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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorized Committee					
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	Example: If typing over the lines.	type	12FE4M5	
JIM CARLIN FOR US	SENATE				1 1 1 1 1	
					1 1 1 1 1	
ADDRESS (number and street)	5728 SUNNYBI	ROOK DR				
Check if different than previously reported. (ACC)	SIOUX CITY				IA 5	;1106-4249
2. FEC IDENTIFICATION	NUMBER ▼	CITY 🛦		S	STATE A	ZIP CODE ▲
C C00898148		3. IS THIS REPORT	NEW (N)	OR	× AMENDE (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (0 (a) Quarterly Reports:	Choose One)	(b) 12-Day PR	E-Election Report	for the:		
April 15 Quarterly	, Report (O1)		Primary (12P)		General (12	G) Runoff (12R)
July 15 Quarterly			Convention (12	2C)	Special (129	S)
X October 15 Quar		Election o	n/	D D /	YYYY	in the State of
January 31 Year-	End Report (YE)	(c) 30-Day PO	ST-Election Repo	rt for the:		
			General (30G)		Runoff (30F	Special (30S)
Termination Repo	ort (TER)	Election o	n M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	07 / D D /	Y Y Y Y Y 2025	through	M M 09	/ 0 0 /	y y y y y 2025
I certify that I have examined Type or Print Name of Treasu	CADLIN IAM	•	knowledge and be	elief it is tru	ue, correct and	complete.
Signature of Treasurer	YARLIN, JAMES, , ,			D:	ate 10	/ 30 / 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 incomplet	e information may	y subject the perso	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) 38820.00 58525.63 (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) 38820.00 58125.63 (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 115806.46 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
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	35450.00	52500.00
	(ii) Unitemized	3370.00	6025.63
	(iii) TOTAL of contributions from individuals	38820.00	58525.63
	(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))	38820.00	58525.63
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	6671.71	115806.46
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	6671.71	115806.46
	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	64.37
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.70	1.59
	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
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	400.00
	(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 REPOR	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	m Line 22)	44476.22
27	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	1727.61

Use separate schedule(s) for each category of the

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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) BUSSING, ROBERT, , , Date of Receipt Mailing Address 2771 RAINBOW CT 2025 09 30 City State Zip Code Transaction ID: A701E09D1F91A419D8F6 MASON CITY IΑ 50401-8934 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 300.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) CHILD, ALICE, , , Date of Receipt Mailing Address 15127 ELM ST 09 30 2025 City State Zip Code Transaction ID: AC08BFC1E2D834700A4E CLEAR LAKE IΑ 50428-8918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2000.00 Other (specify) 2800.00 SUBTOTAL of Receipts This Page (optional).....

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Use separate schedule(s) for each category of the

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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) CLAYTON, BARBARA, J,, Date of Receipt Mailing Address 13265 253RD AVE 2025 30 City State Zip Code Transaction ID: A158C737EDB9A49689D0 IΑ 51360-7152 SPIRIT LAKE FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED 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 2025 08 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) DAY, HEIDI, , , Date of Receipt Mailing Address 1706 S LAKEPORT ST 09 30 2025 City State Zip Code Transaction ID: A17419360018A4B85AF7 SIOUX CITY IΑ 51106-4906 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3000.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Name of Employer

Receipt For: 2026

Primary

INFORMATION REQUESTED

Other (specify) -

General

SCHEDULE A (FEC Form 3)

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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) GARBE, RICHARD, , , Date of Receipt Mailing Address 1318 S IRENE ST 2025 30 City State Zip Code Transaction ID: A69D472504D114AF9A0D IΑ 51106-1535 SIOUX CITY FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 100.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) GARBE, RICHARD, , , Date of Receipt Mailing Address 1318 S IRENE ST 2025 09 30 City State Zip Code Transaction ID: A26A96604F1734A95A0D SIOUX CITY IΑ 51106-1535 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 300.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) GARBE, RICHARD, , , Date of Receipt Mailing Address 1318 S IRENE ST 09 30 2025 City State Zip Code Transaction ID: AAFA97D61111D4283BF6 SIOUX CITY IΑ 51106-1535 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee.

