45 4 64 6 54		
SERGEANT BLUFF	IA	51054-8804	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This Period		
300.00		0.00	300.00		
TERMS Date Incurred	D		est Rate Secured:		
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y Y Y NONE	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employe	r		
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:	7 7 7 7		
2. Full Name (Last, First, Middle Initial)		Name of Employe	r		
Mailing Address		Occupation			
		Amount Guaranteed			
City	ZIP Code	Outstanding:	7		
3. Full Name (Last, First, Middle Initial)		Name of Employe	or .		
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle Initial)		Name of Employe	Name of Employer		
Mailing Address		Occupation	Occupation		
		Amount			
City	ZIP Code	Guaranteed Outstanding:	7 7 7 7		
SUBTOTALS This Period This Page (optional). FOTALS This Period (last page in this line only			300.00		
			9 9		
Carry outstanding balance only to LINE 3 Sci	hadula D for this	line If no Schedule D. ca	rry forward to appropriate line of Summary		

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13b Transaction ID: C804DD973AA4E48869A8 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item ✓ Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 300.00 0.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 03 0.00 2025 NONE 07 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 300.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER:
(check only one) X 13a

13b Transaction ID: CA30F3866133F4CA686C NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 04 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C3E5F0D7A3A5247318C4 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 600.00 0.00 600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 06 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 600.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C7AC170CCB815433BA35 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 11000.00 0.00 11000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred (If none, enter 0) 0.00 05 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 11000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C1500D638231E4A22A37 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 9875.00 0.00 9875.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 02 0.00 06 NONE 2025 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 9875.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: CD3EC7625DB124DF2B1E NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1180.00 0.00 1180.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 13 0.00 06 2025 NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1180.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE				Transa	ction ID : C9B719A3D700945C1801		
LOAN SOURCE Full Name (Last, Fi	irst, Mide	dle Initial)		☐ Memo Item	Election: 2026 Primary General		
Mailing Address 602 JACE ROAD					Other (specify)		
City SERGEANT BLUFF		State	ZIP Cod 51054-		Personal Funds of the Candidate		
Original Amount of Loan		Cumulative Pay	/ment To	Date Bal	ance Outstanding at Close of This Period		
1363.0	00	7	,	0.00	1363.00		
TERMS Date Incurred		D	ate Due	Interest Rat (If none, ente			
04 / 15 / Y Y 2025	Y	/ M / D D	/ Y	NONE 0	.00 % (apr) Yes No		
List All Endorsers or Guarantors (if	f any) to	Loan Source					
1. Full Name (Last, First, Middle Init	tial)			Name of Employer			
Mailing Address	Mailing Address			Occupation			
		T		Amount Guaranteed			
City	State	ZIP Code		Outstanding:	7 7 7		
2. Full Name (Last, First, Middle Initi	2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
		T		Amount Guaranteed			
City	State	ZIP Code		Outstanding:			
3. Full Name (Last, First, Middle Initi	al)	1		Name of Employer			
Mailing Address				Occupation			
		T		Amount			
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9		
4. Full Name (Last, First, Middle Initi	ial)	!		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7		
SUBTOTALS This Period This Page (op	otional)				1363.00		
TOTALS This Period (last page in this I	ine only))					
Carry outstanding balance only to LINE	E 3. Sch	edule D. for this	line. If	no Schedule D. carry for	ward to appropriate line of Summary.		

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13b Transaction ID: C9875599B3CC84E90913 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 08 2025 NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C0F2859822B22408F9C4 NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2026 Memo Item Primary CARLIN, JAMES, , , General Mailing Address Other (specify) 602 JACE ROAD State ZIP Code City Personal Funds of the Candidate IΑ 51054-8804 SERGEANT BLUFF Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2025 NONE 03 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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					13b
AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		•	Transaction ID : CE	2294C72ACF34DBEB	53
LOAN SOURCE Full Name (Last, First, Mid CARLIN, JAMES, , , Mailing Address	ddle Initial)		Memo Item Election: Prima General Other	ıry	
602 JACE ROAD	101.1	710.0			
City SERGEANT BLUFF	State IA	ZIP Code 51054-8804	X Pers	onal Funds of the Can	ıdidate
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstar	nding at Close of This	Period
300.00	2	0.00		300.00)
TERMS Date Incurred	D		nterest Rate If none, enter 0)	Secured:	
M 07	M M / D D	/ Y Y Y Y Y NONE	0.00 %	(apr) Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7	,	
2. Full Name (Last, First, Middle Initial)	Name of Emp	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
City	ZIP Code	Amount Guaranteed Outstanding:	, , , , ,	7	
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:	7	9	
SUBTOTALS This Period This Page (optional). FOTALS This Period (last page in this line only				300.00	
Carry outstanding balance only to LINE 3. Sci	nedule D. for this	line. If no Schedule D	carry forward to app	ropriate line of Sumr	narv.

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NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Transaction ID : C98264454B9704961AF2
LOAN SOURCE Full Name (Last, First	, Middle Initial)	Memo Item Election: 2026
CARLIN, JAMES, , ,	Primary General	
Mailing Address 602 JACE ROAD		Other (specify) ▼
City	State	ZIP Code
SERGEANT BLUFF	IA	51054-8804 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
4910.00		0.00 4910.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
07 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	NONE 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if a	ny) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed
City	te ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	te ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	te ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	te ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optic	nal)	4910.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D. carry forward to appropriate line of Summary.