300.00

Occupation

INFORMATION REQUESTED

Election Cycle-to-Date

Memo Item

100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FEC ID number of contributing

INFORMATION REQUESTED

federal political committee.

Name of Employer

Receipt For: 2026

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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) GRECO, LANCE, , , Date of Receipt Mailing Address 257 23RD STREET DR SE 2025 12 City State Zip Code Transaction ID: A0BF7F32E9DF34D059A5 IΑ 52403-1617 **CEDAR RAPIDS** FEC ID number of contributing Amount of Each Receipt this Period C 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) Full Name (Last, First, Middle Initial) HALBE, MICHAEL, , , Date of Receipt Mailing Address 2506 RANCHWOOD CIR SE 2025 08 25 City State Zip Code Transaction ID: A3019D367C5C64EBE9D9 **ALEXANDRIA** MN 56308-9269 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) HINDMAN, SCOTT, , , Date of Receipt Mailing Address 2900 JONES ST 09 30 2025 City State Zip Code Transaction ID: A2F5C8AEB4A594BA9BF7 SIOUX CITY IΑ 51104-3653

Primary General Other (specify) ▼	1000.00								
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Occupation

INFORMATION REQUESTED

Election Cycle-to-Date

1000.00

Amount of Each Receipt this Period

Memo Item

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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) ILG, ANITA, , , Date of Receipt Mailing Address 2264 300TH AVE 2025 30 City State Zip Code Transaction ID: AAFB19E915E584555BD0 IΑ 52742-9240 DE WITT FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) JOHNSON, CAROL, , , Date of Receipt Mailing Address 3830 FOX AVE 2025 09 30 City State Zip Code Transaction ID: AAC70BC96CDC5409C856 **ODEBOLT** IΑ 51458-7542 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) KELLY, ANDREW, , , Date of Receipt Mailing Address 2255 31ST ST 09 30 2025 City State Zip Code Transaction ID: A3BC170F53E814855B69 **MARION** IΑ 52302-1479 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3500.00 Other (specify) -5000.00 SUBTOTAL of Receipts This Page (optional).....

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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) KELLY, KATIE, , , Date of Receipt Mailing Address 2255 31ST ST 2025 30 City State Zip Code Transaction ID: A13BF7E8263C44920B5F IΑ 52302-1479 **MARION** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 3500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 3500.00 Other (specify) Full Name (Last, First, Middle Initial) KELLY, LEO, , , Date of Receipt Mailing Address 827 DORCHESTER PL NE 2025 09 30 City State Zip Code Transaction ID: AF81E3BF3406C4F279A8 **CEDAR RAPIDS** IΑ 52402-7358 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 3500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) KOSON, JULIE, , , Date of Receipt Mailing Address 4908 EVERGREEN LN 09 30 2025 City State Zip Code Transaction ID: A5BC94EB79DBE42E58C5 SIOUX CITY IΑ 51106-4503 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) -7350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) LUSE, PAT, , , Date of Receipt Mailing Address 4602 DEROCHER PATH 2025 30 City State Zip Code Transaction ID: A8E0E651123B647FDB51 IΑ 51106-9504 SIOUX CITY FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 1000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) LUSE, TIM, , , Date of Receipt Mailing Address 4540 DEROCHER PATH 2025 09 30 City State Zip Code Transaction ID: AAC57FD0405CB46E4A1D SIOUX CITY IΑ 51106-9506 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 750.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 750.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) MANLEY, CHRIS, , , Date of Receipt Mailing Address 320 SO FORK PLACE 09 30 2025 City State Zip Code Transaction ID: A459C44599ED34030BB9 NE SOUTH SIOUX CITY 68776 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 500.00 Other (specify) -2250.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the 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) MCCALL, GREG, , , Date of Receipt Mailing Address 3602 SW COURT AVE 2025 30 City State Zip Code Transaction ID: AFCE82E4D31DC4642A85 IΑ 50023-9213 **ANKENY** 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) PAUTSCH, PEGGY, , , Date of Receipt Mailing Address 1127 MEADOWVIEW LN 2025 09 30 City State Zip Code Transaction ID: AE1DF8DE3184A4316B52 DAVENPORT IΑ 52806-1924 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) PHILIP, KELLY, , , Date of Receipt Mailing Address 3721 COPPERMILL RD NE 09 30 2025 City State Zip Code Transaction ID: A94F65FB15F0241B1A66 CEDAR RAPIDS IΑ 52402-7633 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 7000.00 Other (specify) -4750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) PHILIP, KELLY, , , Date of Receipt Mailing Address 3721 COPPERMILL RD NE 2025 30 City State Zip Code Transaction ID: A3736A4F683474F0B85C IΑ 52402-7633 **CEDAR RAPIDS** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 3500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 7000.00 Other (specify) Full Name (Last, First, Middle Initial) SIRES, DAVID, , , Date of Receipt Mailing Address 4107 HORSESHOE DR 2025 09 30 City State Zip Code Transaction ID: AC68693C51B634476B6C **CEDAR FALLS** IΑ 50613-4806 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 1500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) STILES, L., , , Date of Receipt Mailing Address 8740 OAKDALE DR 09 30 2025 City State Zip Code Transaction ID: AD99C998CE7574D78992 **KELLERTON** IΑ 50133 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 400.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 400.00 Other (specify) -5400.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the ITEMIZED RECEIPTS 11d 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE Full Name (Last, First, Middle Initial) TASS, CRISTY, , , Date of Receipt Mailing Address 14036 210TH ST 2025 24 City State Zip Code Transaction ID: A53536B1ABA6D4D4D9D3 IΑ 50401-9023 MASON CITY FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation RETIRED RETIRED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) UNG, DORIS, , , Date of Receipt Mailing Address 214 JACKSON ST 2025 **UNIT 1885** 09 30 City State Zip Code Transaction ID: AB4534B15CBCF4110818 SIOUX CITY IΑ 51102-8074 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) WASS-JUNKER, DEBA, , , Date of Receipt Mailing Address 721 E MAIN ST 09 30 2025 City State Zip Code Transaction ID: ADCCBF5EA6CF149E68F9 **DENVER** IΑ 50622-9538 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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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) WOLTER, BRENDA, , , Date of Receipt Mailing Address 2552 HILTON AVE 2025 30 City State Zip Code Transaction ID: ADA98E89584FB44CB8F4 IΑ 50622-1049 **DENVER** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation INFORMATION REQUESTED INFORMATION REQUESTED Memo Item Receipt For: 2026 Election Cycle-to-Date ✓ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 35450.00

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

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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 OF 83 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15					
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE								
Full Name (Last, First, Middle Initial) CARLIN, JAMES, , , Mailing Address 602 JACE ROAD			Date of Receipt					
City	State IA	Zip Code 51054-8804	07 28 2025 Transaction ID : A7098BC5A7322472B9FF					
SERGEANT BLUFF FEC ID number of contributing federal political committee.	C S6IA0	1 1 1 1 1	Amount of Each Receipt this Period					
Name of Employer SELF Receipt For: 2026 ✓ Primary General Other (specify) ▼	Occupation CANDIDATE Election Cycle	e-to-Date ▼ 115806.46	Memo Item LOAN FROM CANDIDATE					
Full Name (Last, First, Middle Initial) 3. Mailing Address City Stat		Zip Code	Date of Receipt					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Election Cycle	e-to-Date	Memo Item					
Full Name (Last, First, Middle Initial) C. Mailing Address	Date of Receipt							
City	State	Zip Code						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Election Cycle	e-to-Date	Memo Item					
SUBTOTAL of Receipts This Page (optional)			6671.71					

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

6671.71

83 PAGE 17 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 1776 LAW CENTER 2025 06 Mailing Address PO BOX 1505 City State Zip Code **FEC Identification Number** TN HIXSON 37343-5505 Purpose of Disbursement 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).....

83 **PAGE** 18 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. 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).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

83 **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

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. 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).....

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

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. DYNES DESIGN 05 2025 Mailing Address 1805 HARDING CT State Zip Code City **FEC Identification Number** IΑ **BETTENDORF** 52722-3930 Purpose of Disbursement **PRINTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1632.38 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B52311CE76B6845A0ACF Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. EVENTBRITE Date of Disbursement Mailing Address 95 3RD ST 2025 City State Zip Code **FEC Identification Number** SAN FRANCISCO CA 94103-3103 Purpose of Disbursement **FUNDRAISING EVENT FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 325.65 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BC4E038E3C5A348C7A89 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. EVENTBRITE Mailing Address 95 3RD ST 07 2025 City Zip Code State **FEC Identification Number** SAN FRANCISCO 94103-3103 CA Purpose of Disbursement **FUNDRAISING EVENT FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 108.55 Office Sought: House Senate Primary General Transaction ID: BF514AC9AF96D483FA32 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2066.58 TOTAL This Period (last page this line number only).....

83 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. FLEET FARM 28 2025 Mailing Address 2401 S MEMORIAL DR Zip Code City State **FEC Identification Number APPLETON** 54915-1429 Purpose of Disbursement **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 State Zip Code **FEC Identification Number** WI **APPLETON** 54915-1429 Purpose of Disbursement **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 49.11 Disbursement For: 2026 Office Sought: 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 State Zip Code **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 General Senate 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).....

83 PAGE 22 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. 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).....

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for each category of the Detailed Summary Page	X 17	18		19a		19b		
Detailed Suffiffiary 1 age	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.								

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad 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 Zip Code City State **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: State: Full Name (Last, First, Middle Initial) **B.** HILTON HOTELS Date of Disbursement Mailing Address 7930 JONES BRANCH DR 2025 09 City Zip Code State **FEC Identification Number MCLEAN** VA 22102-3388 Purpose of Disbursement **LODGING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 76.80 Office Sought: Disbursement For: 2026 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 General Primary 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).....

83 PAGE 24 FOR LINE NUMBER: (check only one) X 17 18 19a 20a 20b 20c 21

Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b 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) Date of Disbursement A. HY-VEE 2025 Mailing Address 5820 WESTOWN PKWY 02 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).....

83 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

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 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 20.59 Office Sought: House Senate Primary General Transaction ID: B244F3F511D4C4A2DBF8 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. HY-VEE Date of Disbursement Mailing Address 5820 WESTOWN PKWY 2025 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: B894F8BB6F53B4EFF901 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HY-VEE Mailing Address 5820 WESTOWN PKWY 23 07 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 9.05 Office Sought: House General Senate Primary Transaction ID: B34138780A4BE489C828 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 42.25 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

83 PAGE 26 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 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).....

State:

District:

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

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

83 PAGE 27 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

71.03

83 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. 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 IΑ 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).....

83 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 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 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).....

83 PAGE 30 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c

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 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).....

83 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

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).....

83 PAGE 32 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).....

83 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

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 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).....

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y not be sold or used by any person for the purpose of soliciting contributions								

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may 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 State Zip Code City **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement C **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 District: State: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 08 City Zip Code State **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 General Primary 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).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

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

/	JIM CARLIN FOR US SENATE									
	Full Name (Last, First, Middle Initial)									
۱.	INTUIT				Date of Disbursement					
	Mailing Address 2700 COAST AVE	08 / 08 2025								
	City MOUNTAIN VIEW	State CA	Zip Code 94043-1140		FEC Identification Number					
	Purpose of Disbursement PAYROLL WAGES									
	Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
	Office Sought: House Disburs	sement For: 2 Primary Other (spec	General		1015.86 Transaction ID: BDFB0F7DEA60F43B1900 Memo Item					
	Full Name (Last, First, Middle Initial)									
3.	INTUIT				Date of Disbursement					
	Mailing Address 2700 COAST AVE	ddress 2700 COAST AVE								
	City	State CA		FEC Identification Number						
	MOUNTAIN VIEW Purpose of Disbursement	LA								
	PAYROLL FEES	001	C							
	Candidate Name	andidate Name Category/ Type								
	Office Sought: House Disburs									
	Senate	Primary	General		Transaction ID : BD494113216B143F4AF6					
	President	Other (spec	cify) 🔻		Memo Item					
	State: District:									
	Full Name (Last, First, Middle Initial) INTUIT				Date of Disbursement					
' .					M M / D D / Y Y Y					
	Mailing Address 2700 COAST AVE	ig Address 2700 COAST AVE								
	City	State	Zip Code		FEC Identification Number					
	MOUNTAIN VIEW Purpose of Disbursement	CA	94043-1140							
	PAYROLL FEES	C								
	Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
	Office Sought: House Disburs	129.29								
	Senate	Transaction ID: B23F471ECA49A49DDA15								
	President	Other (spec	cify) ▼		Memo Item					
	State: District:									
	SUBTOTAL of Disbursements This Page (optional	ıl)		······································	1274.44					
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State:

District:

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

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

83 PAGE 36 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. INTUIT 2025 15 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: BFCCF00EBB64445A89CF Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 15 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: B637791C716DE46A1AC4 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 80 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: BEF4D4886C18E4EBBAEB President Other (specify) Memo Item

1613.38

83 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 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).....

83 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

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 29 2025 Mailing Address 2700 COAST AVE City State Zip Code **FEC Identification Number** CA MOUNTAIN VIEW 94043-1140 Purpose of Disbursement C **PAYROLL TAXES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 473.59 Office Sought: House Senate Primary General Transaction ID: B5526C716075A48D28DC 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 161.61 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B84973DC9DC534BA1B8A Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. INTUIT Mailing Address 2700 COAST AVE 09 02 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 113.00 Office Sought: House Senate Primary General Transaction ID: BEDCEC42445614D16A1C President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 748.20 TOTAL This Period (last page this line number only).....

83 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 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).....

83 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

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 **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 General Senate Primary 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).....

83 PAGE 41 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 **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).....

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ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may 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 26 State Zip Code City **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 District: State: Full Name (Last, First, Middle Initial) B. INTUIT Date of Disbursement Mailing Address 2700 COAST AVE 2025 09 City Zip Code State **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 General Primary 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).....

83 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. J53 PRODUCTIONS 29 2025 Mailing Address 3425 E LOCUST ST STE 201 State City Zip Code **FEC Identification Number** IΑ DAVENPORT 52803-3573 Purpose of Disbursement VIDEO PRODUCTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1308.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B42100E661F7D40D98DA Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. JUDGE PUBLIC RELATIONS Date of Disbursement Mailing Address PO BOX 2336 2025 09 City State Zip Code **FEC Identification Number** DADE CITY FL 33526-2336 Purpose of Disbursement **CAMPAIGN CONSULTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 3500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BACD0626327694F1A919 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. KWIK STAR Mailing Address 1626 OAK ST 80 25 2025 City State Zip Code **FEC Identification Number** LA CROSSE WI 54603-2308 Purpose of Disbursement **TRAVEL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 25.97 Office Sought: House Senate Primary General Transaction ID: B7721191E665C4937870 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 4833.97 TOTAL This Period (last page this line number only).....

83 PAGE 44 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. 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).....

83 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

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 **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 1.28 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).....

83 PAGE 46 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. 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).....

ITEMIZED DISBURSEMENTS

Image# 202510309792072901 83 PAGE 47 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) 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. 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

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

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

ITEMIZED DISBURSEMENTS

Senate

District:

State:

President

Primary

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

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

Other (specify)

General

Image# 202510309792072902 83 PAGE 48 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) 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. 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

15.53

Transaction ID: BC432BF54F03A4D378E9

Memo Item

83 PAGE 49 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c

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 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).....

83 PAGE 50 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c 21

for each category of the ITEMIZED DISBURSEMENTS 19b 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) 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).....

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y not be sold or used by any	person for	the purpo	ose	of so	liciting	cont	ributio	ons

ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may 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. THE IOWA STANDARD 2025 25 Mailing Address PO BOX 112 State Zip Code City **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 Zip Code State **FEC Identification Number** DC WASHINGTON 20260-0001 Purpose of Disbursement **SHIPPING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 111.70 Office Sought: Disbursement For: 2026 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 General Primary 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).....

83 PAGE 52 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. USPS 2025 Mailing Address 475 LENFANT PLZ SW 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 Disbursement For: 2026 130.95 Office Sought: House Senate Primary General Transaction ID: BE447F2B891754650A65 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** WALMART Date of Disbursement Mailing Address 702 SW 8TH ST 2025 City State Zip Code **FEC Identification Number BENTONVILLE** AR 72716-6209 Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 38.50 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B892FB20BABAB4952944 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. ZEFFY Mailing Address 651 N BROAD ST 09 23 2025 STE 206 City State Zip Code **FEC Identification Number MIDDLETOWN** 19709-6402 DE Purpose of Disbursement OFFICE SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 183.95 Office Sought: House Senate Primary General Transaction ID: B63AC8140391A4A659AC President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 353.40 TOTAL This Period (last page this line number only)..... 42611.32

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

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83

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 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)..... 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:
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83

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 55 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

PAGE 56 OF FOR LINE NUMBER: **X** 13a (check only one)

83

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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AME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE					Trai	ansaction ID : CEB34E412F2D2494BB	ВС
	inat Mia	امام اسنئنما/				Flori's conso	
LOAN SOURCE Full Name (Last, F CARLIN, JAMES, , ,	rst, Mic	adie initial)			Memo I	Item Election: 2026 Primary General	
Mailing Address 602 JACE ROAD						Other (specify) ▼	
City		State	ZIP Cod	de			
SERGEANT BLUFF		IA	51054-	8804		Personal Funds of the Car	ndidate
Original Amount of Loan		Cumulative Pay	ment To	Date		Balance Outstanding at Close of This	Period
1000.0	00	2		0.00	0	1000.00	0
TERMS Date Incurred		D	ate Due		Interest (If none,		
M 03 / D D / Y Y 2025	Υ	M M / D D	/ Y	NONE Y		0.00 % (apr) Yes	X No
List All Endorsers or Guarantors (i	f any) t	o Loan Source					
1. Full Name (Last, First, Middle In	itial)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	tate ZIP Code Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Init	ial)	'		Name of Em	nployer		
Mailing Address				Occupation			
				Amount Guaranteed			
City	State	ZIP Code		Outstanding	: -	7 7 7	
3. Full Name (Last, First, Middle Init	ial)	·		Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding	: -	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
4. Full Name (Last, First, Middle Initial)				Name of Em	nployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed	Τ.		
J., J		2 3000		Outstanding	: -	7	
SUBTOTALS This Period This Page (o	ptional)				····· >	1000.00)
TOTALS This Period (last page in this	line only	/)			····· >	, , , , , , , , , , , , , , , , , , , ,	
Carry outstanding balance only to LIN	F 0 C-1	andula D. fav. tlata	lina If:	o Colondui	D	s famurand to appropriate line of Com-	

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

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					1.00			
NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE				Transa	action ID : C518E4F9BE26E4F5FAB1			
LOAN SOURCE Full Name (Last, First CARLIN, JAMES, , ,	st, Middle	e Initial)		☐ Memo Item	Election: 2026 Primary General			
, , , , , , , , , , , , , , , , , , ,								
602 JACE ROAD	Mailing Address 602 JACE ROAD							
City		tate	ZIP Cod		Personal Funds of the Candidate			
SERGEANT BLUFF		IA	51054-	·8804 				
Original Amount of Loan		Cumulative Pay	ment To		lance Outstanding at Close of This Period			
3695.00		, ,		0.00	3695.00			
TERMS Date Incurred		Da	ate Due	Interest Ra (If none, ente				
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	М	M / D D	/ Y	NONE (0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if a	any) to L	Loan Source						
1. Full Name (Last, First, Middle Initia	al)			Name of Employer				
Mailing Address	Mailing Address			Occupation				
				Amount				
City	ate	ZIP Code		Guaranteed Outstanding:	7 7			
2. Full Name (Last, First, Middle Initial	2. Full Name (Last, First, Middle Initial)							
Mailing Address				Occupation				
				Amount				
City	ate	ZIP Code		Guaranteed Outstanding:	y y			
3. Full Name (Last, First, Middle Initial	l)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	ate	ZIP Code		Guaranteed Outstanding:	9 9			
4. Full Name (Last, First, Middle Initial	1)			Name of Employer				
Mailing Address			Occupation					
<u> </u>				Amount				
City	ate	ZIP Code		Guaranteed Outstanding:	7			
SUBTOTALS This Period This Page (option	ional)			······	3695.00			
TOTALS This Period (last page in this lin	ne only)			······				
Carry outstanding balance only to LINE	3. Sched	lule D. for this	line. If	no Schedule D. carry for	ward to appropriate line of Summary.			

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FOR LINE NUMBER:
(check only one)

: X 13a

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AME OF COMMITTEE (In Full)	NATE		Transaction ID: C7098BC5A7322472B9FF
IIM CARLIN FOR US SEI LOAN SOURCE Full Name		ddle Initial)	Mome Item Election: 2026
CARLIN, JAMES, , ,	☐ Memo Item		
Mailing Address		General Other (specify) ▼	
602 JACE ROAD			——————————————————————————————————————
City		State	ZIP Code S1054-8804 Personal Funds of the Candidate
SERGEANT BLUFF		IA	51054-8804
Original Amount of Loan		Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
	6671.71	7	0.00 6671.71
TERMS Date Incurred		1	Date Due Interest Rate Secured: (If none, enter 0)
M M / D D / Y	^y 2025	M M / D I	/ NONE 0.00 % (apr) Yes No
List All Endorsers or Guara	antors (if any)	to Loan Source	
1. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Michael Last, First, First, Michael Last, First, Fir	ddle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
NIDTOTALO TI: D : LTI: L	-	·	
SUBTOTALS This Period This	-age (optional)		6671.71
TOTALS This Period (last page	in this line on	y)	
Carry outstanding halance only	to LINE 3 So	hedule D. for thi	s 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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13b Transaction ID: CC2FB74FA3EB14FABBCF 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) 03 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 City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code 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 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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				Detailed S	Summary Pag	e 13b
ME OF COMMITTEE (In Full)					Transac	tion ID : C2BFAA98E6C5A456A84C
M CARLIN FOR US SEN	IATE					
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)			Memo Item	Election: 2026
CARLIN, JAMES, , ,						Primary General
Mailing Address 602 JACE ROAD						Other (specify)
City		State	ZIP Code	<u> </u>		-
SERGEANT BLUFF		IA	51054-8			Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To D	Date	Bala	nce Outstanding at Close of This Perio
, , ,	5000.00		, ,	0.00		5000.00
TERMS Date Incurred		D	Date Due		Interest Rate (If none, enter	
	2025	M M / D D		ĬONĚ	0.0	00 % (apr) Yes X No
List All Endorsers or Guarar	ntors (if any)	to Loan Source				
1. Full Name (Last, First, Mic	ddle Initial)			Name of Emp	oloyer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		, , , , , ,
2. Full Name (Last, First, Mid	dle Initial)			Name of Emp	oloyer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
3. Full Name (Last, First, Mid	dle Initial)			Name of Emp	oloyer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
4. Full Name (Last, First, Mid	dle Initial)			Name of Emp	oloyer	
Mailing Address				Occupation		
				Amount	_	
City	State	ZIP Code		Guaranteed Outstanding:		7
	<u> </u>					
JBTOTALS This Period This P	age (optional).				▶	5000.00
OTALS This Period (last page	in this line onl	y)			•	
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13b Transaction ID: C9550677949FB400EB61 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 2600.00 0.00 2600.00 **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)..... 2600.00 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: 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.

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13b Transaction ID: CFFCDA7A93E344975A4E 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) 09 0.00 NONE 05 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: CABC8744E0A404C219D7 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) 03 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)..... 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: C57F64E07DA7247CC83F 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 1700.00 0.00 1700.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 23 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)..... 1700.00 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: 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 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)..... 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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13b Transaction ID: C6131DD3B772F40698A1 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 12000.00 0.00 12000.00 **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)..... 12000.00 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: 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 ž024 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 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)..... 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.

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

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13b Transaction ID: C88A15D03423A43F4AFE 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) 28 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)..... 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

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X 13a (check only one) Detailed Summary Page 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.

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

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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 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)..... 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: 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.

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(check only one)

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NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE				Tran	saction ID : C1500D638231E4A22A37			
LOAN SOURCE Full Name (Last, F	First, Mid	dle Initial)		☐ Memo Ite	Election: 2026			
CARLIN, JAMES, , ,				_ Wello it	Primary General			
Mailing Address 602 JACE ROAD	Other (specify) ▼							
City		State	ZIP Co	de				
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			
9875.	.00	,		0.00	9875.00			
TERMS Date Incurred		D	ate Due	Interest F (If none, e				
M 06 / D D / Y Y 2025	Y	M M / D D	/ Y	NONE Y	0.00 % (apr) Yes No			
List All Endorsers or Guarantors ((if any) to	Loan Source						
1. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	, , , , , ,			
2. Full Name (Last, First, Middle Ini	tial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,			
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
,	State	ZIP Code		Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)				Name of Employer				
Mailing Address				Occupation				
		1		Amount				
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7 7			
SUBTOTALS This Period This Page (o	ptional)			>	9875.00			
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 1	orward to appropriate line of Summary.			

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

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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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(check only one)

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			130				
NAME OF COMMITTEE (In Full) JIM CARLIN FOR US SENATE		Transac	tion ID : C9B719A3D700945C1801				
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Election: 2026				
CARLIN, JAMES, , ,	adic iiiliaij	∐ Memo Item	Primary General				
Mailing Address 602 JACE ROAD	Other (specify) ▼						
City	State	ZIP Code	Personal Funds of the Candidate				
SERGEANT BLUFF	IA	51054-8804	Tersorial Funds of the Candidate				
Original Amount of Loan	Cumulative Page	ment To Date Bala	nce Outstanding at Close of This Period				
1363.00		0.00	1363.00				
TERMS Date Incurred	С	ate Due Interest Rate (If none, enter					
04 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y Y Y Y O.	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	Name of Employer				
Mailing Address		Occupation	·				
	710.0.1	Amount Guaranteed					
City State	ZIP Code		7				
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
011	710.0.1	Amount Guaranteed					
City State	ZIP Code		7				
3. Full Name (Last, First, Middle Initial)		Name of Employer	me of Employer				
Mailing Address		Occupation					
City State	ZIP Code	Amount Guaranteed					
	211 0000	Outstanding:	-				
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
City State	ZIP Code	Amount Guaranteed					
		Outstanding:	, ,				
SUBTOTALS This Period This Page (optional)			1363.00				
TOTALS This Period (last page in this line only	y)		. , ,				
Carry outstanding balance only to LINE 3, Sci	hedule D, for this	line. If no Schedule D, carry forv	vard 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 03 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)..... 2000.00 TOTALS This Period (last page in this line only) 115806.46 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.